



# 2024 Annual Report of Wellpath Medical & Mental Health Services

*presented to the*

**Santa Barbara County Sheriff's Office**  
**Santa Barbara, California**  
Bill Brown, Sheriff



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2024



## *“Always Do the Right Thing”*

Some think this guiding principle is simply an aspirational company tagline, but it was said to us by one of our long-term county partners: “What I appreciate most about working with you, is I can count on you to always do the right thing.” From exam room to corporate boardroom, this code is our beacon of excellence and what makes the difference to patients, people, and partners.



# Local Government



## Our Vision

Where are we going.

Wellpath strives to be the best at providing hope and healing to the most vulnerable populations in our communities.

## Our Strategic Priorities

What matters to us.

- Engaged **people**
- Quality care for **patients**
- Proud **partners**
- Excellent stewardship/  
**performance**
- Repeatable, efficient, and  
effective **processes**



## Our Values

What we honor.

- Humility
- Honesty
- Hunger
- Hard work
- Humor

## Operating Principles

How we behave.

- We assume positive intent
- We communicate respectfully,  
timely, and with meaning
- We do not allow the urgent to  
overtake the important
- We own our business || "We" are "They"
- We are servant leaders

**To hope and healing.**

## Introduction

**The healthcare services provided to the patients in Santa Barbara County, are provided by CFMG and contracted to Wellpath. This report summarizes the medical, mental health and ancillary care provided during the past contract year.**

As Health Services Administrator, I want to take a moment to express my sincere appreciation for the invaluable partnership between Wellpath and the Santa Barbara County Sheriff's Office. Since we first began our collaboration in 2017, we have worked together with a shared commitment to providing exceptional healthcare to the incarcerated population at a responsible cost, while supporting the health and well-being of the broader community. Our relationship, built on trust and professionalism, has allowed us to make tremendous strides over the years.

Looking back at the past year, I am especially proud of what we have accomplished together. The progress we've made in enhancing both medical and mental health services within the correctional facility has been significant. Our collaborative efforts have addressed a wide range of healthcare needs, particularly for those with behavioral and mental health challenges. I would like to personally thank Sheriff Brown, Chief Wasilewski, Commander Sullivan, and Lieutenant Marking for their leadership, dedication, and unwavering support. Their contributions have played a pivotal role in strengthening our medical programs, ensuring we provide the best care possible to those who need it most.

I am equally proud of the incredible team of medical and mental health professionals who work in the facility every day. These dedicated individuals, often working in challenging circumstances, go above and beyond to ensure that the individuals in our care receive the support they need. Their commitment, compassion, and expertise have made a tremendous impact on the lives of so many, and I am deeply grateful for their unwavering service. This team is the heart of our success, and their tireless efforts are a driving force behind the improvements we've made in the past year.

**Our teams have collaborated to raise the effectiveness of medical and mental health services.**

The success we've achieved is a testament to the hard work and commitment of both our teams. It is not something we take for granted, and I am proud of the impact we've made on the lives of so many incarcerated individuals. Together, we've overcome challenges and built a strong foundation for the future.

As we look ahead, I am excited to build on this momentum. The coming year presents new opportunities to continue expanding our services, improving access to care, and increasing the effectiveness of our healthcare programs. I am confident that, by working together, we will continue to make positive strides in providing compassionate, effective healthcare to the incarcerated population in Santa Barbara County.

We will face new challenges, but we will meet them head-on as a unified team. Our shared commitment to "always doing the right thing" will guide us as we continue to grow, evolve, and provide the best possible care for our patients.

Sincerely,

**Bailey Fogata**

Health Services Administrator  
Santa Barbara County Sheriff's Office  
805-681-5336  
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## Process

### Services Provided

- Initial medical receiving screen
- Initial mental health screen
- Withdrawal monitoring and treatment from intake
- Medication-assisted treatment (MAT), including Vivitrol, Suboxone, and Methadone
- Provided Moral Recognition Therapy (MRT) to MAT patients
- Confidential encounters
- Nursing protocols to guide care
- Continuation of care, including medications
- Management of chronic diseases
- Laboratory testing
- On-call provider 24/7
- Comprehensive mental health care
- Mental health groups
- Crisis management
- Suicide prevention protocols and training
- Psychiatrist and psychiatric nurse practitioner management of mental health medications and treatment Jail-Based Competency Treatment (JBCT)
- Substance abuse counseling
- Discharge planning (discharge meds & connection to outside services on release)
- Pharmaceutical management
- Dental care
- Optometrist and prescription glasses
- Off-site specialty care
- On-site ancillary services (X-rays, EKGs)
- Medical record management and maintenance
- Title XV Standardization
- STI Testing available to all patients
- Baseline Labs available to all patients

## Disaster Planning

Wellpath ensures that emergency equipment and supplies are readily available on-site and properly maintained. Our Emergency Preparedness Plan emphasizes the correct use of response equipment to ensure swift action when needed. Healthcare staff are trained to respond within four minutes of an emergency, with regular proficiency checks and annual core competency assessments to maintain readiness.

The plan clearly defines staff roles during emergencies, ensuring efficient staff recall, safe patient relocation, and the availability of essential equipment. It fully complies with NCCHC and ACA standards.

Emergency preparedness training covers a range of scenarios, including "man down" incidents, fires, and altercations. New employees are introduced to the plan during orientation, and all staff engage in an annual review. We continually assess and update the plan to ensure seamless care during crises such as fires, floods, or other disasters.



Last year, we conducted several drills, including a mass disaster exercise at both SBJ and NBJ. This drill, which involved an altercation on a bus, demonstrated the effective collaboration between Wellpath and Custody teams in addressing the medical needs of patients while managing the safety and security of all involved. Custody command staff and Wellpath administration also participated in the drill to provide oversight, education, and support for the team, ensuring a comprehensive and coordinated response.

## Medication Assisted Treatment (MAT)

2024 was a significant year of growth for our Medication-Assisted Treatment (MAT) program, with several key accomplishments that have enhanced our ability to serve individuals in need and strengthen the impact of our services. We welcomed a new SUD Counselor at NBJ, increasing our capacity for counseling services. Additionally, we expanded our service offerings to be fully bilingual in both English and Spanish, improving accessibility for a wider population. Our program introduced a new Cognitive Behavioral Therapy (CBT) curriculum and Moral Reconciliation Therapy (MRT) groups, broadening the therapeutic options available to our patients.

We celebrated the success of 18 graduates throughout the year, holding five graduation ceremonies to honor their achievements. A major milestone was the elimination of waitlists at both facilities, allowing us to provide care to more individuals. As a result, we served a total of 786 individuals in 2024, a significant increase from 283 in 2023, with 290 successfully discharged back into the community. MAT medications were initiated for 441 individuals while in custody, ensuring timely access to treatment. To improve care, we also streamlined the referral process for MAT patients by adding new tabs in COR EMR, further enhancing operational efficiency.

Our commitment to comprehensive discharge support remained strong, with all discharged patients receiving a backpack containing Narcan and key community resources. Additionally, we ensured continuity of care by scheduling follow-up appointments with community-based MAT providers for all MAT patients.

Overdose prevention efforts were successful, as we saw a decrease in overdoses from 21 in 2023 to 12 in 2024, with the majority occurring at intake rather than within housing units.

Counseling and support services played a crucial role, with our SUD Counselors conducting 1,111 counseling sessions. The MAT Coordinator completed 2,430 face-to-face visits, maintaining consistent, individualized care for our patients. Beyond direct services, our team contributed to the broader community by presenting at the California Jail Programs Association conference and engaging in discussions at Santa Barbara County Opioid Coalition meetings and other professional forums.

We also prioritized ongoing training and professional development. Our team attended NCCHC and MAT training sessions hosted by the Santa Barbara County Department of Behavioral Wellness, and all MAT staff participated in PREA training to stay current on best practices and regulatory requirements. These efforts have ensured that our team is well-equipped to meet the needs of the individuals we serve.

