Attachment C

California Forensic Medical Group (CFMG/Wellpath) 2023 Annual Report for Healthcare Services at Sheriff's Jail Facilities

Santa Barbara County Department of Behavioral Wellness Mental Health Provider WellPath Quarterly Monitoring Tool



Date Of Review	5/17/2024	Quarter: 4 Contract Year: 23-24	ı
Date of herien	5/2//2021	Qualitati i dall'i dall	4

Behavioral Wellness Reviewers							
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Date Signed							

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Date Signed		

	Additional Participants	
Name and Title	Stacey Sharpe, LCSW, Bwell	Joe Schimmel, Wellpath
Name and Title		

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PERFORMANCE MEASURE	REVIEW INSTRUCTIONS		Υ	NI	IA	NA	COMPLIANCE FINDINGS
	INTA	KE	100				
Did the contractor complete all intake screenings fully, including the mental health assessment, medication assessment, and suicide screening tools?		DRC Remedial Plan, Monitoring, 3.J.4 Continuous Quality Improvement (Page 22)		x			Not compliant, 72% compliance rate. In initial screening, form is not completely filled out, sections such as referral made/needed is often blank or checkboxes are checked but additional information is not given. Nurses are reating the referrals during the intake process but are not utilizing the referral section in the intake form. Remains unclear if a mental health assessment is needed and what the timeframe is to complete i.e. urgent, emergent, routine.
In the intake assessment, did the contractor document all reported medications and whether the medication could be verified?	Contractor will provide Behavioral Wellness with a list of	County Contract, Exhibit A, Section 1.1H, DRC Remedial Plan, Information Sharing & Pharmacy & Monitoring, 2.H.1 Pharmacy Services (Page 9)	х				Compliant, 100% compliance rate.
If medications are verified, is the inmate prescribed the same medication as they received in the community, regardless of its formulary status, within 48 hours? (Exceptions are benzodiazepines and medications solely prescribed for sleep)	all intakes completed during the review time frame. Behavioral Wellness will then choose 5 charts per month, 15 per review period, to answer questions 1-5	County Contract, Exhibit A, Section 1.1H, DRC Remedial Plan, Information Sharing & Pharmacy & Monitoring, 2.H.1 Pharmacy Services (Page 9)	х				Compliant, 100% compliance rate.
4. If medications are not verified, is the inmate scheduled and seen for a mental health assessment within 24 hours of their arrival at jail?	Section Plants	County Contract, Exhibit A, Section 1.1 I(2), DRC Remedial Plan, Information Sharing & Pharmacy & Monitoring, 2.H.1 Pharmacy Services (Page 9)	x				Compliant, 93% compliance rate.
After assessment by a mental health professional, was the inmate seen by the psychiatrist within 7 days.		DRC Remedial Plan, Monitoring, 2.N.2 Quality Management (Page 11)	x				Compliant, 93% compliance rate.
COMPLIANCE REVIEW SECTION		The second secon		NI	IA	A	COMPLIANCE FINDINGS
MANAGER STATE OF THE PROPERTY AND ADDRESS OF THE PARTY OF	ON-GOING				5.3038	500	
6. Are inmates that are under the care of the psychiatrist seen by the psychiatrist every 30, 60 or 90 days (per treatment plan) or when a medication is changed?		DRC Remedial Plan, Monitoring, 2.N.2 Quality Management (Page 11)	x				Compliant, 100% compliance rate.
7. Are inmates monitored for medication efficacy and side effects by the qualified mental health professional within 2 weeks of prescription?	Contractor will provide Behavioral Wellness with a list of all inmates on the psychiatrist task list during the review time frame. Behavioral Wellness will then choose 5 charts per month, 15 per review period, to answer questions 7-8	Pharmacy & Monitoring, 2.H.1 Pharmacy Services (Page 9)	х				Compliant, 100% compliance rate.
If an inmate needs a change to a medication, they will be scheduled to see the psychiatrist within 48 hours.	questions 7-0	DRC Remedial Plan, Information Sharing & Pharmacy & Monitoring, 2.H.1 Pharmacy Services (Page 9)	х				Compliant, 100% compliance rate.

