

MEMORANDUM

Date:

9/14/2017

To:

Chair Hartmann and Members of the Board

From:

Alice Gleghorn, Director of Behavioral Wellness

Subject:

Additional information added to Agenda items

CC:

Mona Miyasato, County Executive Officer

Clerk of the Board Lindsay Walter Melanie Johnson

The Behavioral Wellness Department respectfully requests to add the attached to the Board Letters of the following agenda items:

- A. First Amendments with Transitions Mental Health Association and Mental Health Association in Santa Barbara County for Fiscal Year 2017-2018;
- B. Contract Renewal with Krassons for Fiscal Year 2017-2018.

A. First Amendments with Transitions Mental Health Association and Mental Health Association in Santa Barbara County for Fiscal Year 2017-2018:

The Performance Measures below were attached to the Board Contracts approved on June 21, 2016.

Performance Outcome Goals FY 16-17:

Behavioral Wellness' Research and Evaluation staff analyzed the FY 16-17 Programmatic Reports for Transitions Mental Health Association (TMHA) and Mental Wellness Center (MWC) and compared outcome goals to actual performance.

TMHA offers services through the North County Supported Community Services (SCS) program and the West County Assertive Community Treatment (ACT) program, both of which are Full Service Partnerships. In FY 16-17, ACT served 105 unique clients and SCS served 126. Each of these programs has eight (8) outcome goals (see Table 1). In FY 16-17, TMHA was, on average, able to meet outcome goals with one notable exception: within the SCS program, there were more than expected visits to the Emergency Room for physical health issues (16 more visits). TMHA explained that the increase was due to a few repeat visitors who were older frail clients that had infections and were unable to be seen in a timely manner in Primary Care.

Table 1. TMHA 16-17 Outcome Goals

ТМНА		A	CT	Supported Community Services	
		Goal	Quarterly Average	Goal	Quarterly Average
% Clients incarcerated		10%	4%	3%	2%
# Client psychiatric inpatient admissions		5	5.8	3	2.5
% Clients hospitalized for physical health reasons		10%	3%	4%	4%
# Emergency room visits for physical health care		10	6.7	5	21
% Clients with stable/permanent housing		93%	94%	95%	97%
% Clients employed, enrolled in school or training, or volunteering		20%	12%	20	15%
% Clients recovery will improve, as indicated by an increased MORS		50%	N/A	50%	N/A
# Clients graduating to a higher level of care due to psychiatric conditions		2	.25	2	.25
# Unique Clients Served	TOTAL				
ACT	105				-
SUPPORTED HOUSING	126				

MWC – Behavioral Wellness provides funding to MWC for Casa Juana Maria, Alameda House, and Cottage Grove House. Each of these programs has four (4) outcome goals (see Table 2). MWC was able, on average, to meet half of their outcome goals. They demonstrated positive outcomes for the Casa Juana Maria program which served 6 severely mentally ill clients in a long-term residential setting. For FY 16-17, 33% (2 of 6 clients) were either employed, enrolled in school/training or volunteering. All clients maintained stable/permanent housing. There were no incarcerations or psychiatric inpatient admissions for clients living at Casa Juana Maria. In addition to the long-term residential program, MWC operates two shorter-term residential programs, Alameda House and Cottage Grove. Medi-Cal services for these programs became effective March 1, 2017 which possibly explains why they were unable to meet all of their goals.

Table 2. MWC 16-17 Outcome Goals

MWC	Casa Juana Maria		Alameda House		CG House	
	Goal	Quarterly Average	Goal	Quarterly Average	Goal	Quarterly Average
% Clients employed, enrolled in school or training, or volunteering	30%	33%	30%	0%	30%	0
% Clients with stable/permanent housing	100%	100%	100%	87%	100%	47%
# Clients incarcerated per quarter	0	0	0	0	0	0
# Client psychiatric inpatient admissions per quarter	0	0	0	9.75%	0	13.40%

# Unique Clients Served	TOTAL
Casa Juana Maria	6
Alameda House	15
CG House	8

B. Contract Renewal with Krassons for Fiscal Year 2017-2018

As part of Behavioral Wellness' continual service improvement and changes in various regulatory and reporting requirements, Clinician's Gateway is frequently updated by the developer. The bulk of the Krassons contract cost for managing Clinician's Gateway is related to yearly licensing and software maintenance. This is standard practice for most software products and is similar to the County's Enterprise Agreement with Microsoft for operating system and productivity software – approximately \$600K annually.

There are only three products certified in California that provide the functionality Behavioral Wellness needs to operate its business. These products all have various advantages/disadvantages relative to the others. Behavioral Wellness periodically reviews other software options and determined that at this time, the cost would be prohibitive to move to another product that does not offer significantly more. Behavioral Wellness would continue to pay yearly licensing and maintenance fees regardless of the vendor.

An integrated appointment scheduling module is up in and running for a limited set of users. Behavioral Wellness is pursuing an updated version of the scheduling module that will be more user friendly and more easily support a centralized scheduling model.

Krassons has contracts with four counties including Santa Barbara. The yearly cost is based on usage determined by the developer. Additional product enhancement costs are typically split four ways across the counties.

-	Alameda	\$390K/year
-	San Joaquin	\$200K/year
-	Marin	\$150K/year

Krassons Inc. is managed by David Platton and currently consists of six additional dedicated staff with a pool of thirty contracted developers available as needed for various software maintenance and special

projects. The developer provides an average of 200 hours per month dedicated to Santa Barbara County for ongoing improvements and projects.

The Clinician's Gateway product is used by all Behavioral Wellness and CBO (Community Based Organization) clinical staff and is a significant source of data for required reporting. The system supports several hundred users documenting all client activity across MH (Mental Health) and SUD (Substance Use Disorder) programs. Ongoing maintenance efforts include changes to a variety of forms our clinicians use to track our client activity.

Recent and ongoing enhancement projects include:

- Meaningful Use Stage 1 (complete)
- Meaningful Use Stage 2 (complete)
- Clinician's Gateway Scheduler Version 1 (complete)
- SUD/ADP Security Enhancements for 42 CFR Part 2 Compliance (complete)
- Access Screening Forms/Workflow (complete)
- Lab Integration Quest Diagnostics, PDL, etc. (ongoing)
- SUD/ADP ODS Waiver Enhancements (ongoing)
- Clinician's Gateway Scheduler Version 2 (future)
- PHF Treatment Planning Integration (future)
- Meaningful Use Stage 3 (future)

In addition to these major projects, there is a revolving list of nearly one hundred smaller improvement items that the developer works on regularly. Behavioral Wellness' ability to work closely with the Krassons development team allows Behavioral Wellness to customize the product as needed for our community.