As we reflect on the accomplishments of 2024, we are proud of the strides made in expanding our services, improving patient outcomes, and fostering community collaboration. We are excited to build on this momentum and continue advancing our MAT program in the year ahead.

**Our state-of-the-art MAT program included treating 557 patients with Buprenorphine, 94 patients with Methadone, and 63 patients with Vivitrol/Naltrexone on release.**

### **Medication-Assisted Treatment (MAT) Program: Goals for 2025**

As part of our ongoing commitment to improving the quality of care and outcomes for individuals in the Medication-Assisted Treatment (MAT) program, we have identified several key goals for 2025. These goals are aimed at enhancing services, reducing recidivism, and supporting long-term recovery for both patients within the facility and the broader community.

#### **1. Expand Counseling Services**

In 2025, the MAT program will prioritize the expansion of counseling services. This includes increasing access to individual therapy for participants in the MAT program and, where appropriate, referring community providers, who offer counseling services, to the families of those in recovery. Offering comprehensive counseling will help provide holistic support, addressing both individual needs and family dynamics, which is essential for a successful recovery journey.

#### **2. Maintain State Certifications**

We understand the importance of maintaining a highly skilled, knowledgeable staff to deliver high-quality care within the MAT program. In 2025, we will ensure all MAT program staff complete the necessary Continuing Education Units (CEUs) and other relevant training. This commitment will ensure that our staff remains well-equipped to provide effective treatment, while also ensuring our program remains compliant with state certification requirements.



### **3. Establish Substance Use Disorder (SUD) Group Counseling**

A key initiative for 2025 is the introduction of group counseling sessions specifically tailored for individuals battling Substance Use Disorder (SUD). These group counseling sessions, facilitated within the Behavioral Health Units, will offer peer support, helping inmates connect with others who share similar recovery experiences. This initiative aims to foster a supportive environment and strengthen the therapeutic process by building a sense of community for participants.

### **4. Decrease Overdoses in Custody and Communities**

The safety and well-being of both our facility and the surrounding community are a top priority. In 2025, we will continue to implement harm reduction strategies to address and prevent overdose incidents. This includes expanding overdose prevention education, raising awareness, and fostering strong partnerships with local public health and safety organizations. Our goal is to equip individuals with the tools they need to stay safe throughout their recovery process and reduce the number of overdoses in both the facility and surrounding areas.

### **5. Lower Recidivism Through Enhanced Discharge Planning**

Reducing recidivism remains a key objective for 2025. To support this, we will enhance our discharge planning procedures for inmates leaving the MAT program. Our discharge plans will focus on creating smooth transitions into the community, incorporating "warm handoffs" to external service providers, and connecting individuals with community resources. This will help sustain recovery, reduce the likelihood of reoffending, and ensure individuals have the support they need as they reintegrate into society.

### **6. Reduce Stigma Around MAT**

Despite the proven effectiveness of MAT in the recovery process, stigma surrounding its use remains a barrier. In 2025, we will continue our efforts to combat the misconceptions and stigma associated with MAT. Through education and advocacy, we aim to foster greater understanding among inmates, staff, and the broader community about the critical role MAT plays in supporting long-term recovery. By reducing stigma, we can create a more supportive and inclusive environment for those participating in the program.

### **7. Reduce Diversion of MAT Medications in Custody**

Ensuring the integrity of the MAT program is essential to its success. To reduce the risk of MAT medications being diverted for non-medical purposes, we will strengthen our monitoring protocols and enhance security measures within the facility. These improvements will ensure that MAT medications are used solely for their intended purpose: to support inmates on their recovery journey and help them achieve long-term sobriety.

*These goals for 2025 reflect our ongoing dedication to improving the MAT program's effectiveness, safety, and outcomes. By addressing both the individual needs of participants and broader community concerns, we aim to provide the highest quality of care to those in the program while also contributing to long-term reductions in recidivism and substance use-related harm.*



## Mental Health Services

Over the past year, Wellpath has made significant strides in advancing mental health services and suicide prevention within the facilities. Our commitment to high-quality care has led to substantial improvements, particularly in our compliance with key provisions of the DRC's remedial plan. During the year, we have successfully improved in 15 provisions area by moving from Non-Compliance to Substantial Compliance, with many others advancing from Partial to Substantial Compliance. These efforts reflect our dedication to continuously improving the mental health care provided to individuals in our custody and ensuring their well-being.

In addition to our compliance progress, Wellpath has worked diligently to engage with the surrounding community, building relationships with organizations such as the National Alliance on Mental Illness (NAMI) and the League of Women Voters. Our mental health staff have participated in community outreach efforts by hosting tours and providing presentations to these groups. These partnerships have been crucial in creating a more transparent and supportive environment, not only for those in custody but for the broader community as well.

We would also like to take this opportunity to acknowledge the extraordinary work of our mental health professionals who serve in these demanding environments. Providing care within correctional facilities presents unique challenges, from the high stress and security concerns to the emotional toll of working with individuals in crisis. Despite these difficulties, our mental health staff remain committed to offering compassionate, high-quality care to individuals in custody. Their dedication, expertise, and resilience have been integral to the success of our programs, and their ability to work collaboratively with families, outside providers, and the treatment team has been critical to delivering effective care.

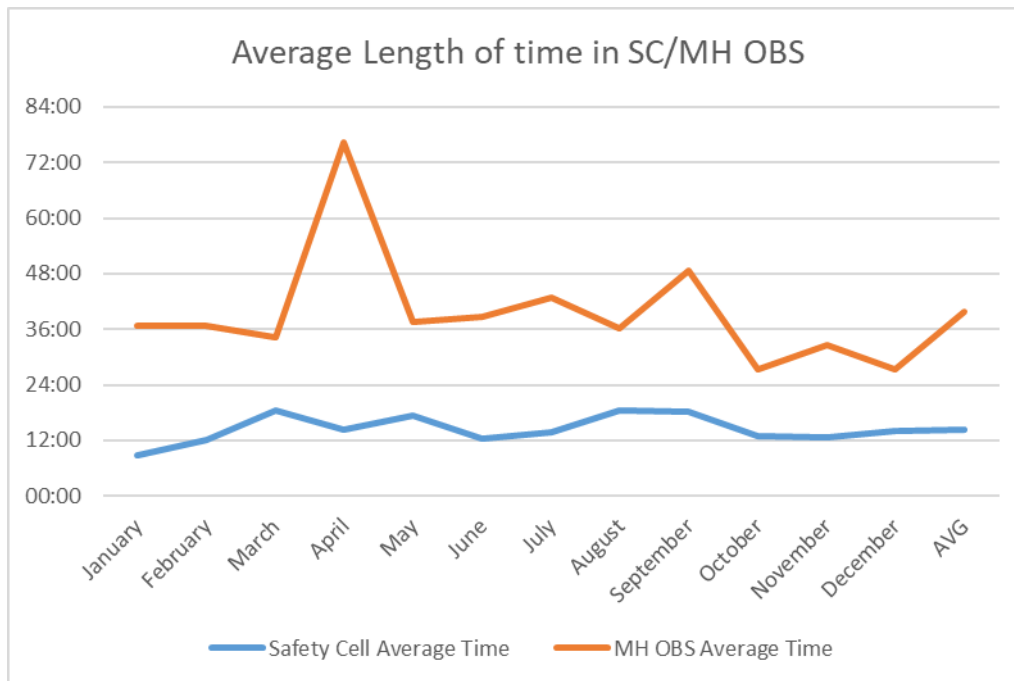
Throughout the year, Wellpath's mental health team has worked collaboratively with families, outside providers, and the treatment team to deliver holistic, individualized care. We have prioritized clear communication with families, ensuring they remain informed about their loved ones' progress and treatment plans. This collaborative approach ensures a comprehensive treatment model, aimed at addressing the mental health needs of each individual in custody.

