



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

Department Name: Behavioral Wellness
Department No.: 043
For Agenda Of: January 15, 2019
Placement: Departmental
Estimated Time: 30 Minutes
Continued Item: No
If Yes, date from:
Vote Required: Majority

TO: Board of Supervisors

FROM: Department Alice Gleghorn, Ph.D., Director
Director(s) Behavioral Wellness, 805-681-5220
Contact Info: Suzanne Grimmesey, Chief Quality Care and Strategy Officer
Behavioral Wellness, 805-681-5289

SUBJECT: Behavioral Wellness – Psychiatric Health Facility (PHF) Update

County Counsel Concurrence

As to form: Yes

Other Concurrence:

As to form: N/A

Auditor-Controller Concurrence

As to form: Yes

Recommended Actions:

That the Board of Supervisors:

- A. Receive and file a report on the **Psychiatric Health Facility (PHF)**, providing an annual update from the PHF Governing Board regarding operations of the PHF, including quality of care and other program activities; and
- B. Determine that the above actions are exempt from the California Environmental Quality Act (CEQA) pursuant to section 15378(b)(5) of the CEQA guidelines, as organizational or administrative activities of governments that will not result in direct or indirect physical changes in the environment.

Summary Text:

This item is on the agenda pursuant to the Board's Resolution establishing a PHF Governing Board and requiring the PHF Governing Board to make annual reports to the full Board of Supervisors, which retains authority to set general policy on fiscal and personnel matters within the County. The PHF Governing Board was originally created by action of the Board of Supervisors on August 30, 2016, as amended on September 20, 2016 and October 10, 2017, to provide oversight of the County's Psychiatric Health Facility (PHF). The PHF is a 16-bed, locked inpatient psychiatric facility that provides comprehensive services to individuals in need of acute psychiatric care. A PowerPoint presentation will provide information about

actions taken by the PHF Governing Board during calendar year 2018 to further its commitment to improving PHF operations and providing quality client care.

Background:

The Santa Barbara County Behavioral Wellness PHF is a 16-bed locked inpatient psychiatric facility that provides 24-hour acute comprehensive care to individuals with severe mental illness who require, per California Welfare and Institutions Code (WIC) Section 5150, psychiatric hospitalization at a Lanterman-Petris-Short (LPS) designated facility. The PHF is licensed by the State Department of Health Care Services (DHCS) as a "psychiatric health facility" and, in addition, is also eligible under Health and Safety Code section 1250.2(d) to participate as a hospital in the federal Medicare program if it meets all the federal conditions of participation. The PHF license only allows for adult clients (ages 18 and over).

Participation in Medicare qualifies the facility for designation as a "Super-PHF," meaning that it can bill both Medicare and Medi-Cal for services provided to qualified client beneficiaries. To maintain its eligibility to participate in the Medicare program, the PHF is subject to inspection approximately every five years by the Federal Centers for Medicare and Medicaid Services (CMS); the most recent prior inspection of this type took place in 2016. This inspection entails a review that the PHF has met the conditions of participation for hospitals pursuant to federal regulations at 42 CFR Part 482. In addition to CMS inspection, the PHF regularly participates in unannounced reviews of specific requirements for DHCS licensure as set forth in California regulations at Title 22 California Code of Regulations (CCR) Division 5, Chapter 9. All these reviews provide important monitoring of PHF services and facilities, identifying both areas of strength and improvement. Both state and federal regulations require an effective governing body that is legally responsible for the oversight of the facility.

In October 2018, DHCS conducted their triennial chart audit review of 567 patient days. Preliminary findings show a 38% disallowance rate, improved over the prior rate of 58 % in 2015.

PHF Governing Board

The PHF Governing Board provides oversight of the PHF to ensure it is in compliance with state and federal regulations.

On August 30, 2016, the Board of Supervisors (BOS) authorized the formation of the PHF Governing Board, as modified on September 16, 2016 and October 10, 2017. As of October 10, 2017, the PHF Governing Board consists of seven county officials: Assistant County Executive Officer of Health and Human Services, Director of General Services, Public Health Director, Chief Deputy of Custody Operations for the Sheriff's Department, a Public Guardian Representative, a Public Health Doctor, and one Supervisor from the County of Santa Barbara Board of Supervisors (and alternate). Since August 2016, Fifth District Supervisor Steve Lavagnino has served on the PHF Governing Board, with Second District Supervisor Janet Wolf as the alternate.

