

Better Health for All



Santa Clara Valley Health & Hospital System
Administration
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DATE: October 31, 2018

TO: Honorable Members of the Board of Supervisors
Jeffrey V. Smith, M.D., J.D., County Executive

FROM: René G. Santiago, Deputy County Executive/Director, SCVHHS

DocuSigned by:
René Santiago
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Matthew Gerrior, Director of Custody Health Services

DocuSigned by:
Matthew Gerrior
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SUBJECT: Custody Health Services System of Care

On March 20, 2018 Vice President Chavez requested information relating to the Behavior health teams in the jail, how many clients the teams serve, how long-term success and effectiveness will be measured, and the correlation between service dosage and with amount of resources and time expended. She also requested information relating to protocols and practices whereby Custody Health Services (CHS) informs the Office of the Sheriff staff about detainees' mental health and medical needs, and barriers to that process that have not been addressed .

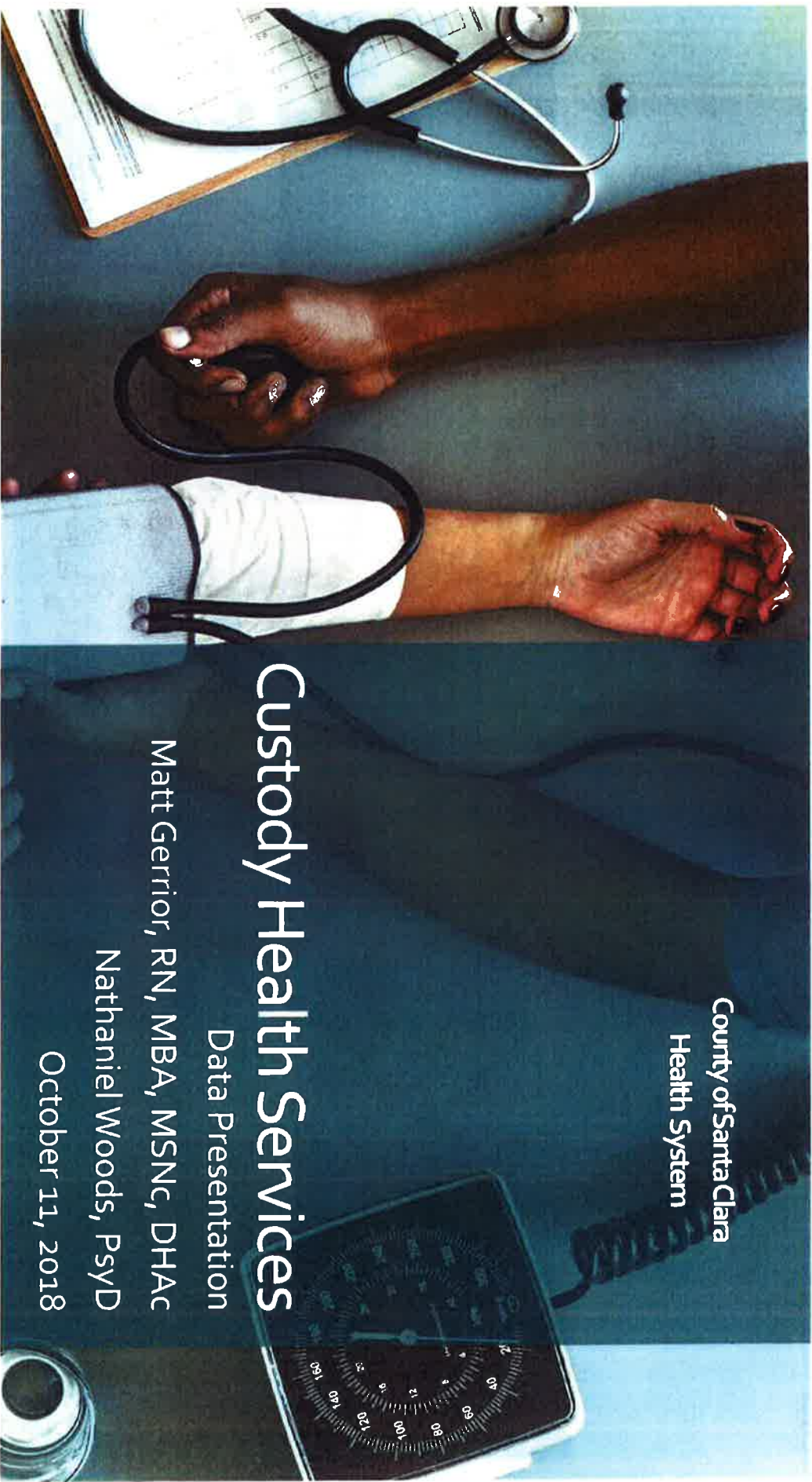
Since the implementation of HealthLink, CHS has better data to measure and define the services and patients served in the custody setting. As can be seen in the presentation, CHS is transforming its service model, moving from the provision of episodic care to implementing a patient centered system of care. CHS will measure access to care, as well as the system of care, to insure quality of care.

Regular updates will be provided to the Health and Hospital Committee and quarterly special study sessions of the Board of Supervisors.