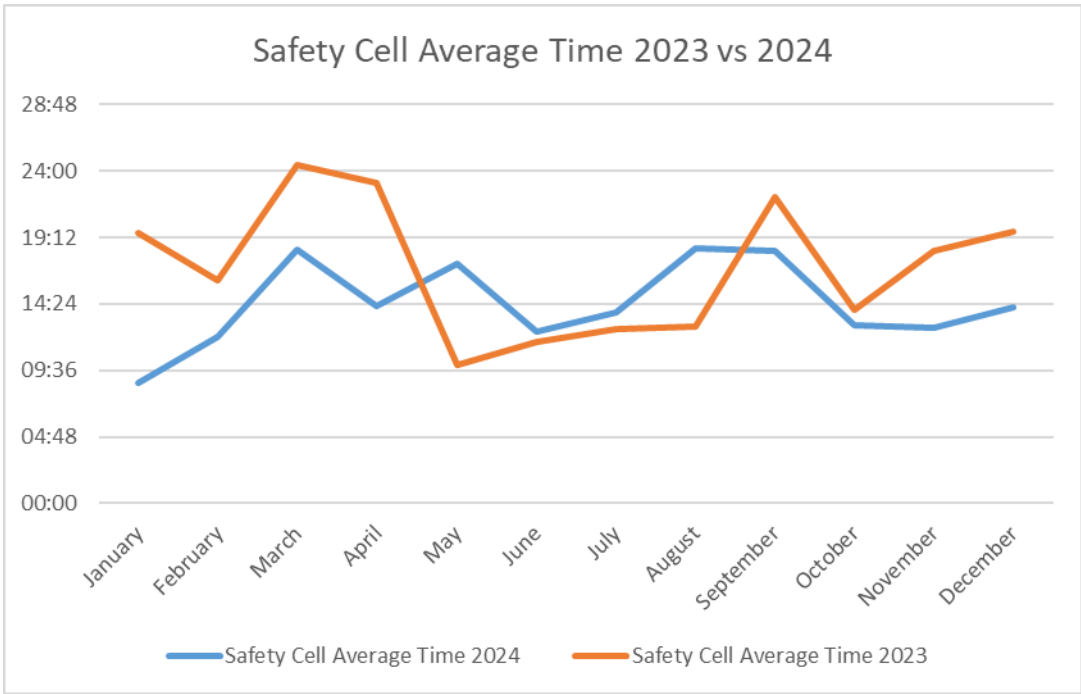
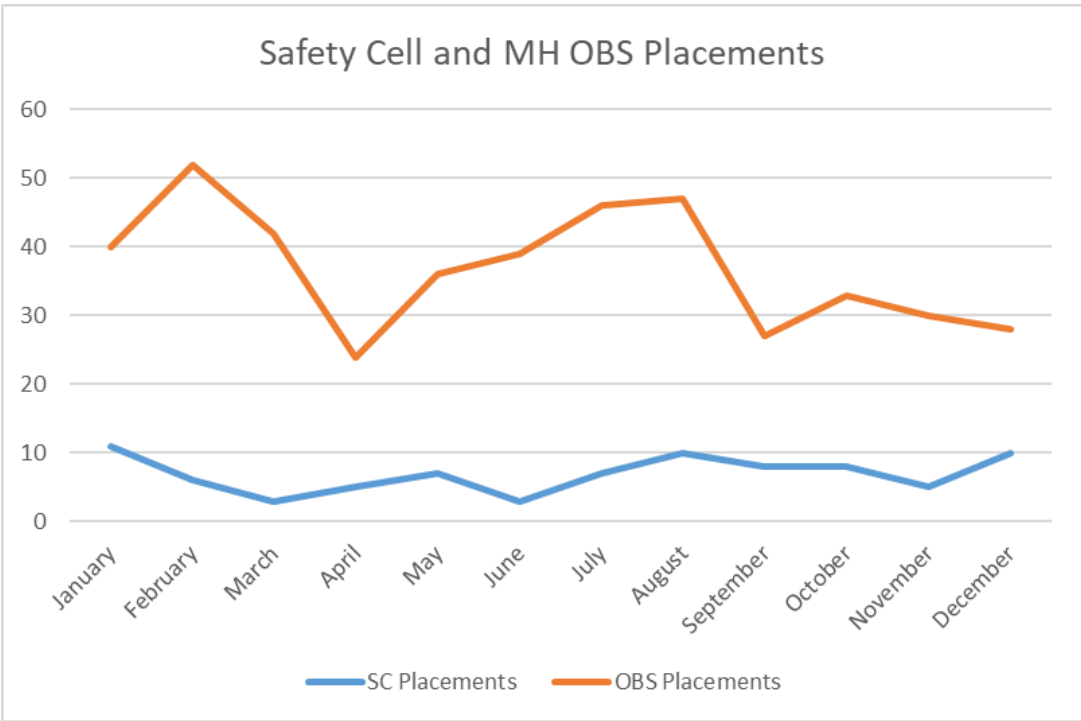
As we look toward the future, Wellpath is committed to continuing to work closely with Behavioral Wellness, ensuring that the oversight they provide will remain collaborative and effective in delivering optimal care. Our partnership with Behavioral Wellness has been instrumental in refining and improving our mental health services, and we are dedicated to further strengthening this relationship to better meet the needs of those incarcerated and preparing for reentry.

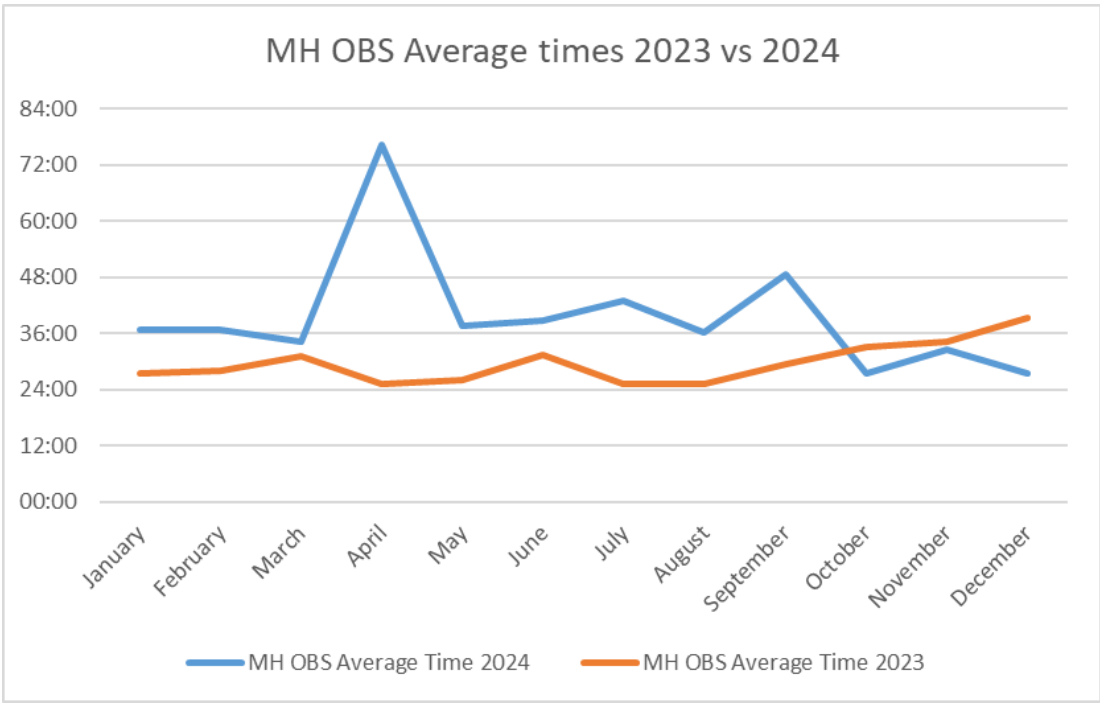
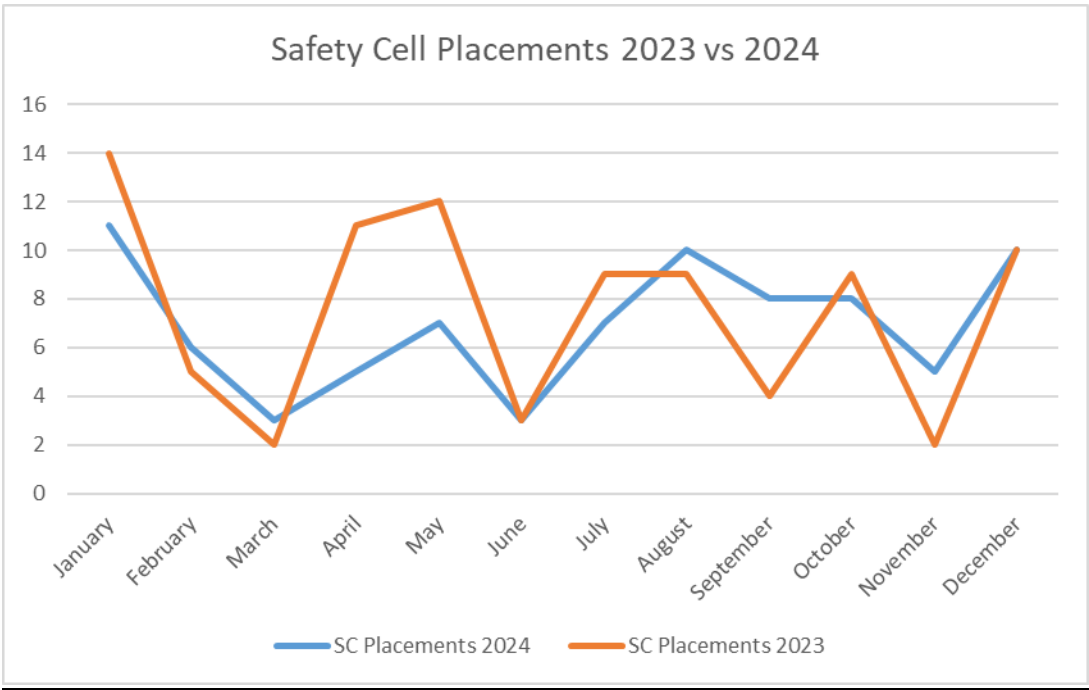
We would also like to extend our gratitude to the CEO's Office for opening the lines of communication between all parties involved. The Behavioral Health Coordination meetings have helped facilitate a collaboration that has been invaluable in creating a more cohesive and effective approach to mental health services, both while individuals are incarcerated and as they prepare for release. This partnership has enhanced our ability to provide comprehensive, continuity-of-care services, ensuring individuals receive the support they need during and after incarceration.

