



Adult Outpatient Services Transformation Overview

Division of Behavioral Health

January 25, 2022

Kelli Weaver, LCSW Division Manager

Michael Amenityro, Program Planner

Agenda



Welcome, Housekeeping & Community Agreements



Background Review



Transformed, Recovery-Centered Model: CORE



Next Steps & Closing



Housekeeping

1/25/2022

- This presentation will be in listen-only mode and will be recorded.
 - Questions can be submitted via chat anytime throughout this presentation.
 - A Questions and Answers document will be compiled and posted on the Adult Outpatient Services Transformation webpage.
-

Community Comfort Agreements

1/25/2022

-
- 1. Please use respectful language.** This means no personal attacks, swearing, or criticism of self or others.
 - 2. Try to maintain proactive future focus.**
 - 3. We aim to speak without offending, and listen without defending.**
 - 4. If participants consistently disregard these agreements, they may be asked to leave.**

Background Review

1/25/2022

The *Adult Outpatient Transformation* is an opportunity to integrate community stakeholder input to refine our outpatient system to more effectively serve our community and to enhance the overall adult outpatient mental health services delivery system.



Background Review

1/25/2022

- **August 6 & 15, 2019: MHSA Update Presentation**

Provided next steps for making MHSA funds available for services in the community through strategies for planning and stakeholder input, including bringing services in line with community needs and available resources through the Adult Outpatient Services Redesign ([slide deck](#)/[MHSA minutes](#)).

- **January 21, 2021: Behavioral Health System and Stakeholder Participation Presentation**

Provided an overview to the MHSA Steering Committee outlining BHS' plan to implement a regular procurement schedule for contracted programs, utilizing stakeholder input to ensure programming is effective, respectful and responsive ([slide deck](#)/[MHSA minutes](#)).

- **April 15 & May 25, 2021: Committee Report Back Presentation**

Provided an overview of community planning sessions and key areas of insight for the transformation, and introduced the new Community Outreach Recovery Empowerment (CORE) Program ([slide deck](#)/[MHSA minutes](#)).



Community Planning/Stakeholder Input Sessions Review

1/25/2022

Behavioral Health Town Hall sessions

held over 3 dates in
July, August 2019, and
February 2020

Smaller cultural- specific community conversations

held over several
dates from December
2019 through
February 2020

Adult Outpatient Services Focus Groups

held over several
dates from September
through November
2019

Behavioral Health Racial Equity Collaborative focus groups and key information interviews

held in January 2021

Adult Outpatient Online Survey

open from March 5th
through March 19th,
2021


Feedback-Driven Goals Review

1/25/2022

Key Areas from Stakeholder Input

- Timely and Improved Access
- Culturally Responsive Services and Trauma Informed Delivery System
- Increase Peer Supports to Bridge Gaps
- Increase Family Involvement
- Data Informed Decisions
- Smaller/More Manageable Case Loads Sizes with Less Turn-Over
- No Fail Approach
- Transportation
- Walk in Capacity
- Telemedicine
- Warm Hand Off ~ Improve Care Coordination
- Diverse Workforce that Reflect the Community Served
- Improve Access through Community Hubs with Collocated Services
- Increase Opportunities for Job Training/Coaching and Integrating Employment as a Recover Goal
- Medication Support
- Inclusive Environment and Support for Consumers and Family Members

Timeline Review

- 
- 2019 to 2021: Gathered Stakeholder Input
 - March 5, 2021: Announcement of Upcoming Competitive Selection Opportunity on DHS Website & Media Release
 - April 15, 2021: MHSA Steering Committee Presentation
 - May 27, 2021: Letter of Interest (LOI) No. MHSA/070 Released
 - August 25, 2021: Request For Applications (RFA) No. MHSA/071 Released
 - December 15, 2021: Announcement of 3 Recommended Awards & 2nd Round LOI No. MHSA/073 Released
 - ★ • Jan/Feb 2022: Tentative 2nd Round RFA to be issued, seeking 2 organizations to operate 2 CORE sites each
 - Summer/Fall 2022: Tentative Transition Period
 - Fiscal Year 2023/24: Transformation Fully Implemented