Attached is a PowerPoint presentation that was presented at the October 10 Health and Hospital Committee that outlines the CHS system of care. The presentation addresses the change process undertaken by CHS, the array of services available, initial data on the number of adult custody patients screened and assessed, as well as some early success which can be seen as result of the deployment of Behavioral Health Teams and other activities. For example, the average length of stay on 8A has decreased 20% while the volume has increased by 16%.

Please let us know if there are additional questions or concerns.

cc: Miguel Marquez, Chief Operating Officer
James R. Williams, County Counsel
Megan Doyle, Clerk of the Board
Chief Board Aides
Mercedes Garcia, OBA
Agenda Review Administrator



County of Santa Clara
Health System

Custody Health Services

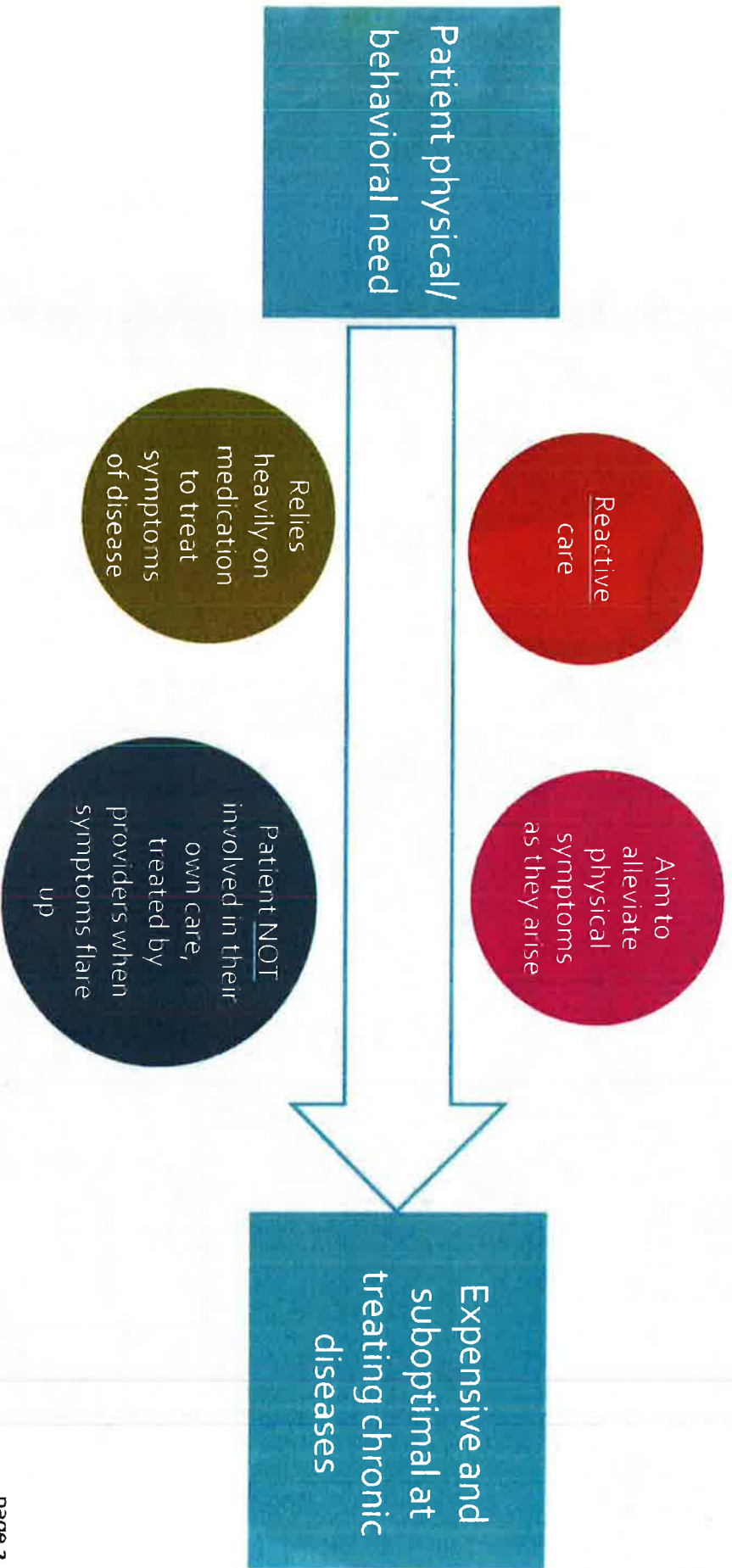
Data Presentation

Matt Gerrior, RN, MBA, MSNc, DHAC

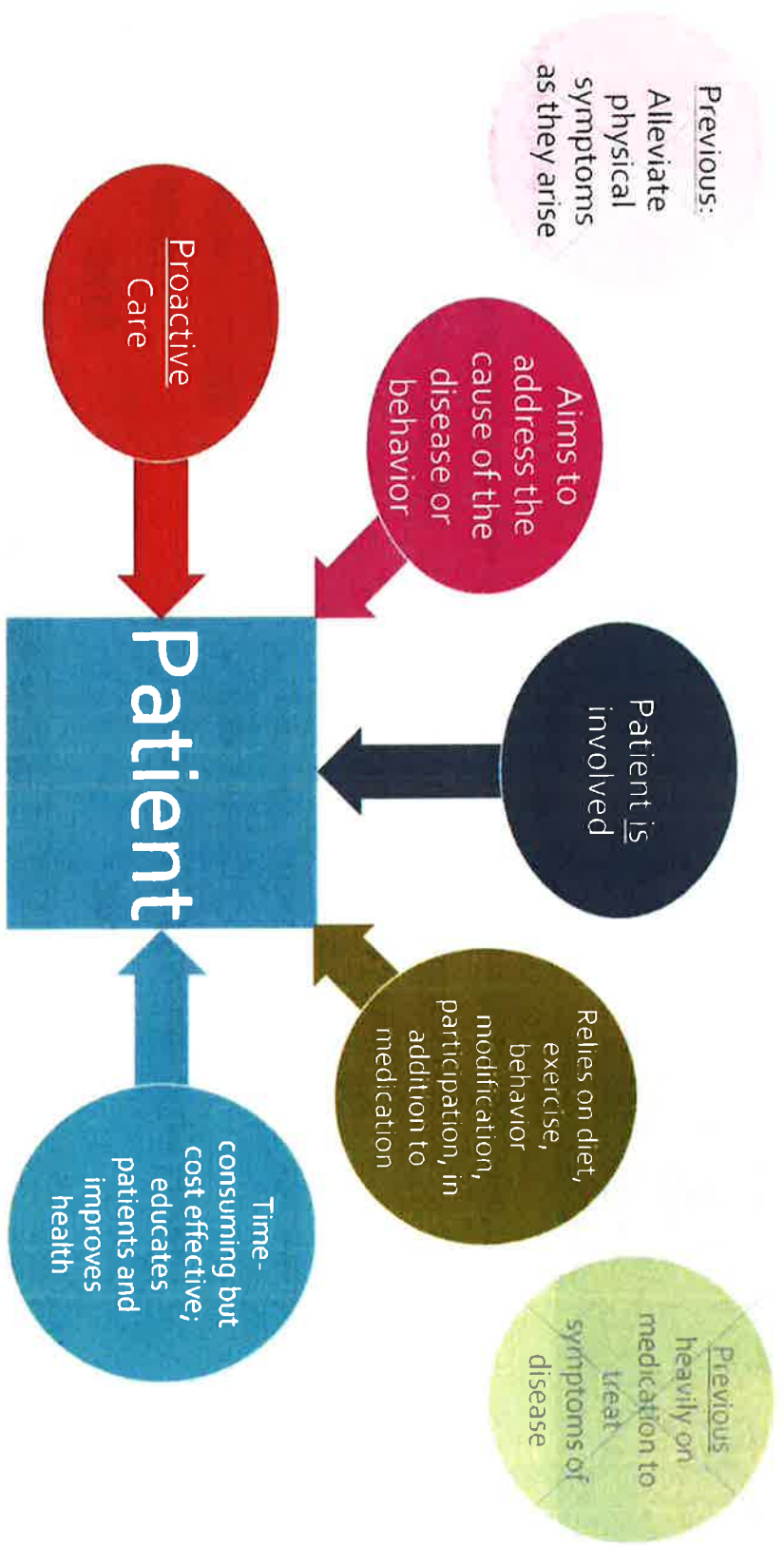
Nathaniel Woods, PsyD

October 11, 2018

Previous State: Episodic Care System



Current State: Patient Centered System of Care



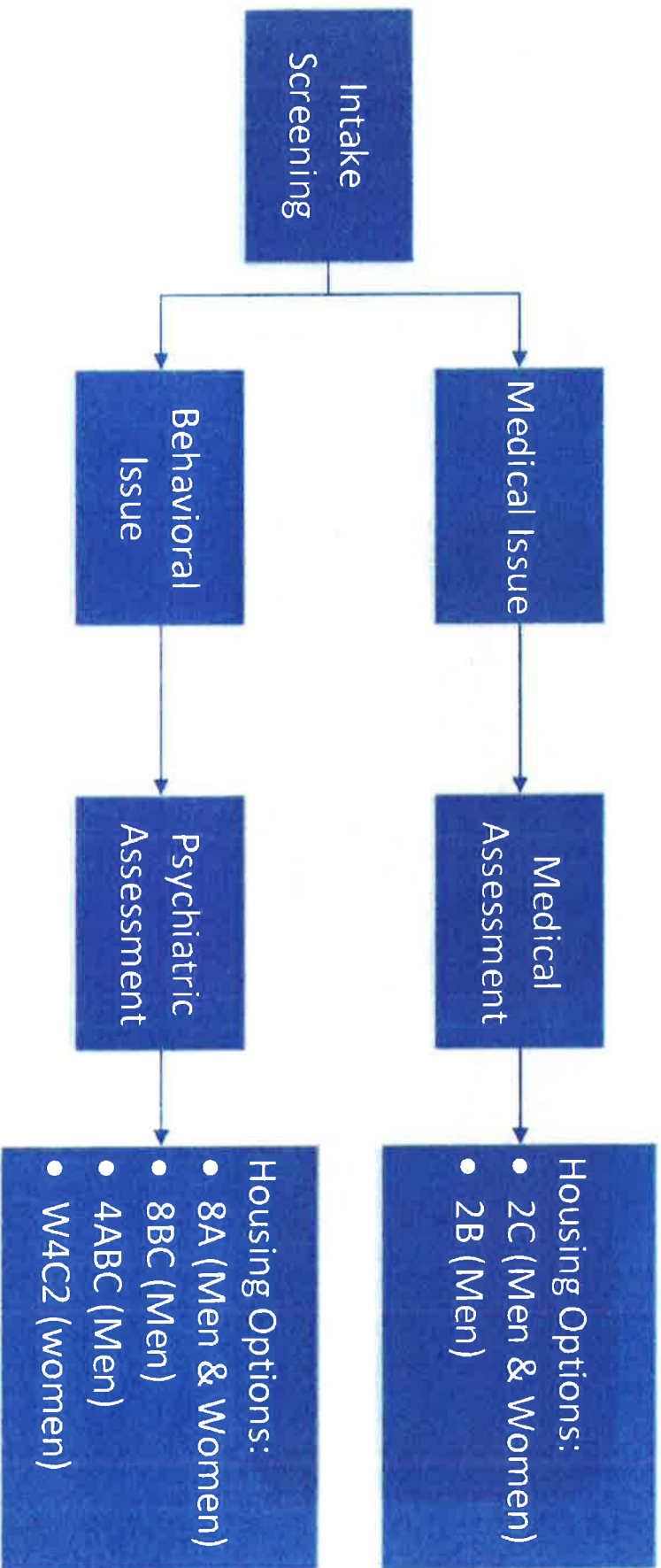
Comparison of CHS 2015 versus 2018

2015	2018
<ul style="list-style-type: none">• Episodic Care Model• 1.5 FTE for Psychiatry – coded<ul style="list-style-type: none">• Less than 2 Psychiatrist