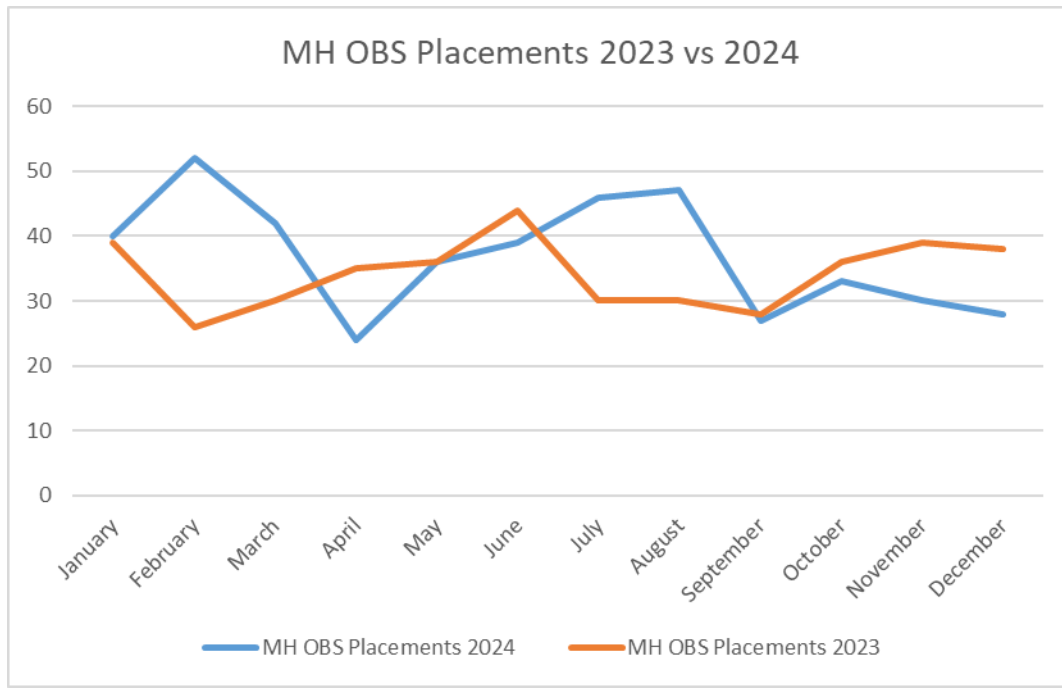
### Northern Branch Jail Statistics:

NBJ - Mental Health - 2024								
Sick Calls Received	Initials	Special Needs	Groups	Treatment Plans	Ad Seg Rounds	Custody/Patrol MH Referrals	Intake Referrals	
1081	613	598	0	237	738	89	3173	
Safety Cell Placements	MH OBS Placements	Mobile Crisis Referrals	5150 Holds	Suicide Attempts	Completed Suicides	Post Suicide Watch F/U's	AVG SC Time	AVG OBS Time
83	444	80	38	5	0	611	14:29	39:41
Psychiatry Initial Appointments		Psychiatry Follow Up Appointments		Psych RN Visits		Psych RN Chart Reviews	Total MFT/LCSW Tasks Completed	
595		2260		269		7	3026	