Transformed, Recovery-Centered Model: CORE

Recovery Stepping Stones

Journey To Wellness And Optimal Health

1/25/2022



CORE

Community: Increase community engagement and connections, belonging and supportive

Outreach: Inclusive, Inviting, welcoming, educational and inspirational

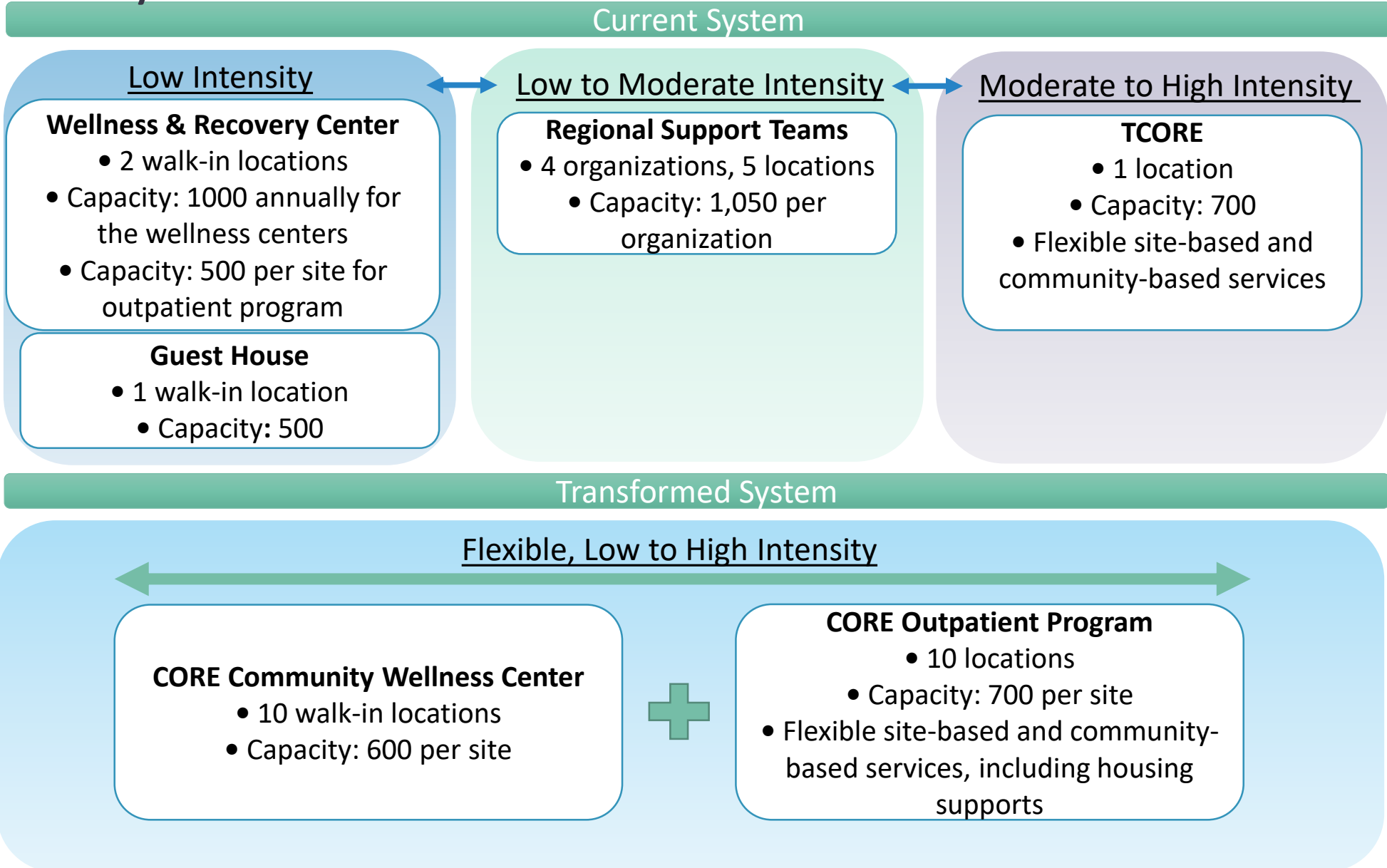
Recovery: Intentional progression towards optimal health and wellbeing