for 4000 patients• Irregular use of contracted Psychiatrist• No Behavioral Health Teams• Crisis Intervention staff at 20 clinicians• Inpatient/Outpatient treatment clinicians 8• Total CHS Staff 215	<ul style="list-style-type: none">• Patient Centered Consistent Care Model• Psychiatrist 9.5 - coded• 7-9 TBH Psychiatrists (Booking & 8A coverage)<ul style="list-style-type: none">• 17 Psychiatrists for 3400 patients• 10 Behavioral Health Teams• Crisis Intervention staff now at 14• Inpatient/Outpatient treatment clinicians 29• Total CHS Staff 280

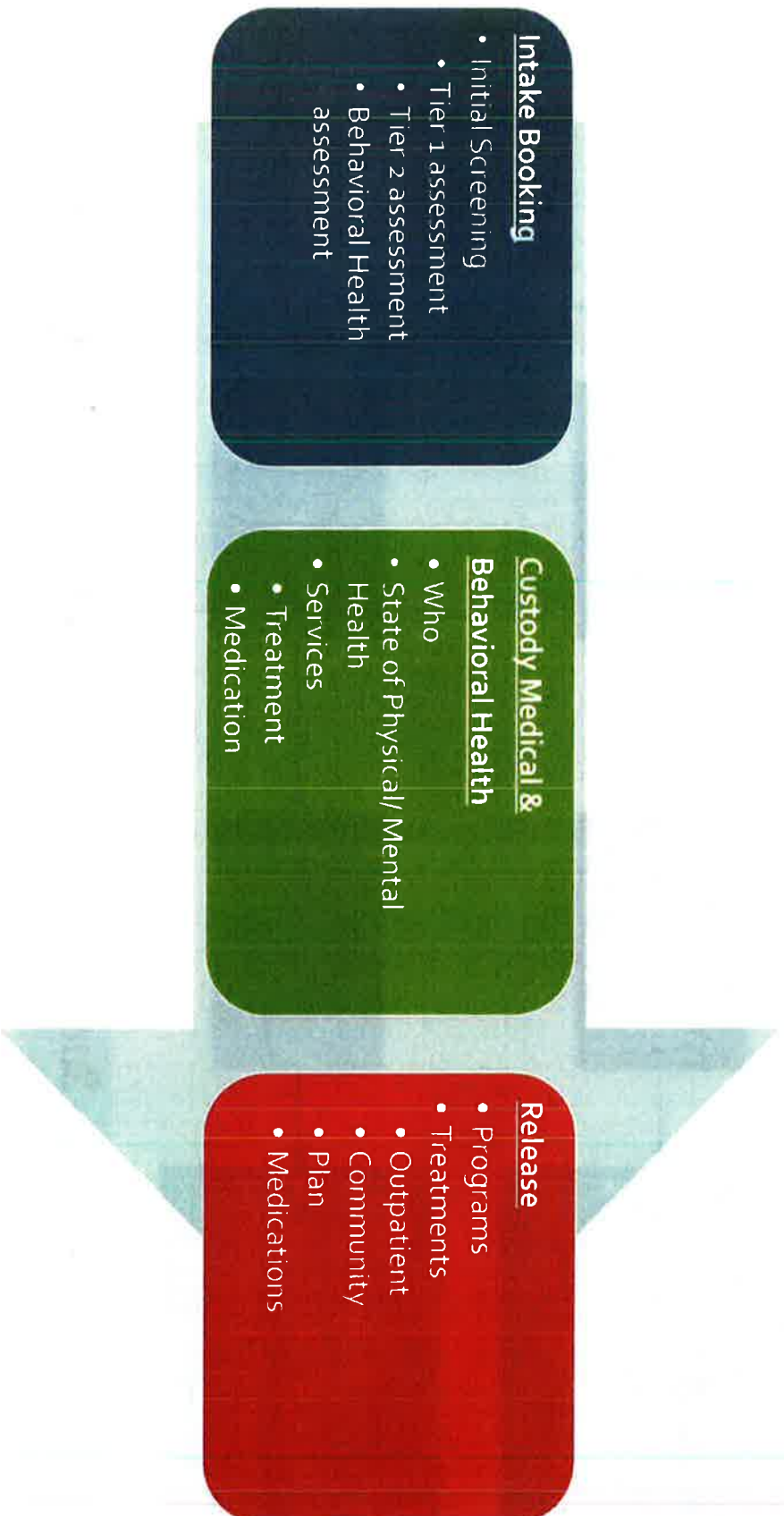
Productivity is about
being effective
with your time,
energy, resources,
and talent.