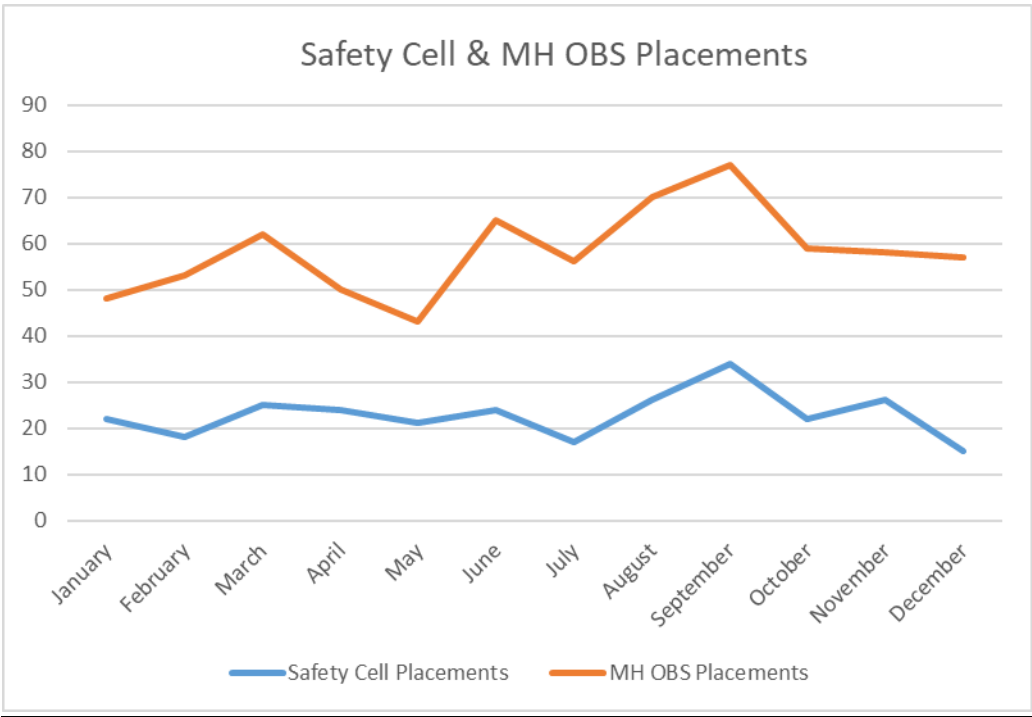
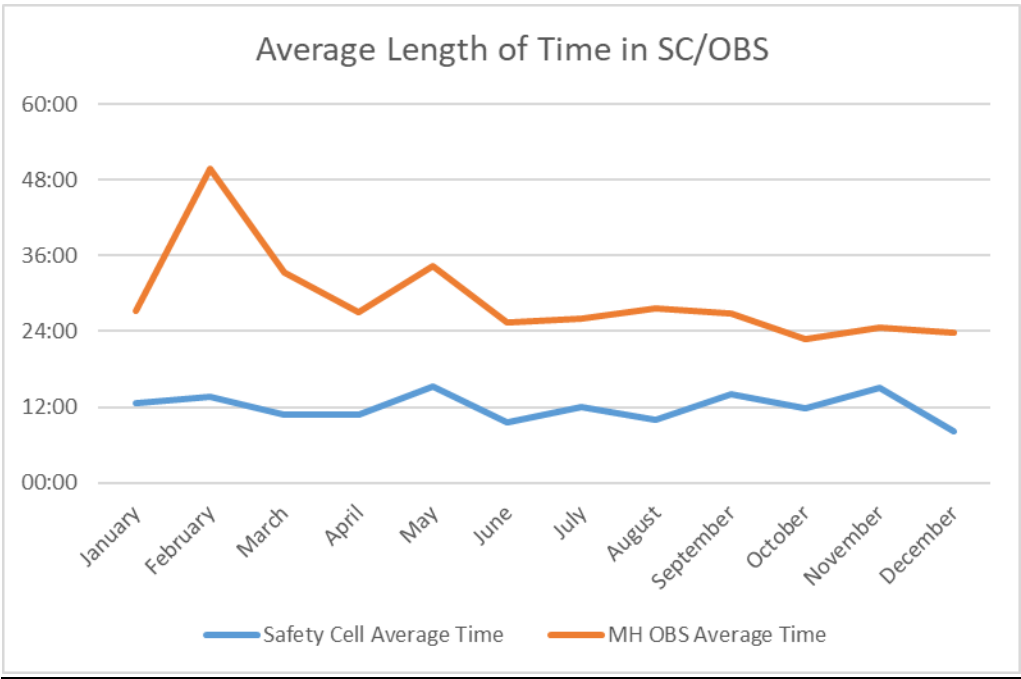


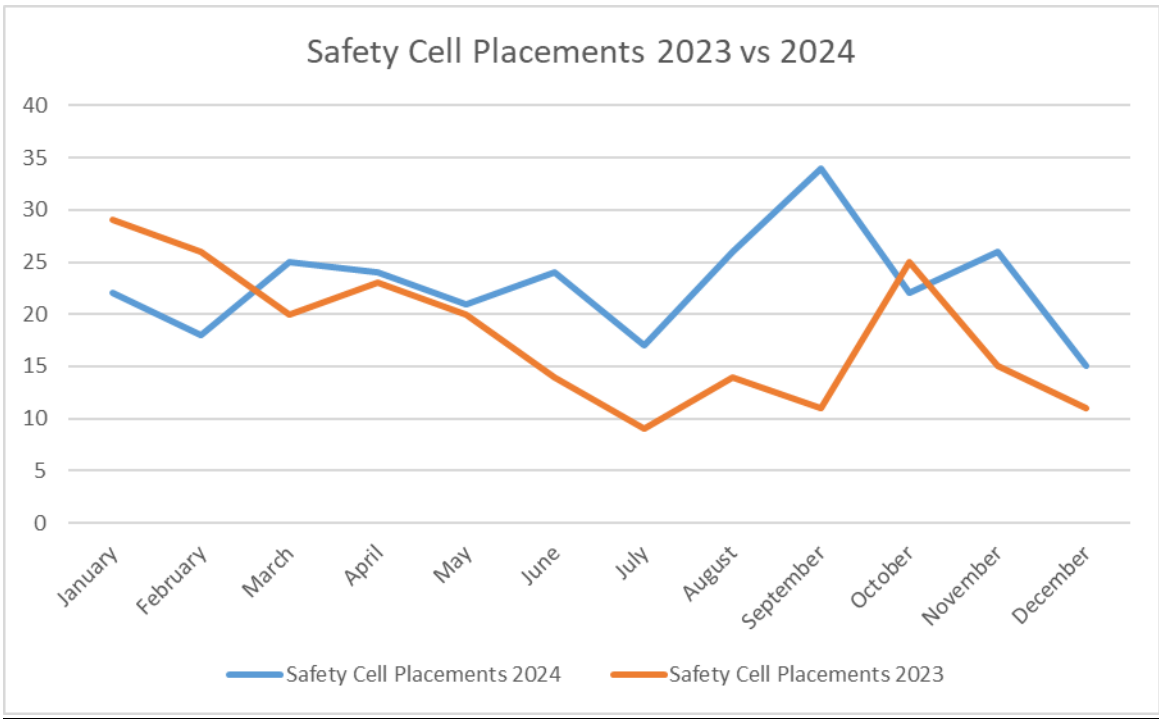
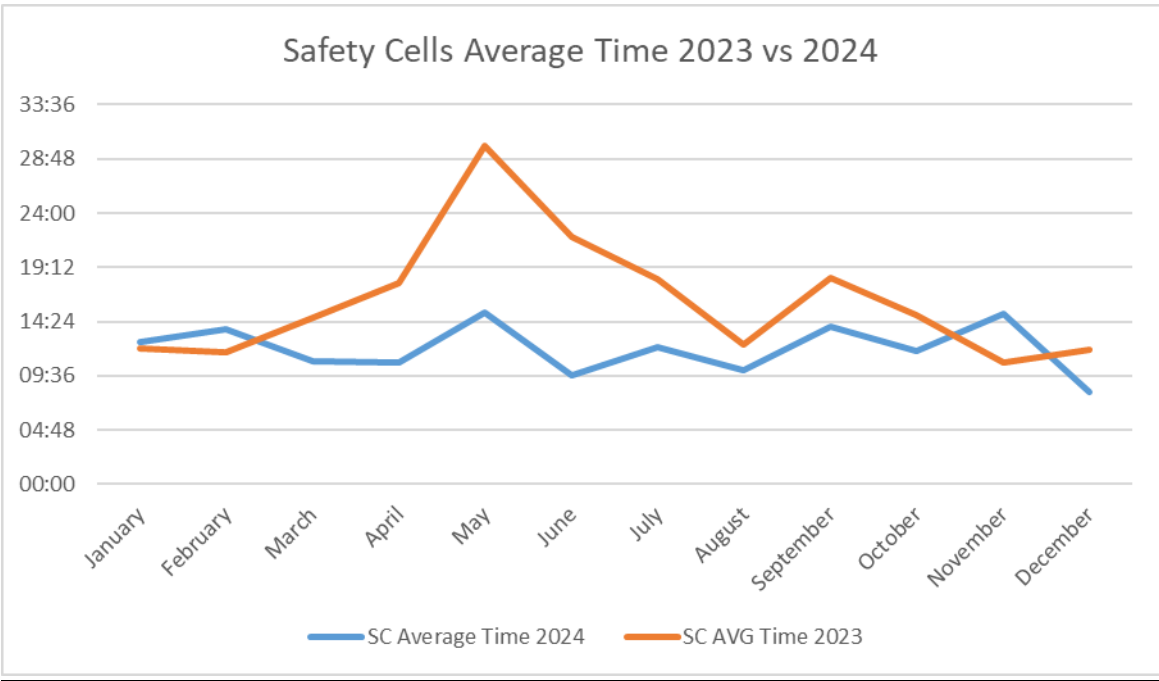




