

County of Santa Clara

Office of the County Executive

County Government Center, East Wing
70 West Hedding Street
San Jose, California 95110
(408) 299-5105



DATE: April 25, 2023

TO: Honorable Board of Supervisors
Jeffrey V. Smith, County Executive

FROM: Dr. Eureka Daye, Director of Custody Health and Behavioral Health Services

SUBJECT: Discharge Clerk Program – Numbers/Types of Releases and Medications Provided Upon Release

At the Reentry Network meeting on February 8, 2023 (Item No. 4), Supervisor Chavez requested an off-agenda report to include a year's worth of data on the number of releases by category (unplanned, planned, and planned release to treatment) and number/percentage of individuals that are receiving medications when they leave.

Discharge Clerk Program

In order to meet certain components of the Federal Consent Decree Remedial Plan, and to better serve patients regarding access to prescribed medications upon discharge, medical information, and their continuum of health care, Adult Custody Health Services (ACHS) developed the Discharge Clerk program at both Main Jail and Elmwood. The Discharge Clerk program enables ACHS staff to interact with patients as they are being discharged to ensure they have the necessary medical information and medication prescriptions needed to continue their care in the community.

The Discharge Clerk program works in concert with the Sheriff's Office Custody Bureau where Medical Unit Clerks (MUC) work directly with Custody Bureau release deputies. Upon notification of a patient's discharge, including planned and unplanned releases, the MUC will have ready a resource packet of information (e.g., housing, food, pharmacy locations/hours, Re-Entry Center location, etc.), an After Visit Summary (medical information from CHS including myHealth Online,

medications, medical history, appointments, and listed prescription(s), etc.), and, if needed, a bus token for transportation purposes to give to the individual.

The Discharge Clerk program had a soft launch in late June 2022, to test the program's workflow and make necessary adjustments as CHS is filling up the six assigned MUC positions for the program.

Currently, the program at Elmwood is up and running 24/7 from Monday through Friday with MUCs getting face to face time with patients as they are being discharged. For weekends, MUCs are assembling the resource packets and After Visit Summaries including listed prescriptions, sealing them for confidentiality, and including them with the patient's property. For transportation needs, the Sheriff's Office Custody Bureau has bus tokens that can be made available. For Main Jail, the program finalized in late 2022 the logistical components regarding location and patient interaction due to the higher level of security and more limited space. The program is up and running with some coverage gaps due to staffing where MUCs are working with Sheriff's Office Custody Bureau release deputies to ensure patients are receiving their resource packets, After Visit Summaries including listed prescriptions, and, if needed, bus tokens upon discharge.

Although the Discharge Clerk program is not fully staffed or fully operationalized, ACHS leadership and Discharge Clerk program staff are continuing to make progress in developing the program as it builds to full capacity.

Chavez Consent Decree Remedial Plan

The Discharge Clerk program was developed in part to satisfy certain components of the Federal Consent Decree Remedial Plan. Under the Chavez Consent Decree, there are two items, Chavez #54 and Chavez #55, that the Discharge Clerk Program is satisfying to date.

Under Chavez #54, ACHS is required to provide patients with a prescription for a 30-day supply of essential medications, unless a shorter time is clinically indicated, and information on where to obtain the medication if the patients were in custody for more than seven days, were seen by an ACHS provider, and had a current prescription from the provider for an essential medication at the time of discharge. This data is currently captured by ACHS from the electronic medical health record system, HealthLink. This data is validated and audited by the ACHS Quality Improvement (QI) team and shared with the Federal Consent Decree Monitors. More information on the collected data is included in the following sections.

Under Chavez #55, for any patients that, at the time of discharge, had an existing medical and/or mental health condition that was being treated by ACHS while in custody, ACHS is to provide the patient with their medical/mental health information including upcoming medical appointments, lab tests, and the patient's current diagnosis unless deemed by ACHS mental health staff to be detrimental to the patient as long as ACHS is provided with sufficient advance notice of at least 72 hours before the patient's release. This information is currently being documented and tracked manually by the Discharge Clerk program in various methods and timeframes due to the different start times of the program for Elmwood and for Main Jail. Additionally, the Discharge Clerk program and other ACHS colleagues are currently working with the County's HealthLink team to develop and build a reporting structure in HealthLink.