Current State: System of Care - Healthcare Booking Process



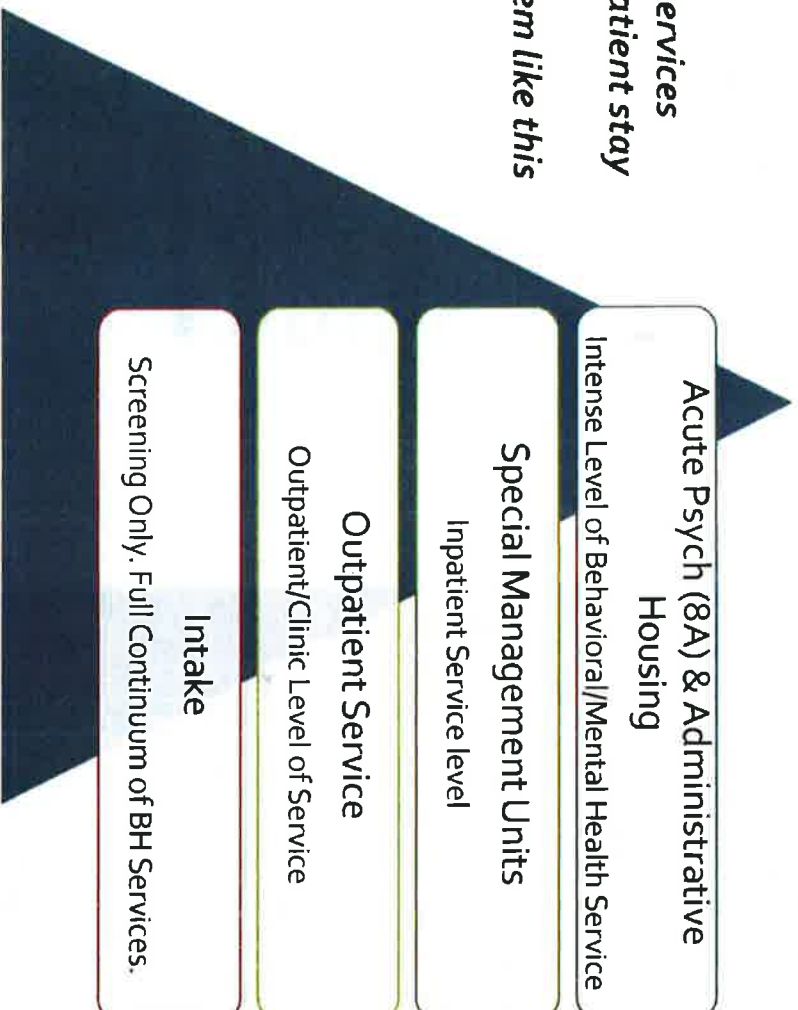
Current State: Custody Health Services Flow



CHS Behavioral Health Services

*Full range of services
throughout the patient stay*

No other jail system like this





Unique

We are the only Custody Health Service in the world using the acute care model at this time



First to Market

CHS is the first to use the acute care model and the largest opening of a "hospital" in Epic history