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9. When inmates need access to psychiatry or mental health services between scheduled appointments, are sick calls answered within 4 hours of emergent requests, 24 hours of urgent requests and 1 week for routine requests?	Contractor will provide list of sick calls received during the review time frame. Behavioral Wellness will review 5 sick calls per month, 15 per review period, to answer question 9.	DRC Remedial Plan, Information Sharing & Pharmacy & Monitoring, 2.H.1 Pharmacy Services (Page 9)	x				Compliant, 100% compliance rate.
For inmates with mental illness who are in restrictive housing, was the inmate provided appropriate interventions at least three times a week?	Contractor will provide a list from custody of all inmates in restrictive housing during the review time frame. List should include the dates the inmate was in restrictive housing. Behavioral Wellness will review 5 inmates per month, 15 per review period, to answer question 10.	County Contract, Exhibit A, Section 4.1D	x				Not compliant, 17%.
COMPLIANCE REVIEW SECTION		REGULATORY AUTHORITY	Υ	NI	IA	NA	COMPLIANCE FINDINGS
	DISCHARGE I	PLANNING					
11. The County will ensure that inmates taking prescribed psychiatric medications have continuity of medications for up to 14 days.	Contractor will provide Behavioral Wellness with a list of all inmates discharged during the review time frame. Behavioral Wellness will then choose 5 charts per	DRC Remedial Plan, Discharge and Reentry, 3.H.3 Discharge and Reentry Services (Page 20)	x				Complaint, 93% compliance rate.
12. Is a discharge document complete?	month, 15 per review period, to answer question 13.	DRC Remedial Plan, Discharge and Reentry, 3.H.3 Discharge and Reentry Services (Page 20)	x				Compliant, 100% compliance rate.
COMPLIANCE REVIEW SECTION		REGULATORY AUTHORITY	Y	NI	IA	NA	COMPLIANCE FINDINGS
	CRISIS SE	RVICES					MARKET F
13. Did the Contractor re-assess all inmates placed on suicide watch at least every 4 hours by medical staff and every 12 hours by mental health staff (between the hours of 7 am and 11 pm for mental health staff only)?	Contractor will provide Behavioral Wellness with 30 randomly selected Safety Cell Logs during the review time frame. Behavioral Wellness will then choose 5 logs per month, 15 per review period, to answer question 15.	County Contract, Appendix B, Section 1c		x			Not compliant, 7% compliance rate. Medical continues to miss checks both during overnight shifts and during business hours. MH also missing checks.
14. Did the contractor complete a mental health and suicide risk assessment in full for each inmate entry into a Safety Cell?		DRC Remedial Plan, Monitoring, 2.A.2 County Monitoring of Private Medical Contract (pg.4)	х				Compliant, 93% compliance rate.
15. Did the contractor complete a treatment plan and/or behavior management plan in full for each inmate entry into a Safety Cell?		DRC Remedial Plan, Monitoring, 2.A.2 County Monitoring of Private Medical Contract (pg.4)	x				Compliant, 86% compliance rate.
16. Did the contractor complete a post suicide watch clinical follow up and assessment within 24 hours, 5 days and 7 days for each inmate entry into a Safety Cell?	Using the 15 selected logs from question 15, Behavioral Wellness will review the corresponding charts to answer questions 16-20.	DRC Remedial Plan, Monitoring, 2.A.2 County Monitoring of Private Medical Contract (pg.4)		х			Not compliant, 27% compliance rate. Checks are often scheduled, but not always, but are usually completed late or not at all. WellPath stated they moved to a 24 hours, 5 days, and 7 days as needed policy and was asked to send the policy but BWell has not received it yet so BWell continues to monitor on previous policy.
17. If there was no improvement in the inmate's condition in the Safety Cell within 12 hours, was the County's Crisis Services team contacted to consult for plan of care including need for a crisis assessment?		Contract, ORC Remedial Plan, Monitoring, 2.A.2 County Monitoring of Private Medical Contract (pg.4)	х				Compliant, 100% compliance rate.