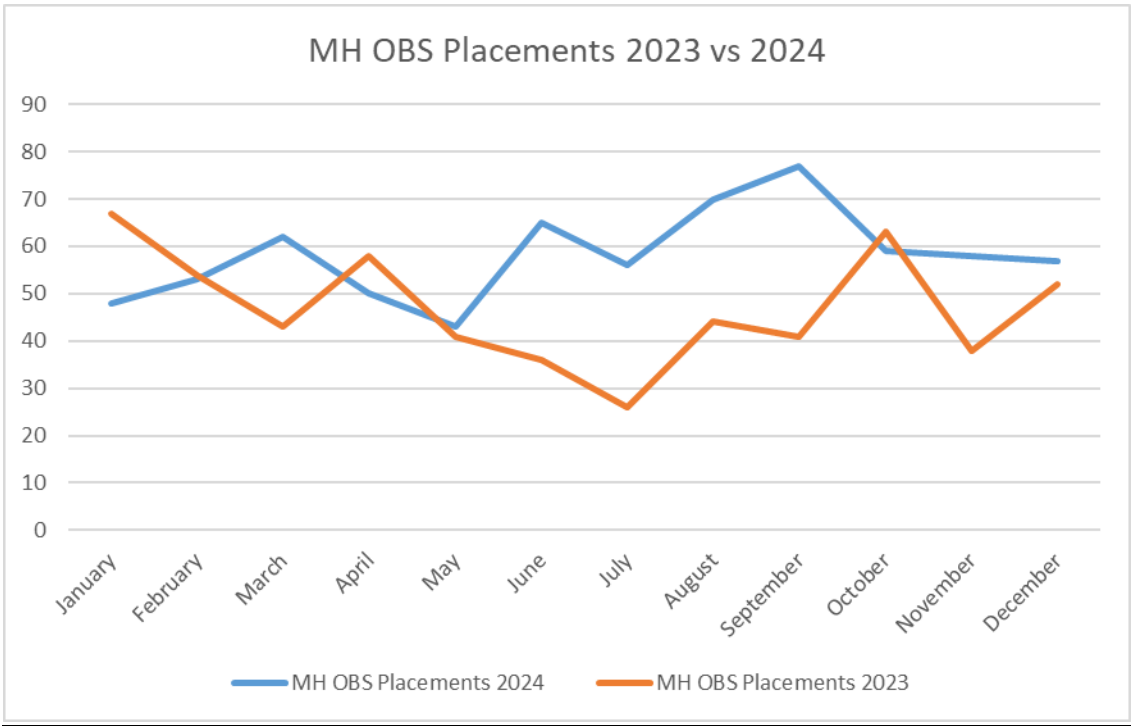
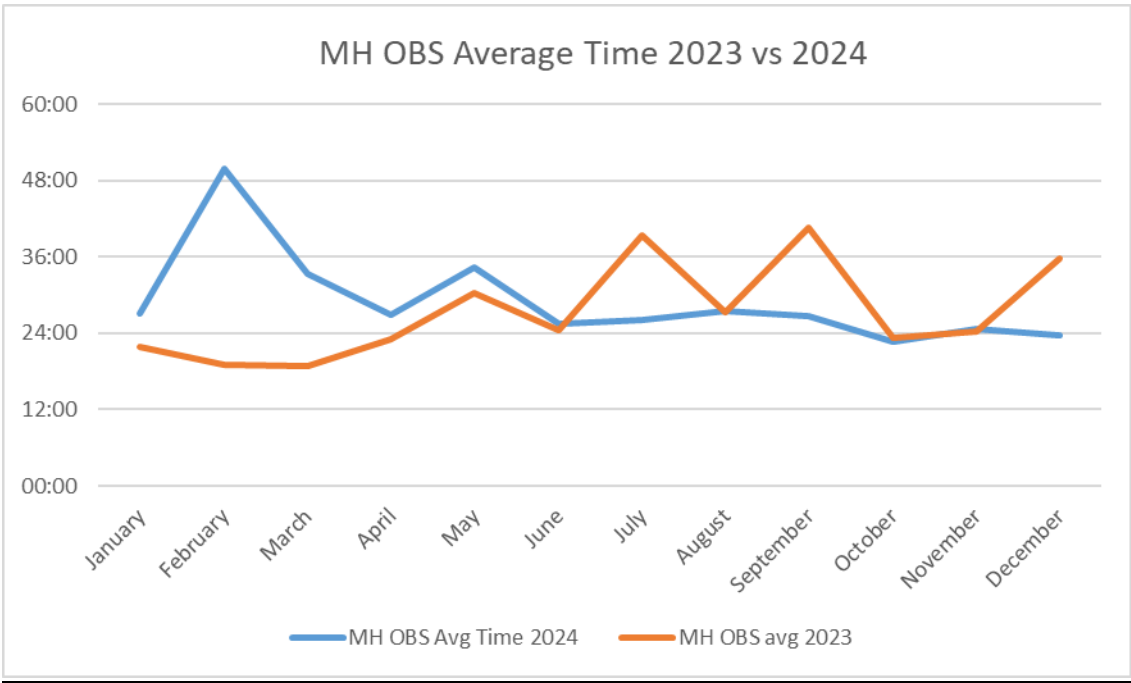
### **Main Jail Statistics:**

Annual Report - SBJ - Mental Health - 2024								
Sick Calls Received	Initials	Special Needs	Groups	Treatment Plans	Ad Seg Rounds	Custody/Patrol MH Referrals	Intake Referrals	
1813	504	1010	61	292	1025	255	3456	
Safety Cell Placements	MH OBS Placements	Mobile Crisis Referrals	5150 Holds	Suicide Attempts	Completed Suicides	Post Suicide Watch F/U's	AVG SC Time	AVG OBS Time
274	698	96	45	12	1	916	11:59	29:02
Psychiatry Initial Appointments		Psychiatry Follow Up Appointments		Psych RN Visits		Psych RN Chart Reviews	Total MFT/LCSW Tasks Completed	
758		3454		739		49	4479	









The graph comparing the average length of stay in Mental Health Observation (MH OBS) and Safety Cells shows key trends for 2024. The average length of stay in Safety Cells remained stable throughout the year, between 12 and 15 hours. In contrast, the average stay in MH OBS increased significantly in April but later stabilized and decreased toward the end of the year.

The increase in MH OBS in April can be explained by a drop-in placement that month, likely due to one or two individuals staying longer and skewing the average.

When comparing 2024 with 2023, Safety Cell stays were shorter in 2024. However, stays in MH OBS were generally longer in 2024 compared to the previous year.

Differences were also seen between facilities. The Northern Branch Jail had fewer placements in both Safety Cells and MH OBS than the Main Jail in Santa Barbara. Safety Cell placements at the Northern Branch Jail decreased slightly, ranging from 3 to 10 per month, while MH OBS placements remained steady, averaging between 20 and 50 per month.

Overall, there was a decrease in the time spent in Safety Cells in 2024, with an increase in time spent in MH OBS.

## EASS/JBCT

The challenge of having a record high number of individuals who are Incompetent to Stand Trial (IST) on the waitlist for Department of State Hospitals (DSH) is not foreign to you or to any county. At one point, the waitlist across California was approximately 2,200, and the acute mental health and behavioral management needs were realized most at the county jail level. Knowing the challenges our partners were facing as well as the unmet patients' needs, Wellpath developed a treatment program and presented it to DSH as a possible solution to the long wait times patients experience when they are deemed IST.

After hearing the details of the proposed treatment program that Wellpath developed and evaluating it against the treatment protocols currently in use at the state hospitals as well as the requirements of the *Stiavetti* lawsuit, DSH quickly and without hesitation contracted with Wellpath to provide the services in the program that are now referred to as the Early Access Stabilization Services (EASS). The program is set up to begin psychiatric stabilization and restoration services within three business days of being notified that the court deemed an individual IST.

While some other companies are *facilitating* the EASS services, the program was developed by Wellpath. DSH contracts with Wellpath for the provision of EASS in 54 California counties, and as of June 2023, Wellpath provided EASS services in 32 of the 54 counties, which is only 11 months since the inception of the program.