Discharge Clerk Program – Release Data

As provided in previous reports to the Reentry Network, ACHS had categorized three types of releases from custody: planned release, planned release to a treatment program, and unplanned release. Planned releases include those individuals with set dates from which they will be discharged from custody (e.g., carrying out a court-ordered sentence) and will not be going to a court-ordered treatment program. A planned release to a treatment program includes those individuals that are discharged from custody via a court-ordered release and sent to a community-based treatment program as part of their sentence. And, lastly, an unplanned release includes those releases that occur due to external circumstances that are unknown to the Sheriff's Office Custody Bureau staff or ACHS until hours before it happens. These typically entail instances where a case has been dropped or settled, a lesser sentence was issued, or the patient posted bail among other instances.

Prior to the Discharge Clerk Program, ACHS utilized the 72 hours' notice requirement under the Chavez Consent Decree Remedial Plan #54 to distinguish unplanned releases from planned releases. Since the Discharge Clerk program was created to meet the requirements of Chavez #54 and Chavez #55, data tracking has gradually begun with the program's soft launch in June.

Per Supervisor Chavez's request for number of planned releases, unplanned releases and planned releases to treatment programs, since the Discharge Clerk program has been developed with the goal of providing information to all released patients, ACHS is currently not tracking the number of planned releases and unplanned releases. However, ACHS is tracking the number of planned releases to treatment programs as well as other relevant data to the program including total number of resource packets and After Visit Summary (AVS) (medical information for the client

that includes appointments, labs, medication orders, etc.) provided as well as the number of individuals who did not receive an AVS or a resource packet/AVS due to staff coverage or staff not receiving notification of the release. As the program continues to build, the current manual collection of data (i.e., data entry by staff in real time) by Discharge Clerk program staff is currently being reviewed with the County's HealthLink (electronic health record) team to build and develop data captures and reporting mechanisms for ACHS staff in HealthLink.

Elmwood

Since the program's soft launch in June when operations and programmatic functions were still being finalized, ACHS began tracking data with the initial staffers for Elmwood in September. For the months of September of 2022 through February of 2023, staff were able to manually capture and provide the below data. For Elmwood, the noticeable trend of high numbers of missed releases in September and October were due to coverage for only one of the three shifts for the 24 hours/5-day program. As an additional shift was staffed, the number of missed releases noticeably declined in November and December. The numbers of missed releases began to increase in January and February due to one of the staffers being out on leave and, eventually, the position becoming vacant.

Custody Health Services Discharge Clerk Program - Elmwood				
2022	September	October	November	December
Resource Packets Given	732	953	813	875
After Visit Summaries Given	720	940	810	875
After Visit Summaries not given	12	13	3	0
Client Refusal of Packets	3	1	1	0
Transportation Tokens Provided	186	193	132	64
Missed Releases (staffing or notification)	426	173	79	20

Custody Health Services Discharge Clerk Program - Elmwood		
2023	January	February
Resource Packets Given	980	1,006
After Visit Summaries Given	980	1,003
After Visit Summaries not given	0	3
Client Refusal of Packets	0	1
Transportation Tokens Provided	79	170
Missed Releases (staffing or notification)	170	161

Main Jail

For Main Jail, since the number of released individuals is lower than released individuals at Elmwood, staffing positions at Main Jail were filled later than Elmwood in order to provide greater impact on patient contacts. And although the Main Jail program is not fully staffed, program staff began tracking in December. Regarding missed releases, similar to Elmwood, the trend is due to the first staffed position starting and manually capturing data in December with another staffer coming on board to assist in mid-February. It should be noted that, at the time of this reporting, the program is still not fully staffed, nor does it have back-up coverage for shifts when staff are out. ACHS will utilize the tracking data over the next few months to evaluate appropriate staffing levels necessary for the Discharge Program's success.

Custody Health Services Discharge Clerk Program - Main Jail			
2022	December 2022	January 2023	February 2023
Resource Packets Given	33	37	21
After Visit Summaries Given	32	34	18
After Visit Summaries not given	2	3	3
Client Refusal of Packets	0	0	0
Transportation Tokens Provided	6	10	9
Missed Releases (staffing or notification)	138	109	78

Lastly, in an effort to capture a sampling of the data to demonstrate how many individuals are receiving medications based upon the efforts of the Discharge Clerk program, program staff manually reviewed every release during the month of February to capture the following data. Of the 1,006 releases, a total of 184 individuals were released that required Discharge Medical Unit Clerks (MUC), upon review of a patient's medical record, to request the completion of a medication order from a physician or a provider. Of the 184 medication order requests, 100 were for patients with a planned release to a treatment program, 79 were for patients with a planned release (no treatment program), and 5 were for patients with an unplanned release (less than 72 hours' notice).