18. If there was no improvement in the inmate's condition in the Safety Cell within 24 hours was the County's Crisis Services team contacted for inmate to receive higher level of care.	County Contract, Appendix B, Section 2b, DRC Remedial Plan Monitoring, 2.A.2 County Monitoring of Private Medical Contract (pg.4)), x	(Compliant, 100% compliance rate.	
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PERFORMANCE MEASURE	REVIEW INSTRUCTIONS		Y	NI	IA N	A	COMPLIANCE FINDINGS
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Did the contractor complete all intake screenings fully, including the mental health assessment, medication assessment, and suicide screening tools?		DRC Remedial Plan, Monitoring, 3.J.4 Continuous Quality Improvement (Page 22)	×			Compliant, 92%	compliance rate.
In the intake assessment, did the contractor document all reported medications and whether the medication could be verified?		County Contract, Exhibit A, Section 1.1H, DRC Remedial Plan, Information Sharing & Pharmacy & Monitoring, 2.H.1 Pharmacy Services (Page 9)	x			Compliant, 93%	compliance rate.
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5. After assessment by a mental health professional, was the inmate seen by the psychiatrist within 7 days.		DRC Remedial Plan, Monitoring, 2.N.2 Quality Management (Page 11)	х				6 compliance rate.
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8. If an inmate needs a change to a medication, they will be scheduled to see the psychiatrist within 48 hours. 9. When inmates need access to psychiatry or mental health services between scheduled appointments, are sick calls answered within 4 hours of emergent requests, 24 hours of urgent requests and 1 week for routine requests?	Contractor will provide list of sick calls received during the review time frame. Behavioral Wellness will review 5 sick calls per month, 15 per review period, to answer question 9. Contractor will provide a list from custody of all inmates	DRC Remedial Plan, Information Sharing & Pharmacy & Monitoring, 2.H.1 Pharmacy Services (Page 9) DRC Remedial Plan, Information Sharing & Pharmacy & Monitoring, 2.H.1 Pharmacy Services (Page 9)	x				Compliant, 100% compliance rate. Compliant, 100% compliance rate.
10. For inmates with mental illness who are in restrictive housing, was the inmate provided appropriate interventions at least three times a week?	in restrictive housing during the review time frame. List should include the dates the inmate was in restrictive housing. Behavioral Wellness will review 5 inmates per month, 15 per review period, to answer question 10.	County Contract, Exhibit A, Section 4.1D	х				Compliant, 86% compliance rate.
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COMPLIANCE REVIEW SECTION		REGULATORY AUTHORITY	Y	NI	IA	NA	COMPLIANCE FINDINGS
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14. Did the contractor complete a mental health and suicide risk assessment in full for each inmate entry into a Safety Cell?		DRC Remedial Plan, Monitoring, 2.A.2 County Monitoring of Private Medical Contract (pg.4)	x				Compliant, 93% compliance rate.
15. Did the contractor complete a treatment plan and/or behavior management plan in full for each inmate entry into a Safety Cell?		DRC Remedial Plan, Monitoring, 2.A.2 County Monitoring of Private Medical Contract (pg.4)	x				Compliant, 93% compliance rate.
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County Contract, Appendix B, Section 2b, DRC Remedial Plan, Monitoring, 2.A.2 County Monitoring of Private Medical Contract (pg.4)	ounty Contract, Appendix B, ction 2b, DRC Remedial Plan, Monitoring, 2.A.2 County onitoring of Private Medical Contract	Compliant, 100% compliance rate.

PROVIDER EVALUATION SUMMARY Areas of Compliance (No Follow Up Needed) Your Program was found compliant in 30 areas audited. 1. Bwell is impressed with WellPath's medication reconciliation; when patients report medications that they are taking in the community, WellPath is quick to send an ROI and bridge medications when possible. 2. WellPath has improved on completing the full suicide risk assessment and specifically the Collaborative Safety Plan. 3. WellPath remains complaint with 14 day medication prescriptions upon discharge and discharge instructions were more uniform and almost always complete. 4. WellPath continues to have good collaboration and communication with Bwell Crisis Services. Areas Identified for IMMEDIATE ACTION (IA) There was 0 identified areas that need Immediate Action 1. There were no areas identified that need immediate action. Areas Identified for NEEDS IMPROVEMENT (NI) There was 6 identified areas that Need Improvement 1. WellPath needs to complete all sections of intake screening with clear disposition and plan around referrals made and timelines in NBJ. 2. WellPath has shown a slight improvement in Restrictive Housing Rounds but continues to not be able to meet the 3 day a week requirement in NBJ. 3. WellPath continues to struggle with overnight safety cell checks for both Medical and Mental Health. 4. WellPath needs to ensure that 24 hour, 5 day and 7 day post safety cell checks are scheduled and completed on time.

It is required that your agency respond to the areas identified as "Immediate Action" and "Needs Improvement" in a Corrective Action Plan (CAP).

Please be advised that the CAP must be completed and submitted on your agency's letterhead within fourteen (14) days from the date of this report to bwellqcm@sbcbwell.org

Thank you for your participation in this quarterly Programmatic Monitoring Visit. Please feel free to contact us with any questions or concerns at bwellqcm@sbcbwell.org

Monitoring Reports and Corrective Action Plans will be presented at the next scheduled Medical Administration Committee (MAC) per DRC Remedial Plan, Monitoring, 3.I.1 Cross-Agency Coordination of Mental Health Treatment and Service Need (Page 21)