January 11, 2019

Dear Alameda County Behavioral Health (ACBH) Stakeholders,

The ACBH Adult and Older Adult System of Care (AOASOC) is committed to designing a system of care whose foundation is built on the concepts of prevention, early intervention and “rightmatched” services. Over the next three-to-five years as we engage in systems change, the AOASOC will focus on five major areas to create a system of care that:

- Integrates Managed Care Principles into the AOASOC
- Diverts people with lived experience from the most restrictive settings and provides a majority of services in the community
- Emphasizes coordination of care through systems integration and collaboration among partners
- Provides culturally responsive and affirming services in the community where our beneficiaries live
- Uses quality improvement strategies and results-based accountability measures to ensure we know “how much we’re doing, how well we did it, and who is better off” as a result

Background:

Incarceration: According to a 2016 California Department of Corrections and Rehabilitation report, over 30% of CA’s prison population currently receive treatment for a “serious mental disorder”, an increase of 150% since 2000.

Ensuring service connection: We need to significantly improve the service connection rate for our beneficiaries. From the point of referral, the average connection to service rate for ALCO beneficiaries is 55%.

Involuntary psychiatric holds: In FY 15/16, Alameda County (ALCO) placed 24,691 involuntary psychiatric holds. Alarmingly, we have the highest involuntary hold rate per capita in the state at 150% above the state average.
2019 – 2020 AOASOC Projects

Creation of a Crisis Continuum of Care: Our purpose is to ensure individuals have timely access to an array of behavioral health services from prevention to inpatient treatment, depending on the individual’s immediate need, in order to prevent unnecessary use of the most restrictive environments. These include hospital inpatient settings and/or jail. Specific AOASOC programs include:

- Peer respite services
- Mobile crisis team expansion
- Post-crisis follow-up teams
- New crisis stabilization and crisis residential treatment services
- Urgent medication services expansion at ACBH county clinics

Community based recovery - oriented services: Our purpose is to ensure people receive treatment in the least restrictive environment possible to promote recovery, including:

- Case management services offering varying degrees of intensity that focus on face-to-face engagements and prevention services in the community
- Proactive outreach teams for beneficiaries that are the least connected and the most reluctant to accept services
- Helping people with mental health and substance use conditions get connected to services and benefits coming out of jail and acute settings including hospital emergency departments

New regulations related to diversion from the criminal justice system to behavioral health treatment: California has passed recent legislation for pre-trial diversion for people with behavioral health conditions who have committed certain misdemeanors or felonies. Specific AOASOC strategies include:

- Working collaboratively with the Public Defender, District Attorney, and Behavioral Health Court to implement diversion practices across Alameda County
- Engaging in a state diversion pilot program

http://www.dsh.ca.gov/About_Us/docs/2018-19_Budget_Act_Highlights.pdf
Improved care coordination across the system: Development of specific interventions that will bolster care coordination and promote appropriate crisis system utilization and provision of ongoing services.

Finally, AOASOC leadership plans to invite you to attend various strategy meetings throughout the year. The goal is to create additional venues for communication and collaboration among stakeholders. We value your input and recognize the value of diverse contributions and ideas.

Please do not hesitate to contact us with any questions. Best wishes to you in the New Year!

Sincerely,

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