**Wellpath developed a treatment program that is used in California to reduce long wait times for treatment.**

This is an example of the innovative solutions that Wellpath develops and provides to our partners in response to challenges that we either observe or learn about from you, our partners. We are proud to have designed such an innovative program that cut the IST waitlist in California down by more than half in less than one year.

## Grievances

In 2024, we received 527 grievances from patients. These were split between the Northern Branch Jail (227 grievances) and the Main Jail (300 grievances). Not all grievances were founded, and some may have come from the same individuals.

At the Northern Branch Jail, the average medical response time was 5.09 days. Common concerns included dissatisfaction with care, delays in healthcare, medication problems, and special requests. There were also requests for off-site care and mental health support.

At the Main Jail, the average medical response time was 4.44 days. The most common issues were dissatisfaction with care, delays in healthcare, medication problems, and special requests. There were also requests for off-site care and mental health support.

The Main Jail had more grievances overall, but the average medical response time was faster. Many grievances may have been repeated by the same individuals, and not all were necessarily founded.

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## Partners

### Leadership Meetings

Wellpath met or exceeded all meetings required in our contract. Our Co-President of the Board, Kip Hollman, visited the facility in person in October. Wellpath Division President **Justin Searle** visited the facility twice during 2024; Senior Vice President **Cole Casey**, visited the jail bi-annually. Regional Vice President, **Heather Barry, RN**, visited the facilities quarterly and Regional Operation Director **Bryan Anthony Smith**, was on-site monthly. Additionally, corporate partners, Vice President, **Tausha Mitchell**, and Director, **Tinisha Branch, RN**, from the Partner Risk Strategies team, visited the facilities to support remedial plan efforts and surveys and members from our Compliance and Accreditation team, **Lynn Philpott, RN**, and **Kim Gerdes, RN**, visited the facilities, in person and via zoom, to support accreditation efforts.

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## Patients and Performance

### Continuous Quality Improvement

In 2024, Wellpath further advanced the Continuous Quality Improvement (CQI) program by designing and executing multiple studies tailored to meet the specific needs of the facilities, as well as the mandates set forth by the *Murray v. County of Santa Barbara* case. The CQI Coordinator continues to collaborate closely with the Public Health Department and Behavioral Wellness, leveraging monitoring tools to enhance the county's oversight of Wellpath's contractual obligations and ensure compliance with the requirements outlined in the *Murray* case.

At the Santa Barbara County Jail, the CQI program conducted 67 studies, developed 45 improvement plans, produced one annual review of the CQI program, and completed a process study focused on tuberculosis screening. Similarly, at the Northern Branch Jail, 62 CQI studies were executed, 46 improvement plans were developed, one annual CQI review was conducted, and a process study centered on dental care was

completed. Each of these studies involved a thorough review of patient health records to evaluate the adequacy of care and interventions provided. In total, 129 CQI studies and 91 improvement plans were presented at the monthly Medical Advisory Committee (MAC)/CQI meetings, as well as at Wellpath's monthly staff meetings.

Furthermore, the CQI program engaged in collaborative efforts with Public Health and Behavioral Wellness, conducting four quarterly audits with each partner. These audits were integral in ensuring the maintenance of health standards and the integration of mental health initiatives within the jail system.

## 2024 CQI Program/ CQI Coordinator Annual Report

### Santa Barbara County Jail CQI Program 2024

67 CQI

45 Improvement Plans

1 Annual Review CQI

1 Process Study Tb Screening

### Northern Branch Jail CQI Program 2024

62 CQI

46 Improvement plans

1 Annual Review CQI

1 Process Study Dental Care

TOTAL CQI 129

TOTAL Improvement Plans 91 improvement plans

### DRC

Mental Health Audit

- Intake (5)
- Suicide Watch (5)
- Clinical (2)
- Psychiatry Audit (1)

Medical Audits

- Completed one round of: Nursing Sick Call, Medication administration, intake screening, dental sick call
- Created Audits for DRC: Ancillary Service

### Outside Audits

Public Health

- Quarter 4 (2023 October-December)
- Quarter 1 (2024 January-March)
- Quarter 2 (2024 April-June)
- Quarter 3 (2024 July-September)

Behavioral Wellness

- Quarter 3 (2023 November-January)
- Quarter 4 (2024 February- April)
- Quarter 1 (2024 April- June)
- Quarter 2 (2024 July-sept)

Study Name	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec
Chronic Care Services - Continuity of Care	67 INT				66 R			85 R				83 R
Scheduled & Unscheduled Offsite Care		79 INT				96 R				82 R		
Suicide Prevention	96 R							97 R				
Alcohol/Benzo Withdrawal			48 INT				60 R			49 INT		69 R
Opiate Withdrawal			71 INT				67 R			41 R		62 R
Medication Administration				86 INT					85 R			84 R
Pregnancy Care				90 INT					77 R		75 R	
Segregation					58 R			70 R				
Initial Health Assessment					99 INT							
Physician Chart Review					100 INT							
Dental Care			100 R			89 INT			75 R			96 R
Dietary Services						89 INT			62 R	69 R		85 R
Receiving Screen and Med Verification				86 R			91 INT		87 R			84 R
Intra-System Transfer (prison only)												
HIV				63 R			100 INT		87 R			
Psychiatric Services						93 INT						
Emergency Services									88 INT	96 INT		91 R
Diabetes/HEDIS							80 R		90 INT		100 R	
Ancillary Services									97 INT			92 R
Sick Call	78 R				96 R					78 R		
<b>Asthma Juvenile Specific:</b>												
MH Special Needs & Treatment Planning												
Infirmary Care												
MAT Induction					89 INT						84 R	
MAT Continuation			64 R				70 R				85 R	
Patient Safety											100 INT	
Grievance Log												100 INT
<b>AD HOC Studies (Site Specific)</b>												
Nursing Documentation		64 INT				75 R						60 R
TB Screening								89 INT		59 R		92 R

## Behavioral Wellness and Public Health Compliance Overview – 2024

In 2024, Behavioral Wellness updated its monitoring tool to emphasize the timely referral of individuals for mental health services from intake and to ensure continuity of medication at discharge. Wellpath remains committed to full compliance with initial intake screenings, medication verification, mental health referrals, and psychiatrist visits. New compliance measures introduced include discharge documentation and medication continuity, comprehensive suicide risk assessments and safety plans, as well as timely notifications and coordination with the County's Crisis Services team for higher levels of care.

Despite these improvements, recurring non-compliance issues were identified in areas such as the failure to reassess patients in safety cells within the specified timeframe, delays in responding to sick calls, and incomplete post-suicide watch assessments within the contracted timeframes. These issues have been primarily attributed to staffing matrix levels, with evidence indicating that persistent non-compliance is directly related to time constraints.

Public Health also began utilizing the updated monitoring tool developed in collaboration with Wellpath, which has enhanced the tracking of intake screenings and the management of patients with chronic hypertension. Wellpath maintained compliance with medication bridging reported during intake and referrals for chronic care diagnoses. Newly implemented compliance measures include initial intake screenings, medication bridging within specified timeframes, and the treatment of hypertension patients.

However, recurring non-compliance was noted, particularly in the completion of initial health assessments within the contracted timeframes. These issues were linked to staffing matrix levels and the evolving responsibilities of the designated health appraisal nurse in relation to facility and staffing needs. Quarter 4 is expected to show improved compliance, with the health appraisal nurse focusing exclusively on their designated role, which should enhance performance in this area.

## Statistics

Wellpath keeps monthly workload statistics to understand and report on the care we provide. Statistics typically capture data at a point in time; they seldom communicate the complexity of care a patient needs and receives.

In 2024, our **average daily patient population** was 776 per monthly, a slight decrease from the 778 recorded in 2023.

In 2024, we dispensed **673,588** medications, a notable increase from **553,546** in 2023. This represents a difference of **120,042** medications, highlighting a higher volume of dispensed medications despite a lower patient population. A significant contributor to this increase is the expansion of our Medication-Assisted Treatment (MAT) services.

