



BOARD OF SUPERVISORS
AGENDA LETTER

Agenda Number:

Clerk of the Board of Supervisors
105 E. Anapamu Street, Suite 407
Santa Barbara, CA 93101
(805) 568-2240

Submitted on:
(COB Stamp)

Department Name: County Health Department
Department No.: 041
Agenda Date: March 3, 2026
Placement: Administrative Agenda
Estimated Time:
Continued Item: No
If Yes, date from:
Vote Required: Majority

TO: Board of Supervisors
FROM: Department Director: Mouhanad Hammami, County Health
Contact: Aaron Stilwell, Correctional Healthcare Quality Improvement Manager
SUBJECT: **Correctional Health Care Services Monitoring Report**

County Counsel Concurrence

As to form: Yes

Other Concurrence: N/A

As to form: N/A

Auditor-Controller Concurrence

As to form: N/A

Recommended Actions:

That the Board of Supervisors:

- a) Receive and file a report by the County Health Department on correctional healthcare monitoring, including opportunities for systemic improvements in the quality of medical care provided in the County's jails; and
- b) Determine that the above action is not a project under the California Environmental Quality Act (CEQA) pursuant to CEQA Guidelines Section 15378(b)(5), because it consists of organizational or administrative activities of governments that will not result in direct or indirect physical changes in the environment.

Summary Text:

This item is before your Board to provide an update on correctional healthcare monitoring activities, including findings for the July 1, 2025, through September 30, 2025, audit period and additional observations and recommendations by the Correctional Health Care Team (CHT). CHT is engaged in several focus areas of healthcare monitoring activities, including review of policy and procedures, critical incidents, communicable disease management, and utilization management. This report provides an update on correctional healthcare monitoring and oversight findings. Overall, healthcare services in the County correctional facilities are demonstrating significant improvements since the previous report provided on March 11, 2025. A summary of the primary areas and scope of oversight

monitoring being conducted, as well as notable healthcare delivery improvements as a result of County Health oversight, have been included here.

Background:

On February 28, 2017, the Board of Supervisors approved the Sheriff's Office (SBSO) and the Probation Department (Probation) to contract with the California Forensic Medical Group (CFMG) for healthcare services (medical and mental health services) at the jail and for medical services only for Probation's juvenile facilities. On April 1, 2017, CFMG (hereafter referred to as Wellpath) officially took over medical services for the SBSO and Probation. On December 5, 2023, the Board directed the County Health Department (CHD) to provide additional healthcare oversight and compliance monitoring on the quality of care delivered by CFMG/Wellpath in the jails and Probation Department's detention facilities. Correctional Health Quality Care Improvement Manager and Chief Correctional Healthcare Medical Advisor positions were established by your Board (Resolution No. 24-49) in March 2024. CHT, comprised of these two positions, provides objective and independent performance monitoring of the medical and mental health care services provided at the County's correctional facilities, and reports its findings to your Board. CHT currently includes Carrick Adam, MD MSPH, as Chief Correctional Health Medical Advisor, and Aaron Stilwell, DNP MBA RN, as Correctional Health Quality Care Improvement Manager.

Discussion:

Jail Healthcare Performance Monitoring

For the adult jails, CHT has established several focus areas of healthcare monitoring activities, including review of policies and procedures, staffing considerations, clinical adverse events, chronic care and communicable disease management, and utilization management. CHD and the Department of Behavioral Wellness (BWell) also monitor the Service Level Agreements (SLAs) required of Wellpath under its contract and liaisons with external expert monitors regarding the remedial plan in the *Murray et al. v. County et al.* conditions of confinement class action. However, the *Murray et al. v. County et al.* remedial plan is not a part of this report, as the remedial plan has its own reporting and monitoring requirements. The activities and findings for each of the CHT focus areas are summarized below.

Healthcare Policy

CHT collaborates with Wellpath, SBSO, Probation, and BWell in policy review and revision. Policies are reviewed by prioritization order based on healthcare significance, risk, and remedial plan requirements. This process includes ensuring compatibility between related policies and procedures between the agencies, and that the policies include site-specific information. CHT has reviewed all current Wellpath policies and provided recommendations.

Staffing Considerations

The new contract between the County and Wellpath, which took effect April 1, 2025, included staffing enhancements of an additional 21.95 contracted full-time equivalent (FTE) positions, for a total of 97.20 FTE. This included increased nursing staffing ratios and the creation of a registered nurse Facility Coordinator role at each jail to assist in day-to-day management, triage and coordination of care, and clinical support as needed. Wellpath now has nearly all positions filled, and this is correlated with observed improvements noted in timeliness and quality of care.