Empowerment: Client and family driven goals and outcomes, independent, confident, courageous and resourceful

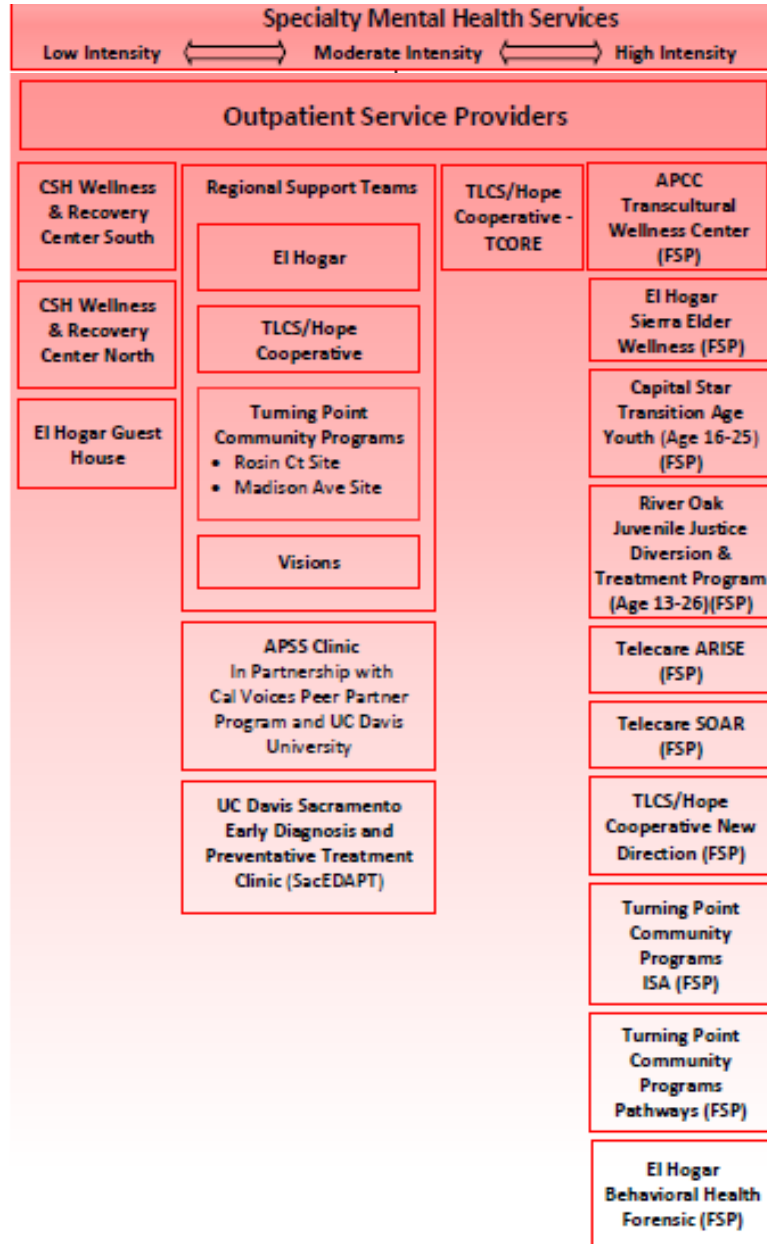
Adult Outpatient System of Care Continuum