Discharge Clerk Program – Planned Release to Treatment Program

For individuals with planned releases to treatment programs, ACHS staff work with the treatment program staff in assisting the patient's transition into the program. For most instances, in addition to the client receiving their resource packet and After Visit Summary, the treatment program also receives the client's After Visit Summary and the program assists the patients with obtaining their

ordered medications. For both Elmwood and Main Jail, here are the numbers from September of 2022 through February of 2023:

Custody Health Services Planned Release to Treatment Program				
2022	September	October	November	December
Number of Individuals Sent to Treatment Program	115	124	142	123
Number of After Visit Summaries Provided	115	124	142	123

Custody Health Services Planned Release to Treatment Program		
2023	January	February
Number of Individuals Sent to Treatment Program	165	149
Number of After Visit Summaries Provided	165	149

Adult Custody Health Services – Essential Discharge Medication

In order to track compliance with the Chavez Consent Decree Remedial Plan #54, the ACHS Quality Improvement (QI) team developed a data collection and reporting structure in its electronic health record system, HealthLink, that enables the QI team to extract data and conduct monitoring reports and audits to ensure patients are receiving the essential medications needed based upon established criteria (e.g., in custody for more than seven days, seen by an ACHS provider, and has a prescription with the ACHS provider for an essential medication).

To provide a snapshot of how many patients are discharged from custody that meet the criteria of Chavez #54, the QI team pulled the following data for the months of September of 2022 through February of 2023 with September as a starting point to coincide with when the Discharge Clerk program was a few months into its soft launch and starting to capture data.

Month	# of Patients Discharged Meeting Inclusion Criteria
September 2022	222
October 2022	252
November 2022	291
December 2022	267
January 2023	236
February 2023	290
TOTAL	1,558

For reporting purposes, the data is further examined through medications prescribed for medical conditions and medications prescribed for mental health conditions to provide information to the Medical Monitors and Mental Health Monitors respectively. It should be noted that there will be an overcount of totals due to some individuals receiving medications for both medical and mental health conditions.

The following table shows a breakdown of how many patients who meet the medication criteria under Chavez #54 are on essential medications for **medical conditions**:

Month	# of Patients Discharged Meeting Inclusion Criteria	# of Patients Discharged on Essential Medical Medications	% Essential Medical vs Total Patients Meeting Inclusion Criteria
September 2022	222	107	48%
October 2022	252	120	48%
November 2022	291	136	47%
December 2022	267	109	41%
January 2023	236	92	39%
February 2023	290	130	45%
TOTAL	1,558	694	45%

The following table shows a breakdown of how many patients who meet the medication criteria under Chavez #54 are on psychotropic medications for **mental health conditions**:

Month	# of Patients Discharged Meeting Inclusion Criteria	# of Patients Discharged on Essential Medical Medications	% Essential Medical vs Total Patients Meeting Inclusion Criteria
September 2022	222	182	82%
October 2022	252	195	77%
November 2022	291	231	79%
December 2022	267	223	84%
January 2023	236	191	81%
February 2023	290	244	84%
TOTAL	1,558	1,266	81%

For further breakdown, the QI team examines how many patients who meet the Chavez #54 criteria are receiving their medication orders upon release. The QI team at CHS collected data from the Santa Clara Valley Medical Center Pharmacy Department pertaining to prescriptions obtained by patients of CHS at the Enborg Lane Pharmacy. The data revealed that a total of 5,209 prescription medications were picked up from the pharmacy during the period from January 3rd, 2022, to March 3rd, 2023. It is important to note that the data reflects prescription-specific counts rather than unique patients, which means that multiple prescriptions may have been obtained by the same patient.

Of the total number of patients meeting the inclusion criteria of Chavez #54, the following table shows how many of those on medications for **medical conditions** receive a medication order upon release.