Adverse Events

CHT co-chairs the in-custody death investigation and review process for any unexpected occurrence involving death or serious physical injury that occur in the correctional facilities. CHT and SBSO's

Health Services Lieutenant created a new process for review, root cause analysis, and corrective action plans, which provides more structure and better facilitates inter-agency collaboration. This new process includes a multi-disciplinary 72-hour post-incident review, a formal 30-day investigative review, and a 60-day follow-up review. Any interventions or corrective action plans created through this process are reviewed and discussed at the monthly Medical Administration Committee/Continuous Quality Improvement (MAC/CQI) meetings until completed. The new process was formalized in an updated policy and procedure based on National Commission on Correctional Health Care standards and California Code of Regulations Title 15. CHT has been involved in three death reviews to-date, including two utilizing the new process, and has assisted in the creation of corrective action plans (CAP) and provided process improvement recommendations.

Chronic Care and Communicable Disease Management

CHT currently assesses hypertension (high blood pressure) management through the structured quarterly audits, and is working with Wellpath on expanding monitoring of additional chronic diseases such as diabetes, asthma, and hepatitis C. Review of diabetes care generated a number of focused recommendations including updating treatment protocols, adherence to existing policies, integrating diabetic diet orders at intake, and improved discharge planning. These recommendations are in the process of being implemented. Wellpath has updated hepatitis C treatment protocols to align with national guidelines and has streamlined workflows to expedite identification, approval, and initiation of treatment. Additionally, Wellpath is collaborating with CHD on improving coordination for patients undergoing hepatitis C treatment upon release from custody. CHT will be performing additional chart reviews in January to assess implementation progress and efficacy of these recommendations.

Staff from County Health Communicable Disease Control & Prevention (CDCP) identified an opportunity for improvement related to Wellpath's disease reporting requirements and potential delayed treatment, in particular for patients with sexually-transmitted infections (STIs). CHT facilitated communication and collaboration between CDCP and Wellpath to identify opportunities for process improvement. Consequently, CDCP staff now have access to Wellpath's electronic medical record system, and CDCP has provided training and support on disease reporting and therapeutic interventions. Additionally, Wellpath has implemented STI screenings during the initial health assessment. CHT is working with CDCP and Wellpath to continue improving processes including screenings, laboratory orders, and treatment algorithms in accordance with California Department of Public Health recommendations. It should be noted that the partnership with CDCP staff, under the direction of the County Health Officer, has been instrumental in improving STI screening and treatment for this high-risk and vulnerable population. Chart reviews by CHT indicate increases in testing and timelier treatment.

CDCP is working with Wellpath on developing a broader immunization program for incarcerated persons. CDCP provided training, including on immunization registry, storage, and handling of vaccines. Wellpath is preparing to fully implement the program and will be offering vaccinations to patients at the Initial Health Assessment (IHA) that occurs within two weeks of booking into the jail. Additionally, CDCP is leading an upcoming multi-agency tabletop readiness exercise with the scenario of a measles outbreak in the jail.

Utilization Management

Based on chart reviews during the communicable disease collaboration, CHT began a broader reach of audits investigating timeliness of medical provider tasks, laboratory testing, and offsite appointments. Initial findings, shared with Wellpath, indicated a large number of identified clinical service tasks were repeatedly being rescheduled to subsequent days. This occasionally pushed the

clinical service outside timeliness expectations, and in some cases resulted in missed opportunities to treat due to patients being released or transferred.

In response, Wellpath updated processes, resulting in improved timeliness of laboratory tasks, review, and notification of results to patients. Offsite appointments have also improved timeliness from provider order to scheduling with the offsite provider. Wellpath has implemented daily clinician huddles with the intent of improving care coordination, and has created a clinical multidisciplinary team (MDT) that meets to discuss and guide care for clinically complex patients. BWell has reported positive impacts from the MDT for patients with significant mental health needs, and CHT anticipates benefits from a similar process for patients with complex medical needs. CHT continues to monitor these areas and has implemented a more robust and structured review process, while continuing to refine the process to further improve actionable data and tracking.

Service Level Agreement (SLA) Audits

CHT, in partnership with BWell, has updated the current SLA audits for the new contract, including expanding to include assessment of additional SLAs. This new process included the creation of a singular joint audit which will replace the two independent departmental audits, with the benefit of improving clarity and simplifying reporting, and removing redundancies due to overlap between the separate assessments. The combined audit assesses 19 clinical service areas, such as intake screenings and indicated therapies, withdrawal management, chronic care and mental health management, restrictive housing and safety cell usage, and discharge planning. CHT and BWell are working with SBSO to continuously improve monitoring and data collection by the County, towards the goal of systemic improvements of medical care in the County's jail through a sustainable quality program.