1/25/2022

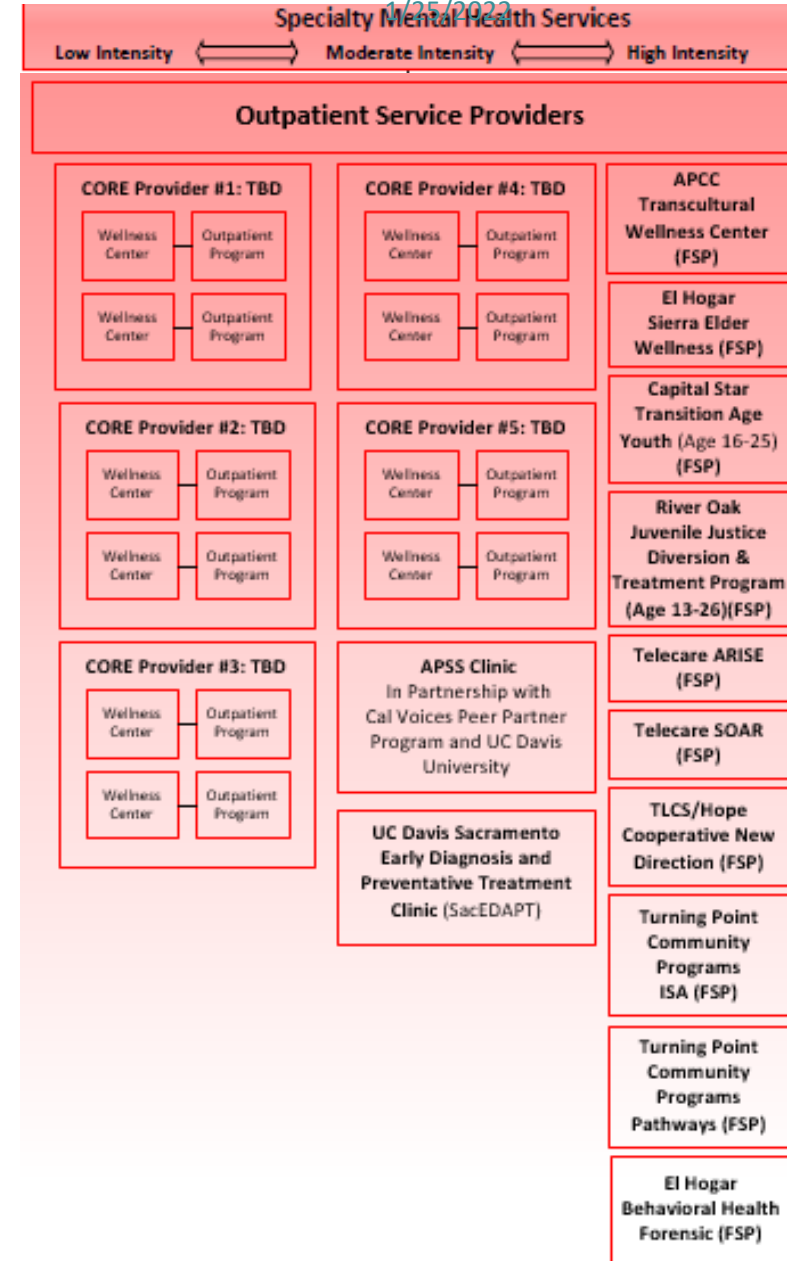
The CORE Program increases walk-in access points from 3 to 10 sites, increases wellness center capacity from 1,000 to 6,000 annually, and increases outpatient capacity from 6,400 to 7,000 at any given time.



Current Outpatient Continuum



Future Outpatient Continuum



Transformed, Recovery-Centered Model

1/25/2022

The CORE program services will support and promote the recovery of all clients. Recovery as defined by Substance Abuse Mental Health Services Administration (SAMHSA) is a process of change through which clients improve their health and wellness, live a self-directed life, and strive to reach their full potential by way of the four major dimensions that support a life in recovery:

Health – overcoming or managing one’s symptoms and making informed, healthy choices that support physical and emotional well-being.

