

Better Health for All



County of Santa Clara Health System

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DATE: June 22, 201

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, County of Santa Clara Health System (Health System) ^{DS} KS
 Sherri Terao, Director of Behavioral Health Services Department (BHSD) ^{DS} ST

SUBJECT: **Assisted Outpatient Treatment (AOT) and Substance Use Treatment Services (SUTS) Resources**

During the Board of Supervisors Meeting on May 25, 2021 (Item No. 26), Supervisor Lee requested that the BHSD provide an off-agenda report on existing SUTS resources, the process by which individuals receive SUTS care, whether current SUTS resources are sufficient for the behavioral health system, and whether AOT is inclusive of SUTS needs.

Substance Use Treatment Resources

BHSD provides a continuum of care that offers SUTS to youth, adults, and older adults who encounter life challenges because of substance use. These services are described in detail below:

- **Adult Withdrawal Management (WM) services** provides an individual recuperating from withdrawal symptoms with a place to be monitored by staff during the detoxification (detox) process. WM services include intake and assessment, observation (evaluation of the individual’s health status and their response to medication prescribed), medication services, and discharge planning. WM is offered in a social detox model that does not require a medical staff to be onsite to provide extensive medical monitoring and treatment. Typically, withdrawal management lasts for three (3) to seven (7) days.
- **Adult and Youth Residential services** offer youth and adults supportive 24-hour, non-medical, short-term “live-in” treatment which includes rehabilitation services to individuals with a Substance Use Disorder (SUD) diagnosis. Services include intake



and assessment, treatment planning, individual counseling, group counseling, family therapy, collateral services, member education, medication services, safeguarding medications (facilities store residents' medications and assist residents with administration of the medication), crisis intervention services, transportation, and discharge planning. The goals are to sustain abstinence, prepare for relapse triggers, improve personal health and social functioning, and engage in continuing care. Residential services require prior authorization for a maximum of 90 days for adults (60 days post-partum for perinatal) and 30 days for youth.

- ***Youth Outpatient and Adult Outpatient which includes Intensive Outpatient, Partial Hospitalization and Recovery Services:*** Outpatient Treatment Services are based on the American Society of Addiction Medicine (ASAM) assessment that recommends matching individuals to the appropriate ASAM-Levels of Care (LOC). Services offered in outpatient include intake and assessment, treatment planning, individual counseling, group counseling, family therapy, collateral services, member education, medication services, crisis intervention services, and discharge planning.
 - Outpatient Services (OS) are provided to individuals for up to nine (9) hours a week for adults and less than six (6) hours per week for adolescents.
 - Intensive Outpatient Services (IOS) are provided to individuals a minimum of nine (9) per week for adults and nine (9) hours per week for adolescents.
 - Recovery Services are provided at a minimum of one contact per month for those individuals who have been in treatment and are in partial remission and continue to need education and support for relapse prevention.
- ***Narcotic Treatment Program (NTP)/Medication Assisted Treatment (MAT) Clinics***
 - Opioid (Narcotic) Treatment Program (OTP/NTP) services are provided in NTP licensed facilities and are required to offer and prescribe medications to individuals covered under the Drug Medi-Cal formulary, including methadone, buprenorphine, naloxone, and disulfiram. An individual must receive a minimum of 50 minutes of counseling sessions with a therapist or counselor for up to 200 minutes per calendar month.
 - Medication Assisted Treatment (MAT) services are available outside of the OTP and are available to all beneficiaries being provided either outpatient or residential treatment a by a licensed physician. MAT is the use of prescription medications (e.g., buprenorphine, naloxone, disulfiram, Vivitrol, Acamprosate, or any FDA approved medication for the treatment of SUD), in combination with counseling and behavioral therapies to provide a whole-person approach to the treatment of SUD.



- **Adult Recovery Residences:** previously known as transitional housing, are structured and safe living environments for individuals who are engaged in outpatient treatment and need a safe space or temporary housing. Recovery Residence services provide an opportunity for individuals to develop a support system while receiving SUTS outpatient services. Recovery Residences are available to men, women, pregnant women, women with children, men with children, individuals with co-occurring disorders, and individuals released from custody in need of substance use treatment. These services were established to support sober living and a smooth transition into the community. The goal is to promote the quality drug and alcohol rehabilitative services provided and improve public safety. The average length of stay is 32 days.

Access to Services

Currently, individuals seeking substance use treatment services can contact the BHSD Call Center-Gateway for screening and referrals. Individuals who are justice involved can also access SUTS programs through the Re-Entry Resource Center and the BHSD Treatment Courts, which include the following: Mental Health Court, Drug Court, Dependency Wellness Court, and Juvenile Hall. Furthermore, a BHSD clinician is assigned to the Valley Medical Center Primary Care sites and the medical hospitals where individuals are screened and assessed by their medical provider for substance use treatment. BHSD also has several other screening sites where individuals can walk-in and receive services offered by BHSD SUTS contracted providers, such as Pathway WM, Mariposa WM, and Children, Family and Community Services (CFCS). Usually, individuals are screened with the Integrated Screening Tool (IST) which utilizes the ASAM-LOC manual’s ASAM criteria that targets seven (7) dimensions to create a holistic, biopsychosocial assessment for individualized service planning and treatment across all levels of care. The ASAM considers the needs, obstacles, and liabilities of the individual, as well as their strengths, assets, resources, and support structure. For individuals in need of SUTS Residential who are admitted into Emergency Psychiatric Services (EPS), Barbara Aron Pavilion (BAP), inpatient hospitals, Medical Respite and/or Mental Health Crisis Residential, the BHSD Call Center-Gateway routes these requests to the BHSD’s Quality Improvement team to coordinate with the medical director who oversees SUTS residential services to determine medical eligibility.

