



County of San Diego

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TO: Supervisor Nora Vargas, Chairwoman
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Supervisor Joel Anderson
Supervisor Monica Montgomery Steppe
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FROM: Kimberly Giardina, Deputy Chief Administrative Officer
Health and Human Services Agency

UPDATE ON READINESS FOR CHANGES TO INVOLUNTARY BEHAVIORAL HEALTH TREATMENT IN SAN DIEGO COUNTY

On April 9, 2024 (19) the San Diego County Board of Supervisors (Board) received an update on the progress and key actions needed to support readiness for the changes brought forth by Senate Bill (SB) 43, which was signed into law in October 2023. SB 43 amends the Lanterman-Petris-Short (LPS) Act, which governs the involuntary detention and conservatorship of individuals with behavioral health conditions. The County of San Diego (County) Health and Human Services Agency, Behavioral Health Services (BHS) has advanced activities within four distinct areas to establish the infrastructure that is essential to effectively prepare for implementation of this major update to State law on January 1, 2025. Specifically, these efforts span: (1) Education and Training; (2) Expanded Treatment, Services, and Supports for People with Substance Use Disorder; (3) Alternatives to Emergency Departments for 5150 Transports; and (4) Updating Procedures and Adding Capacity for the Public Conservator's Office. Today's memorandum provides an update on the progress of these activities in addition to prior updates that were shared on April 9, 2024 (19) and memorandum on July 12, 2024.

Education and Training

Internal and external stakeholders previously identified SB 43 training as a key need. BHS contracted with Jewish Family Service of San Diego (JFS) to develop and conduct SB 43-related trainings. JFS developed a general introductory training on SB 43 and updated an existing training specifically for LPS-designated facilities. As of August 30, 2024, a total of 47 introductory trainings have been conducted for 419 individuals representing 31 different law enforcement agencies and non-LPS facilities. In addition, a total of 20 LPS-specific trainings have been conducted for 169 individuals representing 14 LPS-designated facilities.

JFS will continue to work closely with law enforcement agencies and treatment facilities to ensure all relevant staff are trained by January 2025 and will continue to communicate with stakeholders about available resources. Specifically, anticipated trainings to include staff at County contracted LPS designated facilities as well as mental health and substance use disorder residential facilities.

Expanded Treatment, Services, and Supports for People with Substance Use Disorder (SUD)

Since the launch of the Drug Medi-Cal Organized Delivery System (DMC-ODS) in 2018, BHS has been working to expand the SUD treatment system to meet the needs of the community. Although some setbacks have occurred due to the COVID pandemic and longstanding workforce shortages, BHS continues to work towards progress to build capacity. BHS has made broad investments across levels of care, many of which will directly support SB 43 needs inclusive, but not limited to, the examples below:

1. Over the last two years, BHS has increased capacity in opioid treatment programs by 150 treatment slots, and increased treatment capacity by 10% in the County adult general adult substance use outpatient programs to include expanded services of medication for addiction treatment (MAT) and ambulatory withdrawal management.
2. BHS will increase substance use residential capacity with the addition of the Substance Use Recovery and Treatment Services (SURTS) program in the South Region. It is anticipated that the SURTS program will include approximately 89 new substance use residential treatment and recuperative care beds. This program is expected to be operational by July 2026.
3. BHS secured \$12.4M for 49 new recuperative care beds countywide, boosting hospital-SUD treatment coordination for quicker access to care. While approximately 16 beds will be part of the SURTS program, the remaining beds will be contracted to providers in the community. These contracted recuperative care beds are scheduled to be operational by February 2025.

Additionally, BHS has been working toward implementation of San Diego Relay (SD Relay), a behavioral health peer response system delivered in selected emergency departments (EDs) by people with lived experience. Program services will be provided to individuals referred for services after experiencing a non-fatal overdose and/or due to an involuntary behavioral health hold. SD Relay is scheduled to launch in October 2024 and will support readiness for SB 43 by facilitating connections from EDs for those with severe SUD (i.e., not limited to nonfatal overdose) with the aim to support and improve care transitions for referred participants. Implementation of SD Relay also supports feedback from hospital system partners who have emphasized the benefit of having hospital team members dedicated to SUD-related work to improve ED care and community connections.

BHS continues to collaborate with the County Office of Economic Development and Governmental Affairs (EDGA), as well as statewide associations, to advocate for regulatory and payment changes that will enhance the development of involuntary SUD treatment in LPS settings. Simultaneously, BHS is working on agreements with select hospitals that have the capacity to provide Chemical Dependency Recovery Services when treatment need exceeds 72 hours. Furthermore, BHS is partnering with all hospitals with Behavioral Health Units to explore their capacity to offer involuntary SUD treatment services for cases where Chemical Dependency Recovery Service designation is not required (i.e., treatment within 72 hours).