Housing – having a stable and safe place to live.

Purpose – engaging in meaningful daily activities, such as a job, school, volunteerism, family caretaking, or creative endeavors, and the independence, income and resources to participate in society.

Community – having relationships and social networks that provide support, friendship, love, interconnectedness, and hope.

CORE Service Delivery Approaches

1/25/2022

1. Trauma informed care, based on the Center of Health Care Strategies' core principles and key ingredients of trauma-informed approach described in Key Ingredients for Trauma-Informed Care
2. Culturally and linguistically responsive and recovery-oriented care.
3. The "Strengths Model," a recovery-oriented practice model that will guide outpatient program practices and service delivery, exemplified in the Strengths Model Fidelity Scale [Evidenced-Based
4. Provide focused, time-limited, individual and/or group mental health services using best practices, community defined practices, evidence based practices, curriculum based practices and/or promising practices to all clients.
5. The "SSI/SSDI Outreach, Access, and Recovery (SOAR)" program model increases access to Social Security disability benefits for people experiencing or at risk of homelessness
6. Peer Support Services, a system of giving and receiving help based on key principles that include shared responsibility, and mutual agreement of what is helpful, described in Core Competencies for Peer Workers in Behavioral Health
7. Flexible, community/field-based specialty mental health service level of intensity and phase of treatment that matches the needs of the client.



CORE Service Requirements

1/25/2022

- Assessment
- Intensive Case Management
- Collateral services
- Crisis Intervention
- Medication Support
- Plan Development
- Rehabilitation
- Therapy



CORE Eligibility

1/25/2022

- **CORE Outpatient Program:**
 - Eligible adults, as defined by the Sacramento County BHS Policy and Procedure [QM-01-07](#) Determination for Medical Necessity and Target Population
- **CORE Community Wellness Center**
 - All Sacramento County adult community members, age 18 years or older, seeking meaningful activities offered by the Center



Network Adequacy

1/25/2022

Medi-Cal Network capacity standards require counties demonstrate

- Timely access to care
- Reasonable time and distance from provider sites to beneficiary residences
- Adequate number of outpatient psychiatrist and clinical providers for Medi-Cal beneficiaries.

To do this, BHS completed a *geomap* analysis of where individuals are receiving services. From this process:

- CORE Program sites shall be geographically distributed throughout Sacramento County.
- Assures services are delivered in the areas of greatest need, in the most efficient and effective manner, while meeting network adequacy requirements.

Timely access is defined in the Sacramento County BHS Policy and Procedure [QM-20-04](#)



CORE Recommended Program Staffing

1/25/2022

In addition to standard Medi-Cal requirements for staffing, CORE Program staffing will be:

- Reflective of the cultural, racial, ethnic, linguistic, sexual, and gender diversity of Sacramento County.
- An array that includes a combination of education and experience, ranging from persons with lived experience, to licenses team members
- Specialized, relevant to program implementation and practices, such as those specialized in housing supports, benefit acquisition, and employment resources.

Subcontracting services with grassroots and community-based organizations is strongly encouraged for their expertise in providing services, knowledge and familiarity in working with Sacramento County's diverse ethnic and cultural neighborhoods and communities



CORE Program Objectives

- Increase timely access to services
- Reduce unnecessary hospitalizations and incarcerations
- Promote housing stability
- Improve positive behaviors and quality of life
- Increase ongoing meaningful activity
- Decrease overall behaviors that contribute to law enforcement and judicial contacts, crisis residential treatment, mental health rehabilitation center treatment, and state hospitalization