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SUTS Resources Table 1: SUTS – Program descriptions FY 2021 (July 1, 2020 – May 31, 2021)

Program Name/Area	Treatment Providers	How services are available	# of clients annually	Wait times (1/1/2021-5/31/2021)	Waitlists
Youth - ASAM 1.0 & 2.1 (Outpatient & Intensive Outpatient)	Children, Family & Community Services – County AACI HR 360 Advent	Clients call BHSD Call Center and transfer to the youth line for additional screening and placement. Referrals from schools and probation.	189	0-7 days	No waitlist
Outpatient Services (Adult ASAM 1.0 outpatient), ASAM 2.1 (intensive outpatient), perinatal outpatient (pregnant and parenting women), and recovery services	Re-Entry Resource Center- Behavioral Health Team- County Central Treatment-County Proyecto Primavera HR 360 Pathway Momentum Caminar Central Valley Center-PSAP OP	Clients call Gateway for an appointment. Referral by other providers if clients are already in treatment	2365	0-18 days	No waitlist
Youth residential (ASAM 3.1)	Advent	Clients call Gateway and transfer to the youth line for additional screening and placement; referrals from schools and probation.	14	Has had ongoing available capacity.	No waitlist

Residential Services (Three different levels of residential services): general substance use client (3.1), slow pace of treatment (3.3), and clients with medical co-morbidities (3.5). Perinatal residential services for pregnant and parenting women, and youth under 18 years.	Pathway Telecare-Criminal justice Parisi – House on the Hill-women	Clients call Gateway for an appointment. Referrals from other providers. Hospital-based counselors can refer via Gateway consultation line.	514	Range 1-40 days	45 on waitlist (6/8/2021)
Withdrawal Management (WM 3.2): Individuals actively using substances and can be placed in a social detoxification setting.	Pathway Telecare	Clients call Gateway for an appointment. Referrals from other providers. Clients can call providers directly.	328	>7 days	59 on placement list
Medication Assisted Treatment: Treatment with older FDA medications (e.g., methadone and buprenorphine) and newer medications (e.g., Vivitrol - an injectable naloxone) available to adult, youth and perinatal clients	CVC – County Alexian-County South County – County BAART	Clients call Gateway for an appointment. Referrals from other providers if clients are already in treatment. Doctors must establish medical appropriateness	480 (estimated)	Range 0-7 days	No waitlist
Recovery Residences: sober living homes available to adult clients with and without children who are attending outpatient treatment.	Solace CADS Life Moves Pathway	Referrals come from outpatient providers. Gateway may place in-custody clients in Recovery Residence if they are placed in outpatient services.	424	1-37 days	15 on placement list

The table above provides an overview of the array of services BHSD offers for substance use treatment, the various treatment providers, how individuals can access services, number of individuals served in each modality annually, and the programs' capacity. The current referral structure and requirements from the Department of Health Care Services (DHCS) Network Adequacy Certification Timeline (NACT) does not allow BHSD to maintain a waitlist. Specific to SUTS outpatient services, referrals are processed through BHSD Call Center-Gateway and referred to a provider. There is no waitlist to refer to SUTS services. Individuals can access services and be referred to a provider for an intake on the same day. The wait time illustrated above for SUTS outpatient services is the interval between the screening and appointment time. The variances in the appointment-based access metric occur due to multiple reasons such as client preference for a particular time slot or geographic location or staffing at the provider site.

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Although BHSD has adjusted contracts to increase capacity for substance use services, there continues to be a need of capacity in a few service modalities as highlighted in the table above. SUTS Adult Residential services, WM, and Recovery Residences services have individuals waiting to access care. The wait times for residential treatment programs have dramatically increased since the COVID-19 pandemic and the shelter-in-place restrictions. Providers instituted the policy on social distancing which limited the number of persons who could be placed in a single room. One client per room was the strategy adopted to limit COVID-19 exposure in a congregate setting. This reduced the number of individuals that could be placed in the residential program by 50% or more at the largest SUTS provider and resulted in increased wait times. Currently, providers are working closely with the County Public Health Department and instituting the Center for Disease Control guidelines to gradually bring their programs up to the contracted capacity. The BHSD will continue to monitor utilization and capacity and make improvements where necessary.

The BHSD is an integrated system of care and provides a comprehensive continuum of services for Adults and Older Adults. Individuals referred to AOT will receive a comprehensive assessment which will include the ASAM when the individual presents with a substance use issue. If the individual qualifies for AOT, the individual will be referred and warmly linked to AOT treatment services. Similar to other counties who have adopted AOT, Assertive Community Treatment (ACT) and Forensic Assertive Community Treatment (FACT) are the treatment services that serve individuals who qualify for AOT. ACT and FACT have the capacity to provide co-occurring (both mental health and substance use) treatment services. BHSD aims to offer co-occurring disorder capacity in all programs. FACT is staffed with an addiction specialist on the team. The AOT treatment provider will also assess for additional service needs, including assist with a seamless transition to higher or lower levels of care to other community resources as necessary, and to the individual's natural support systems within their community.

cc: Miguel Marquez, Chief Operating Officer
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