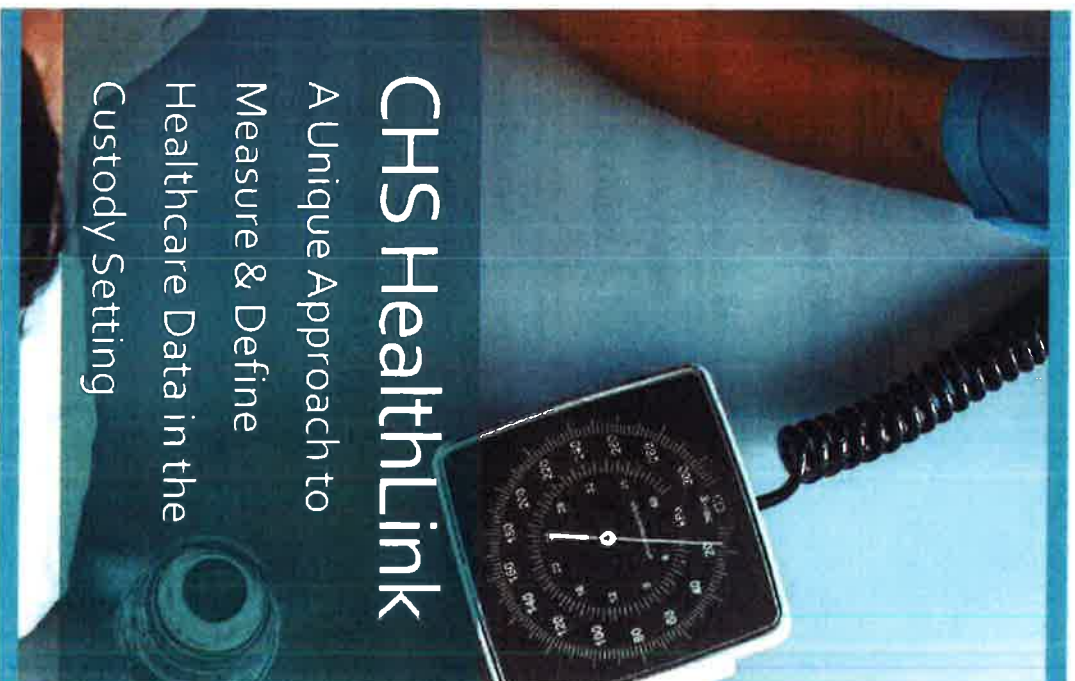
Tested

CHS vetted our information through random chart audit and system comparisons



Authenticated

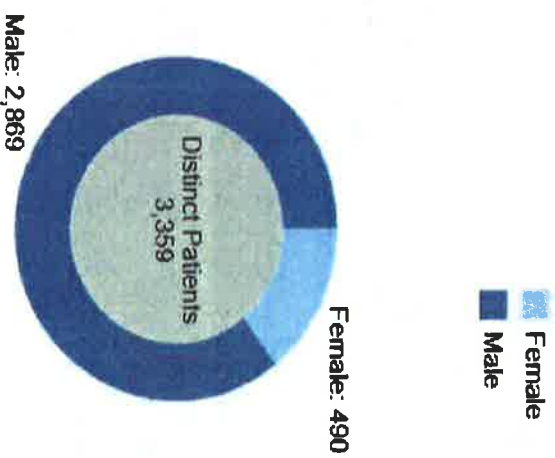
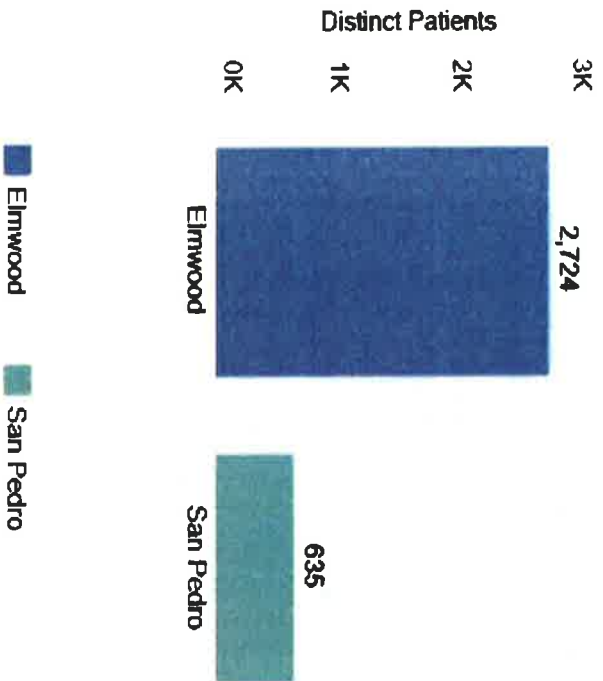
With many refinements CHS is now starting our data journey