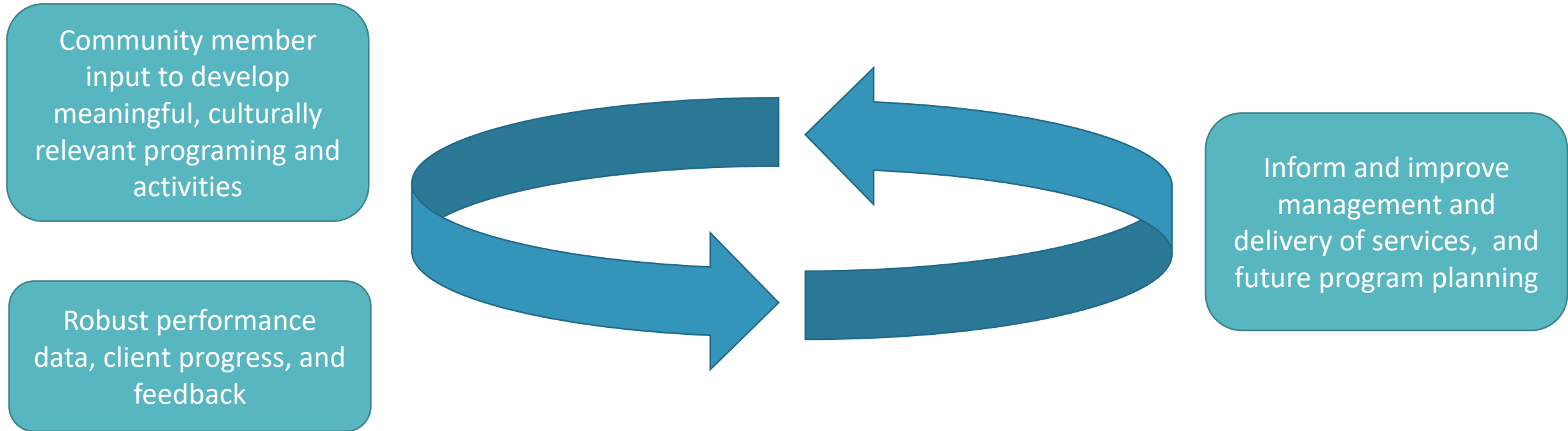


CORE Program Objectives (cont'd)

- Improve care coordination with primary care physician (PCP)
- Improve care coordination with other system partners
- Increase successful discharges defined as meeting treatment goals
- Increase successful linkage to primary care or geographic managed care provider if ongoing services are needed
- Increase effectiveness of evidence based practices, community defined practices, and promising practices
- Other outcomes as defined by Sacramento County BHS



CORE On-going Stakeholder Input



Embedded into the CORE Program are on-going opportunities to solicit feedback from clients, family members and community members. CORE expectations are that all providers will implement strategies to ensure ongoing consumer/family member input on program effectiveness and satisfaction. This will ensure all providers are accountable for delivering quality services that meet the needs of clients served.



Next Steps

Competitive Selection Reminder

1/25/2022

Interested organizations can subscribe to receive notifications of new opportunities at the website:

<http://www.dhs.saccounty.net/Pages/Contractor-Bidding-Opportunities.aspx>

and clicking:

[To sign up for email updates for this page.](#)

The screenshot shows the Department of Health Services website. The header includes the site name, a search bar, and navigation menus for Health Services, Health Services Divisions, Resources, and Need Help?. The breadcrumb trail indicates the current page is 'Contractor Bidding Opportunities'. The main content area is titled 'Contractor Bidding Opportunities' and contains an introductory paragraph and a numbered list of document types: Request for Proposal (RFP), Request for Application (RFA), Letter of Intent (LOI), and Letter of Interest. Below this is a section for 'Contractor Bidding Documents' with a sub-section for 'Time-Limited Announcements'. One announcement is listed: 'Adult Outpatient Services Transformation: CORE Program LOI No. MHS/073'. A link at the bottom of the page allows users to sign up for email updates.