For Q2, covering April 1 through June 30, 2025, SLA audit findings are not available at the time of this letter. The Q2 audit was delayed due to the need to update and modify the audit measures and procedures. The Q2 audit was started but subsequently paused so as to not delay the start of the Q3 audit. The Q3 audit supersedes findings from the Q2 audit. For Q3, covering July 1 through September 30, 2025, SLA audits indicated good performance across both facilities for timely intake screening, initial response to sick call requests, management of high blood pressure, follow-up after offsite appointments, and timely escalation of care for patients in safety cells. Areas that fell below contractual performance thresholds include timely completion of the initial health assessment, tuberculosis screening, maintenance of a current diagnosis list, provision of medication prescriptions at release, and follow-up for medical needs identified during intake screening or from sick call requests.

When quarterly SLA audits indicate performance below contractual performance thresholds, Wellpath is required to develop and implement a CAP. County Health and BWell review proposed CAPs, provide feedback, approve implementation, and monitor progress at the monthly MAC/CQI meetings. CAPs may be closed when sufficient and sustainable improvement has been demonstrated. CAPs that do not adequately address the issue by the subsequent review period are reviewed to determine if current interventions should be maintained, revised, or replaced.

Accomplishments

In addition to the above-mentioned findings, it is important to also note accomplishments and other areas of progress that do not readily fit into other categories. Wellpath has expanded the medication-assisted treatment (MAT) program and eliminated the waitlist for patients dealing with substance-use disorders. This allowed a newly implemented process to offer MAT at intake when indicated, without the need for patients to first withdrawal, aligning with current best practices. Wellpath has utilized increased nursing staffing to separate administration of MAT medications from other routine

medications, which is expected to reduce risk for medication diversion while expediting medication delivery.

Through ongoing collaboration between Wellpath, SBSO, CHD, and BWell, the jails are seeing decreased utilization of restrictive safety cells, both in reduced placement and reduced time in cells. Increased clinical staff is anticipated to improve routine monitoring of patients in safety cells, which is an area of concern noted through BWell's quarterly audits. Additionally, an updated protocol aims to help ensure more timely utilization of BWell's Mobile Crisis team to evaluate patients in safety cells for potential need for escalation to a higher level of mental health care such as the County's Psychiatric Health Facility, and improved communication between Wellpath healthcare staff and Custody staff when patients are able to be stepped down from safety cells to a lower level of care within the jail facilities.

At their own initiative, Wellpath implemented an updated inmate worker clearance process, which now assesses all patients during the Initial Health Assessment. This provides SBSO with a ready list of cleared patients for the different worker programs, rather than waiting for a request to assess a specific patient.

Wellpath has also secured an onsite monthly optometry provider at each site. This is expected to expedite access to services for patients as well as reduce the Custody staffing burden associated with transporting patients to offsite appointments.

Additionally, CHT has coordinated meetings between Wellpath and SBSO with Santa Barbara Cottage Hospital and Marian Regional Medical Center. With a focus on Emergency Department services at the respective hospitals, these ongoing discussions are building mutual understanding and improving communication and care collaboration for patients during pre-booking assessments and those receiving emergent care.

Juvenile Justice Center Healthcare Performance Monitoring

As with the adult jails, CHT worked with Probation to expand and update the SLA audits for the new contract and to expand the scope of assessments regarding medical and dental care provided by Wellpath. Mental health care services at the JJC are provided by BWell and are not directly assessed during the SLA audit.

For Q3 of 2025, SLA audits indicated good performance for the initial health assessment, STI screening and treatment, follow-up after offsite appointments, dental care, and follow-up for medical needs identified from sick call requests. Areas that fell below contractual performance thresholds include timely intake screening, immunization management, provision of medication prescriptions at release, and maintenance of a current diagnosis list.

When quarterly SLA audits indicate performance below contractual performance thresholds, Wellpath is required to develop and implement a CAP. CHT reviews proposed CAPs, provides feedback, approves implementation, and monitors progress at the quarterly MAC/CQI meetings. CAPs may be closed when sufficient and sustainable improvement has been demonstrated. CAPs that do not adequately address the issue by the subsequent review period are reviewed to determine if current interventions should be maintained, revised, or replaced.

Fiscal Analysis:

There is no fiscal impact with your Board receiving this report.

Special Instructions:

Please email a copy of the Minute Order to the PHD Group Contracts Unit phdcu@sbcphd.org

Attachments:

Attachment A – Jail Quarterly Monitoring Findings 2025 Q3

Attachment B – Juvenile Justice Center Quarterly Monitoring Findings 2025 Q3

Contact Information:

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