BHS' long-term objective is to create a sustainable fiscal model for SUD treatment services. As such, BHS is currently conducting a comprehensive mapping and capacity analysis of the SUD system of care in San Diego County, through the Optimal Care Pathways (OCP) model. The goal of this analysis is to optimize how individuals access SUD services and supports, identifying and reducing access barriers while effectively supporting recovery across the continuum of behavioral health services. To date, BHS has completed a preliminary draft of the SUD model, including capacity estimates to accommodate anticipated SB 43-related evaluations and involuntary treatment. Next steps include

refinement of all inputs and assumptions, followed by development of a draft set of recommendations for broader review and feedback.

On February 27, 2024 (11), the Board approved \$15 million to support SB 43 readiness and serve as a bridge until more sustainable funding is identified. However, the pace at which the County would expend these funds depends primarily on two variables. The first variable is the unknown volume of people to be transported through 5150 initial holds, and whether subsequent holds are applied based on new requirements driven by SB 43. The second variable is the speed by which the State Department of Health Care Services (DHCS) would make regulatory and administrative changes that would enable Medi-Cal reimbursement for services that would have otherwise been sustained with the local bridge funding. Expenditure of the local bridge funds will be monitored closely as implementation activities move forward.

Alternatives to EDs for 5150 Transports

As identified via internal and external stakeholder input, SB 43 readiness in the area of alternatives to EDs for 5150 transports includes reviewing regulatory parameters for maximum use of crisis stabilization units (CSUs) for primary and stand-alone SUD evaluation and treatment, among other actions. BHS has continued to meet regularly with CSU program leadership to provide technical assistance which includes discussion of strategies to support clients who have substance use issues and may be experiencing withdrawal. Additionally, BHS has continued to offer education and support to ensure that CSU clients are successfully linked to outpatient and residential substance use treatment facilities. It is anticipated that CSU contracts will be amended accordingly for this work to be in effect by January 1, 2025. Notably, in July 2024, a new CSU broke ground in East County, expanding CSU coverage to all regions. Although current and projected capacity of CSUs can accommodate additional patient volumes, BHS staff will continue to closely monitor the number of admissions and make necessary adjustments as needed.

Updating Procedures and Adding Capacity for the Public Conservator's Office

The County Office of the Public Conservator (PC) has updated and finalized existing policies and procedures, as well as the LPS referral form that required adaptation in preparation for SB 43 implementation. All staff will be trained on updated policies and procedures, the LPS referral form, and operational processes during Fall 2024. These documents will be ready for the SB 43 implementation date of January 1, 2025.

Additionally, PC has conducted analysis on existing staffing and other resources to identify additional supports needed for the influx of additional conservatorship referrals and subsequent permanent conservatorships that may result from the implementation of SB 43.

In preparation for SB 43 implementation in January 2025, New data collection mechanisms are being developed with the PC team to prepare for SB 43 implementation in January 2025. This includes the integration of new data elements in their system (Panosoft) needed for reporting. In collaboration with the Panosoft vendor, reporting structures and data collection for required reporting are estimated to be completed by May 2025.

Additional Updates

Public-Facing SB 43 Information

In March 2024, BHS launched a comprehensive SB 43 website (URL: bit.ly/senatebill43) that includes an overview of changes to existing law, a fact sheet and video, a timeline of critical actions, and frequently asked questions. Staff continue to add relevant information as available. Additionally, public messaging related to SB 43 will be provided through social media platforms leading into SB 43 implementation efforts in January 2025.

Liaising with External Stakeholders

Throughout the planning process of the activities described above, BHS has continued to seek input from external stakeholders to inform County efforts, including hospitals, SUD treatment programs, organizations serving people experiencing homelessness, people with lived experience, as well as law enforcement agencies. Specifically, input has been gathered through a cumulative total of four collaborative workgroup sessions, and five subcommittee meetings focused on training, emergency department diversion and expanded substance use disorder services. BHS staff have also regularly attended a variety of recurring external stakeholder meetings, with the goal of providing brief updates and presentations on SB 43 upon request and receive feedback. Meetings include those with the Emergency Medicine Oversight Commission, Crisis Stabilization Units, LPS facilities, Hospital Partners, Healthy San Diego Operations, Mental Health Contractors Association, and the Alcohol and Drug Services Provider Association.

Ongoing Advocacy and Statewide Collaboration

BHS, in close collaboration with EDGA, has continued to advocate for solutions to the operational and Medi-Cal reimbursement-related challenges to providing SUD care in LPS-designated facilities. In addition, BHS is threading with the California Behavioral Health Directors Association and other counties throughout the state to learn about implementation activities and planning efforts, while sharing strategies and best practices.

Staff will continue to provide updates to the Board on progress with implementing SB 43 on a quarterly basis via future memorandums, or to coincide with significant developments. BHS will return to the Board should additional funding or procurement authority be required. For questions, please contact Dr. Luke Bergmann, Director, with Behavioral Health Services via phone at (619) 563-2700 or email Luke.Bergmann@sdcounty.ca.gov.

Respectfully,



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c: Ebony N. Shelton, Chief Administrative Officer