Department of Health Services

Search this site

HEALTH SERVICES ▾ HEALTH SERVICES DIVISIONS ▾ RESOURCES ▾ NEED HELP? ▾

Department of Health Services > Contractor Bidding Opportunities

Contractor Bidding Opportunities

There are several ways one can work with the county. On this page you will find links to the latest Request for Proposal (RFP), Request for Application (RFA), and Letter of Interest (LOI) documentation. Prospective bidders are encouraged to read through the available documents and bid on the one that sounds like the best fit.

- 1. Request for Proposal (RFP)**
These are documents that describe a service the County needs, and invite prospective bidders to submit their proposals.
- 2. Request for Application (RFA)**
These are documents that describe a research topic, and invite prospective bidders to submit their grant applications.
- 3. Letter of Intent (LOI)**
These are documents that outline an agreement between the County and a prospective bidder before the agreement is final.
- 4. Letter of Interest**
These are documents that state you are interested in the opening being advertised and explain how you meet the minimum qualifications.

Contractor Bidding Documents

Time-Limited Announcements

[Adult Outpatient Services Transformation: CORE Program LOI No. MHS/073](#)

Mental Health On-Going Announcements

[Open Enrollment-Mental Health Provider Minimum Qualifications for Deaf and Hard of Hearing Community Counseling Services](#)

[Open Enrollment-Mental Health Provider Minimum Qualifications for Adult Residential Treatment Program](#)

[Open Enrollment-Mental Health Provider Minimum Qualifications for Augmented Board and Care Services](#)

› [To sign up for e-mail updates for this page, select here.](#)

Transition Planning

- Develop a program transition plan
 - Evaluate current sites, and determine potential new sites
 - Staffing and training
- Develop a client transition and communication plan
 - Ensure clients and family members have an orientation on the new model
 - Ensure and document that clients are aware of changes that may impact them directly or indirectly
 - Document the plan agreed upon by the client
 - Provider input sessions with clients, family and community for building and designing Community Wellness Centers
 - Providers meet regularly to coordinate transition
 - Warm hand-offs between programs, clients are not discharged without a scheduled first appointment with the new provider
- Transition plans may vary from provider to provider, and therefore the full implementation of CORE is not anticipated until Fiscal Year 2023-24.



Questions?



Please enter your questions into the chat box.

BHS will compile questions and post written responses to the Adult Outpatient Services overview webpage no later than mid-February.

Resources

1/25/2022

Adult Outpatient Services Transformation website

<https://dhs.saccounty.gov/BHS/Pages/Adult-Outpatient-Services-Transformation.aspx>

Adult Outpatient Mental Health System, Focus Group Feedback Sessions Report

<https://dhs.saccounty.net/BHS/Documents/Reports--Workplans/RT-BHS-2019-Adult-Outpatient-Mental-Health-System-Focus-Groups-Analysis.pdf>

Adult Outpatient Report Back on Community/Stakeholder Input

<https://dhs.saccounty.net/BHS/Documents/Advisory-Boards-Committees/Mental-Health-Services-Act-Committee/MHSA-SC-2021/MA-MHSA-SC-2021-04-15--Att-B-Report-Back-on-Community-Stakeholder-Input-for-Adult-Outpatient-Svcs-Transformation.pdf>

Behavioral Health Town Hall Report

<https://dhs.saccounty.net/BHS/Documents/Reports--Workplans/RT-BHS-2019-Behavioral-Health-Town-Hall-Summary-Report.pdf>

MHSA Steering Committee website

<https://dhs.saccounty.net/BHS/Pages/Advisory-Boards-Committees/Mental-Health-Services-Act-Committee/BC-MHSA-Steering-Committee.aspx>

MHSA Fiscal Year 2021-22, 2022-23, 2023-24 Three-Year Program and Expenditure Plan

<https://dhs.saccounty.net/BHS/Documents/Reports--Workplans/MHSA-Reports-and-Workplans/RT-2021-22--2022-23--2023-24-MHSA-Three-Year-Plan.pdf>