The PHF Governing Board is part of the PHF's governance structure that also includes the PHF Medical Practice Committee, and the Quality Assessment and Performance Improvement (QAPI) team. The PHF Governing Board meets monthly. Regular agenda items include:

- **Report on Quality Indicators.** At their monthly meeting, the PHF Governing Board receives a report on the Quality Assessment and Performance Plan and Indicators. Information is provided by staff about the following Indicators: Complaints and Grievances; Infection Prevention and

Control; Patient Services, Care and Safety; Restraint/Seclusion; Medication Use/Pharmacy Services; Significant Adverse Outcomes; Food and Nutritional Services; Physician and Allied Health Professionals and Related Services; Environment of Care (Facilities); Laboratory Services; QAPI Indicator List; Process Improvement Projects; PHF Status Report (Patient Status (UR) Report); Contract Monitoring; and Significant Areas/Key Events occurring at the PHF (e.g., patient care). If there are areas that are not in compliance, corrective action is taken.

- **Policies and Procedures.** The PHF Governing Board considers all new and revised policies and procedures. At the most recent meeting, the Board considered a new policy related to Medication Administration Schedule as well as revised policies and procedures for: Transcribing New Medication Orders, Access to Medication Storage Areas, Medication Labeling and Storage, Emergency Medications, Controlled Substance Management, Ordering Medications-Patient Supply and Remote Stock, and Medication Disposal and Destruction.
- **Medical Staff Bylaws.** The PHF Governing Board reviews any revisions to the bylaws.
- **Staff Credentialing/Privileging.** The PHF Governing Board reviews any requests to approve credentialing of candidates and to approve requests for staff privileges.

2018 Highlights

During Fiscal Year 2017-2018 and the first half of Fiscal Year 2018-2019, the PHF Governing Board oversaw several key initiatives at the PHF. These include:

- **Pharmacy Improvements.**
 1. Opening an Inpatient Pharmacy. The PHF Inpatient Pharmacy was opened to: potentially reduce costs, increase compliance and ensure timely availability of medications.
 2. Installing a medication dispensing machine (Pyxis). This machine provides secure, automated access to just one medication at a time.
 3. Working collaboratively with Public Health to develop a contract with AmerisourceBergen for the purchase of medications at wholesale prices.
- **Administrative Improvements.**
 1. Approving 101 Policies and Procedures. Since PGB's inception in September 2016 through December 2018, 101 total policies have been reviewed and adopted by the PHF Governing Board. This total includes revised forms of previous policies.
 2. Seeing the positive results of its process improvement efforts reflected in the PHF Patient Survey responses from Q1 (July 1 – September 30, 2018). Patients reported overall satisfaction with the services they received from the PHF. The majority of the responses for each survey question were in the Agree or Strongly Agree rating category. Improved survey collection strategy gives more accurate information.
 3. Continuing to see progress with its Quality Assessment and Performance Improvement (QAPI) program and indicator tracking system. The tracking system consists of 42 Primary Indicators that span the following categories: Significant Adverse Outcomes,

Complaints and Grievances, Patient services, Care and Safety, Laboratory services, Food and Nutrition Issues, Infection Prevention and Control, Restraint and Seclusion, Medication Use and Pharmacy Services, Environmental services and Environment of Care.

4. Focusing attention on environment of care. Improvements were made in the areas of environmental services, emergency preparations, and restraint/seclusion reduction.
5. Improving infection control practices. For example, increasing duration of hand washing to meet Center for Disease Control (CDC) guidelines.
6. Improving discharge summaries. Increasing compliance in discharge summaries containing all required elements.

□ **Emergency Preparedness Efforts.**

1. Navigating the Thomas Fire/Debris Flow Events of 2017 to ensure that the PHF was adequately staffed and remained operational.
2. Entering into Memorandums of Understanding (MOUs) with both North and South bordering Counties for the provision of Emergency Mutual Aid for each county's Psychiatric Health Facility (PHF) or Acute Care Hospital Psychiatric Unit. PHF has MOUs with the County of San Luis Obispo Health Agency Behavioral Health and the County of Ventura Health Care Agency Behavioral Health.
3. Adopting an Emergency Preparedness Plan (2/2018).
4. Participating in emergency preparedness drills.

Ongoing System Needs

In addition to PHF operational and capital improvements noted, the department continues to work to improve the overall system of care and ensure that clients are seen in the least restrictive setting possible. As noted in the Behavioral Health Capital Facilities Report presented to the Board of Supervisors in August of 2016, Mental Health Rehabilitation Center beds remain the highest priority need. Behavioral Wellness, in conjunctions with the County Executive Office, is continuing to work to establish these beds in County to enhance the overall system of care. In addition, work is continuing with all stakeholders to establish additional acute inpatient beds and housing options to address needs of the mentally ill.

Fiscal and Facilities Impacts:

Budgeted: This agenda item is for information and administrative purposes only. There are no current budget impacts

Special Instructions:

Please send one (1) minute order to: mejohanson@co.santa-barbara.ca.us and the BWell Contracts Division at bwelcontractsstaff@co.santa-barbara.ca.us

Attachments:

Attachment A: 2018 PHF Update PowerPoint

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