Most of our patients are among the underserved population in Santa Barbara County. Self-neglect of medical and mental health issues complicated by self-medicating, drug use and abuse offer challenges to the care they need. Our increased mental health population continues to present multiple problems. We have responded by providing timely assessments and psychiatric services; the earlier these patients receive treatment and medications, the sooner they become stable. The following general statistics provide an annual view for 2024:

- Intakes- 10,910
- 14-day Health Assessments- 2,155
- Six month/Annual Physical – 69
- Patient started on withdrawal protocol-1,169
- Sick Call (Nurses)- 8,890
- Sick Call (Mid-Level)- 2,157
- Sick Call (MD)- 427
- Sick Call (Dental) – 1,246
- Chronic Care Visits- 3,323
- Nurse Treatments-24,416
- Labs-4,120
- X-Rays – 618
- Emergency Response- 169
- Percent of Pts on Psychiatric meds – 36%

## Off-Site Care

Based on consultation with the on-site provider, off-site care must be appropriate and necessary.

- Ambulance Transports: 226
- ER Visits: 361
- Office visits: 283 appointments
- One-day surgery: 11
- Radiology visits: 71

Based on consultation with the on-site provider, off-site care must be appropriate and necessary.



## Discharge Planning

This year, we've welcomed two discharge planners to our team, who have significantly enhanced our discharge planning program to ensure patients transition successfully back into the community. Our discharge planners' complete Universal Releases of Information within days of a patient's arrival, enabling county programs to share important information and facilitate a smooth transfer of care. They work to create discharge plans for all patients in the MAT program and those receiving treatment for chronic conditions, ensuring they have scheduled appointments with community providers upon release. The planners collaborate closely with custody partners, probation, and key local community partners—including the Public Defender's Office—to connect patients with essential healthcare services. They also ensure that all patients in the MAT program leave with Narcan and community resource information, and that a 30-day supply of medical and mental health medications is called into the pharmacy for pickup upon release. Additionally, they actively participate in county-wide discharge meetings to further streamline and improve patient transitions. As we move forward, we're excited about the continued growth and expansion of our discharge planning services in the coming year.

## NCCHC (National Commission on Correctional Health Care)

We maintain full accreditation with the National Commission on Correctional Health Care (NCCHC) and received reaccreditation on August 23, 2024. Wellpath has never lost accreditation or failed to achieve accreditation.

Wellpath has a dedicated regional compliance and accreditation team that supports maintaining our compliance and accreditation standards. In September 2024, we successfully applied for NCCHC accreditation for the Northern Branch facility and received approval. We are now awaiting the accreditation date for that facility.

## People

### Staffing

Our staffing strategy is specifically designed to meet the unique needs of correctional healthcare and mental health services. We compete with other healthcare providers in the region to attract, develop, and retain highly qualified professionals who are fully licensed, certified, or registered in California to deliver specialized medical and mental health services within correctional settings. At Wellpath, we utilize economic modeling and real-time market data to assess each region, ensuring our compensation packages are competitive and aligned with current salary trends for correctional healthcare professionals.

### Training and Development

- In October, Bailey Fogata, HSA; Stephanie Baylor, DON; and Edwin Hamlin, MAT Coordinator, attended the NCCHC conference in Las Vegas alongside Lt. Marking and Lt. Harman from the SB Sheriff's Office.
- We conducted successful man-down training that included medical and correctional staff.
- We had an annual Skills Fair for all medical staff in October.
- We had an annual Skills Fair for all mental health staff in October. This was the first time a skills fair was held for our mental health team.
- All nurses completed annual training in medication administration, suicide prevention, and Seven Minutes to Save a Life training, which includes topics such as withdrawal management, signs and symptoms of distress, and emergency care management.

### In-Custody Death

We experienced 1 in-custody death last year. This death occurred at the Santa Barbara Main Jail.

- Santa Barbara Main Jail 11/13/2024- Suicide

Over the past year, Wellpath, the Sheriff's Department, Public Health, and Behavioral Wellness have worked together to expand and improve the mortality review process within the jails. Our goal is to ensure that each review is thorough, includes corrective actions, and includes follow-up to verify that these actions are properly implemented. Public Health will take the lead in ensuring that all mortality reviews meet the requirements set forth by the BSCC, NCCHC, and the remedial plan. The aim is to foster a collaborative approach to ensure comprehensive and effective reviews that lead to meaningful improvements.



## The Year Ahead

In the upcoming year, our focus is to enhance healthcare in the jail, prioritizing medical care, preventive services, and specialized treatment for patients. Key areas include expanding mental health services, improving chronic care management, strengthening staff training, and building external partnerships.

We will expand preventive care through routine screenings, vaccinations, wellness checks, enhanced STD testing, and baseline lab tests for all patients. These baseline labs will help identify any unknown or underlying conditions, addressing common health concerns such as hypertension, diabetes, mental health disorders, and sexually transmitted infections. Mental health services will be improved by adding additional behavioral health units and expanding access to therapy, supported by additional mental health professionals.

A central focus for the year ahead will be continuing to grow and expand our Medication-Assisted Treatment (MAT) program. We are committed to being leaders in this area and will actively seek new ways to improve and broaden access to MAT for patients with opioid and alcohol use disorders. In addition to scaling up access, we will explore innovative approaches, including enhancing individualized treatment plans, removing barriers to participation, and ensuring ongoing support for patients in the program. Our goal is to help patients break the cycle of addiction and achieve long-term recovery, with an emphasis on meeting each patient's unique needs and circumstances.

We will also enhance withdrawal management protocols, ensuring medically supervised care for patients undergoing substance withdrawal. This includes developing site-specific policies to meet DOJ standards and providing individualized care based on each patient's needs and withdrawal risk.

Chronic care management will be a priority, particularly for patients with conditions such as diabetes, hypertension, and asthma. Our efforts will include developing personalized care plans and increasing access to specialty care as needed. We will focus on early intervention, regular monitoring, and ensuring that patients with chronic conditions receive consistent and effective care to minimize complications.

A major emphasis will be placed on expanding Hepatitis C treatment, which has historically been under-treated in correctional settings. We are committed to significantly growing our Hepatitis C program, working closely with public health to ensure that patients receive timely diagnosis and treatment. This includes expanding access to antiviral medications and ensuring that patients receive the necessary care while incarcerated, with seamless transition plans to continue treatment post-release. We will focus on improving early detection, offering regular screenings for Hepatitis C, and ensuring that every patient diagnosed with the condition has access to the appropriate treatment regimen. The goal is to reduce the long-term impacts of Hepatitis C, prevent complications like liver disease, and provide better long-term health outcomes for patients.

Staff training will be essential, focusing on medical, and mental health staff to address the unique challenges of healthcare in a correctional setting. Training will cover topics like chronic care management, trauma-informed care, and de-escalation techniques to enhance collaboration and communication across teams.

Strengthening partnerships with county public health, behavioral wellness and local hospitals will be essential to improving communication and coordination of care. Our goal is to enhance the communication between our facility and hospitals to ensure better continuity of care when patients are sent out for specialty treatment and return to our care. This includes improving the transfer process, ensuring all relevant medical information is shared promptly, and facilitating follow-up care. We will work closely with county partners to streamline these processes, reduce delays, and ensure that patients receive the best possible care throughout their treatment journey.

Finally, we will track patient health data to assess the effectiveness of our interventions and continuously improve care delivery. We are committed to fostering open and honest conversations across all levels of our team, including custody staff, county partners, and healthcare providers. By collaborating and addressing any barriers together, we can drive results that improve patient outcomes and ensure that we are providing the highest quality of care. Through these efforts, we aim to foster a healthier environment for both patients and staff, while continuously enhancing the quality of care and promoting better health outcomes for all.

As we move into the next year, we are excited to continue working closely with the Sheriff's Department, our county partners, and our dedicated healthcare team to provide the highest standard of care for our patients. Together, we will ensure that all individuals in our care receive comprehensive, compassionate treatment, and work toward achieving improved health outcomes for everyone.