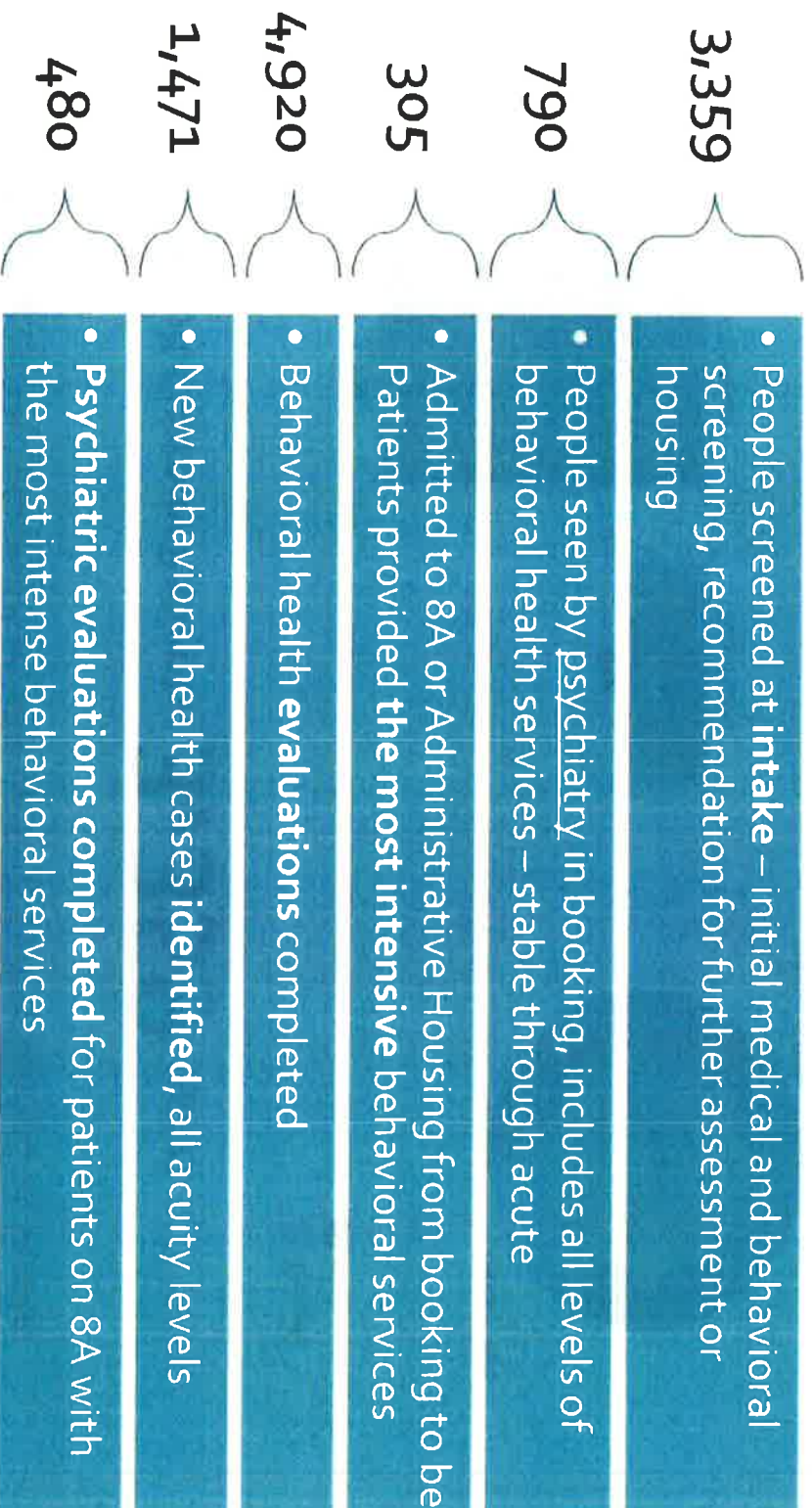
CHS HealthLink
A Unique Approach to
Measure & Define
Healthcare Data in the
Custody Setting

Screening: All inmates are admitted to the system and screened at intake

Adult Custody Patients: **3,359** (9/17)



Custody Behavioral Health By the Numbers



(September 2018)