Month	# of Patients Meeting Criteria Discharged on Essential Medical Medications	# of Those Patients Receiving at Least One Medical Prescription Upon Discharge	% Receiving at Least One Prescription Upon Discharge
September 2022	107	84	79%
October 2022	120	78	65%
November 2022	136	86	63%
December 2022	109	78	72%
January 2023	92	61	66%
February 2023	130	94	72%
TOTAL	694	481	69%

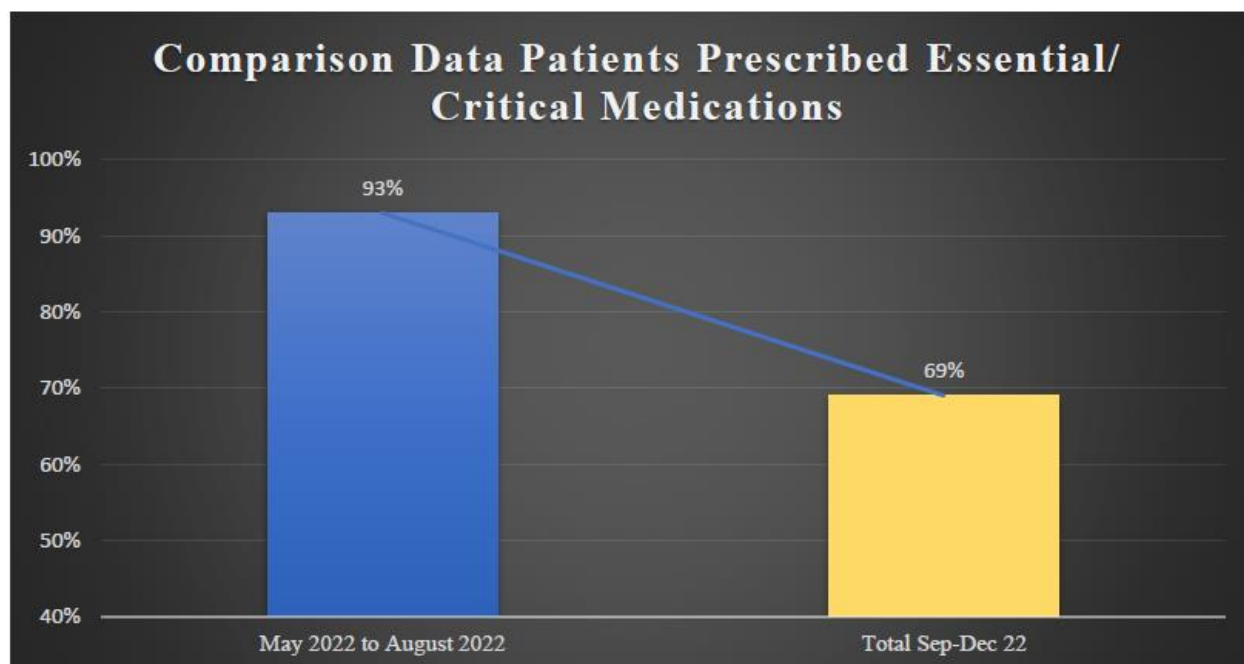
Of the total number of patients meeting the inclusion criteria of Chavez #54, the following table shows how many of those on medications for **mental health conditions** receive a medication order upon release.

Month	# of Patients Discharged on Essential Medical Medications	# of Those Patients Receiving at Least One Psychotropic Prescription Upon Discharge	% Receiving at Least One Prescription Upon Discharge
September 2022	182	153	84%
October 2022	195	156	80%
November 2022	231	184	80%
December 2022	223	183	82%
January 2023	191	141	74%

February 2023	244	203	83%
TOTAL	1,266	1,020	81%

The percentage discrepancy between the medications ordered for medical conditions versus medications ordered for mental health conditions pertains to a potential contributing factor involving the urgent care physician contract ending with the hospitals that ACHS benefited. As part of the overall contract, ACHS had urgent care physicians that provided a substantial number of discharge medication reconciliation and medication ordering that the current physician corps is trying to maintain.

For example, a comparison conducted by the QI team between May to August of 2022 and September to December of 2022 showed a 24% decline in the latter months as shown below.



In order to remedy the situation, ACHS has hired an additional physician to assist and enhance existing staffing for greater patient access to care. Additionally, with regard to contract services for urgent care providers, ACHS conducted market research regarding potential contracts for providing urgent care services. CHS discovered an existing vendor/contractor that had the medical experience in carceral settings to meet the scope of work needed for patient care for both adult facilities as well as telehealth for Juvenile Hall. After continuous meetings including a site visit

to both adult facilities and Juvenile Hall, the contract is now in the Negotiations Phase of the process.

cc: Chief Board Aides
Greta S. Hansen, Chief Operating Officer
James R. Williams, County Counsel
Tiffany Lennear, Clerk of the Board of Supervisors
Mary Ann Barrous, Agenda Review Administrator
Jason McCluskey, Budget and Public Policy Analyst
Shawn Whiteman, Program Manager II