Early Results: Measuring Efficiency – Psychiatric Consult Completed



Time decreased from 3.5 hours to < 2 hours for highest acuity patients

Consult time < 2 hours for men & women in 8A and BHT

8A patients were assessed in ≤ 1 hour

Early Results: Review of Grievances - ACeS

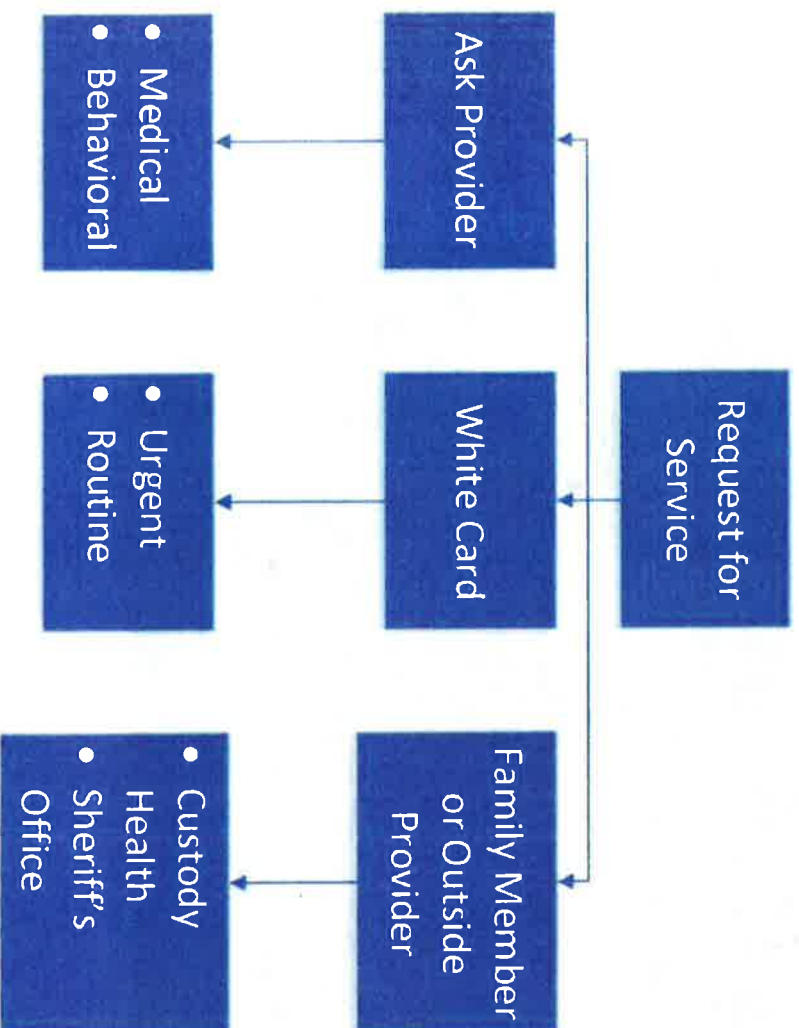
- Sheriff's Office reported CHS had 714 grievances over six month period
- Equals 119 / month
- 98 grievances received in the month of August

Grievances have decreased; working to reduce further

Managers for medical, dental, and behavioral health assigned to review grievance

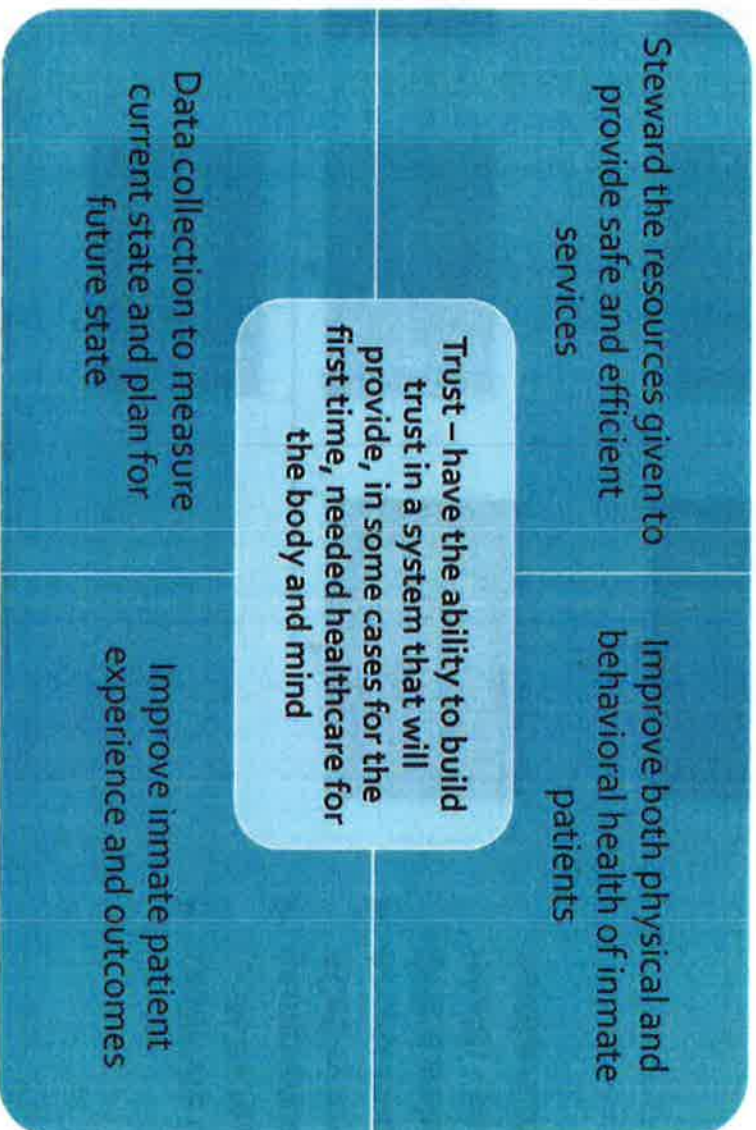
Decreased time managers expected to review grievances

Early Results: Request for Service Process



- 120 White Card requests per day (20% increase from last year)
- 5 Grievances per day through ACEs system
- Access through the Sheriff's Office website for Custody Health - simplified from 7 phone numbers to 2

Early Improvements in Focus Areas for Custody Health



Average length of stay on 8A has **decreased 20%** with volume increased by **16%** over the last year

- CHS has added:
- BHT
 - Initial screening assessments in Booking
 - Leads to system of treatments to improve care



Thank You

Matt Gerritor, RN, MBA, MSNC, DHAC
Executive Director, Custody Health Service

Nathaniel Woods, PsyD
Director Custody Behavioural Health Service

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