

County of Santa Clara

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Maria Marinos
Clerk of the Board

FILED

SEP 12 2011

DAVID H. YAMASAKI
Chief Executive Officer/Clerk,
Superior Court of CA County of Santa Clara
BY D. ALDYCKI

August 17, 2011

The Honorable Richard J. Loftus, Jr.
Presiding Judge
Santa Clara County Superior Court
191 North First Street
San Jose, CA 95113

RE: Grand Jury Report: Mental Health Support at Youth Ranches

Dear Judge Loftus:

At the August 9, 2011 meeting of the County of Santa Clara Board of Supervisors (Item No. 19), the Board adopted the response from the County Administration to the Final Grand Jury Report and recommendations relating to Mental Health Support at Youth Ranches.

As directed by the Board of Supervisors and on behalf of the Board President, our office is forwarding to you the enclosed certified copy of the response to the Final Grand Jury Report with the cover memorandum from Mr. Graves. This response constitutes the response of the Board of Supervisors, consistent with provisions of California Penal Section 933(c).

If there are any questions concerning this issue, please contact our office at 299-5001 or by email at maria.marinos@cob.sccgov.org.

Very truly yours,

A handwritten signature in black ink that reads "Maria Marinos".

MARIA MARINOS
Clerk, Board of Supervisors
County of Santa Clara

Enclosures

MM/mm

County of Santa Clara Office of the County Executive



CE11 080911

DATE: August 9, 2011

TO: Board of Supervisors

FROM:

Handwritten signature of Gary A. Graves in black ink.

Gary A. Graves
Chief Operating Officer

SUBJECT: Response to Santa Clara County Civil Grand Jury Report: Mental Health Support at Youth Ranches.

RECOMMENDED ACTION

Consider recommendations relating to Final Grand Jury Report relating to Mental Health Support at Youth Ranches.

Possible action:

- a. Adopt response from Administration to Final Grand Jury Report relating to Mental Health Support at Youth Ranches.

AND

- b. Authorize the Board President and Clerk of the Board of Supervisors to forward department response to Grand Jury report to the Presiding Judge of the Superior Court

with approval that responses constitute the response of the Board of Supervisors, consistent with provisions of California Penal Code Section 933 (c).

OR

- c. Adopt a separate or amended response to the Final Grand Jury Report relating to Mental Health Support at Youth Ranches, and authorize the Board President and Clerk of the Board to forward response to the Presiding Judge of the Superior Court.

FISCAL IMPLICATIONS

There are no fiscal implications associated with these Board actions.

REASONS FOR RECOMMENDATION

Attached is the joint response from the Chief Probation Officer and Director of the Mental Health Department to the Grand Jury's findings and recommendations enumerated in the Final Report, Mental Health Support at Youth Ranches. The response has been completed pursuant to the California Penal Code, Section 933(c) and 933.05(a).

Child Impact Statement

Positive Impact

This action will have a positive impact on children and youth. As the Probation Department and the Mental Health Department jointly make the implementation of all the Grand Jury recommendations the services provided will become adequate at the Ranches.

BACKGROUND

The Civil Grand Jury toured the two ranch facilities – Muriel Wright Residential Center and William F. James Boys Ranch, to determine if the psychiatric support provided at the ranch facilities was adequate. The Grand Jury conducted a number of interviews and document reviews and concluded that the County Mental Health Department is providing a suitable level of support to the ranches. The Grand Jury found, however, that the various mental health providers did not have a coordinated approach to contracting with community-based

organizations; a shared, centralized approach to recordkeeping does not exist and this limits communication among individual professionals; and metrics are not being used to monitor or measure the services being provided.

The Grand Jury's report makes three specific findings; The Mental Health Department and the Probation Department agree with the three findings and are jointly working to implement all the recommendations in the near future, except to the recommendation 2 that will require further analysis.

CONSEQUENCES OF NEGATIVE ACTION

The County would not be in compliance with the law in responding to the Grand Jury's Final Report.

STEPS FOLLOWING APPROVAL

Following approval of the response provided by the Probation Department and Mental Health Department, forward all comments of the Santa Clara County Board of Supervisors to the Honorable Richard J. Loftus, Jr., Presiding Judge, Santa Clara County Superior Court on or before Tuesday, August 30, 2011.

ATTACHMENTS

- Santa Clara County Civil Grand Jury Report
- Mental Health and Probation Response

County of Santa Clara

Probation Department & SCVHHS Mental Health Department

Juvenile Division
840 Guadalupe Parkway
San Jose, California 95110

Mental Health Division
828 S. Bascom Avenue
San Jose, California 95128



Sheila E. Mitchell
Chief Probation Officer

Nancy Pena
Director Mental Health Services

July 20, 2011

TO: Gary A. Graves
Chief Operating Officer

FROM: Sheila E. Mitchell
Chief Probation Officer

Handwritten signature of Sheila E. Mitchell in black ink.

Nancy Pena
Director

Handwritten signature of Nancy Pena, Ph.D. in black ink.

SUBJECT: Response to Santa Clara County Civil Grand Jury Report – **Mental Health Support at Youth Ranches**

This letter responds to the Civil Grand Jury's Final Report, dated May 27, 2011 regarding the Mental Health Services provided at the youth ranches.

FINDING 1:

Various mental health providers demonstrate a lack of coordination and communication, which compromises the effective delivery of those services.

Response: The respondent agrees with the finding.

RECOMMENDATION 1a:

Santa Clara Valley Health and Hospital System (SCVHHS) should continue to move toward ensuring that all therapists, whether employed by CMH or a CBO, are certified to provide counseling for "co-occurring disorders." Furthermore, SCVHHS should pursue efforts to dismantle bureaucratic and contractual barriers to providing single-point (one counselor to one client) counseling.

Response: The recommendation has not yet been implemented, but will be implemented in the near future.

The data is clear that a large proportion of youth have both a mental health disorder and a substance abuse disorder (SUD) and outcomes are substantially better, when both are

addressed concurrently. We do believe that mental health therapists, current substance abuse providers as well as our own staff have the capacity to be trained in addressing co-occurring disorders. As such, we are strongly in agreement for more training. However, we believe that certification is not the most immediate way to address this concern. Certification for substance abuse providers can take years of training and thousands of internship hours. The California Association of Alcohol and Drug Abuse Counselors (CAADAC) requires 4000 hours of experience before certification.

We believe the recent grant acquired by the Probation Department will provide the sufficient training and knowledge required to serve the needs of the ranch population. The Probation Department has received a grant to train its ranch staff and system partners in The Seven Challenges program. The Seven Challenges is a SAMHSA registered evidenced based model for use with adolescents struggling with substance use disorders. This counseling program is specifically designed for adolescents to simultaneously address drug problems as well as their co-occurring psychological problems and life skill deficits. The Seven Challenges incorporates familiar best practices such as Motivational Interviewing and Stages of Change.

The agencies who will receive this training include the Department of Alcohol and Drug Services, Pathways, our CBO therapists at the ranches from Community Solutions and Starlight as well as a number of our other CBO providers, in addition to our ranch staff. The training is scheduled for early fall and implementation will follow immediately thereafter.

RECOMMENDATION 1b:

Probation, CMH, and DADS should designate one person to be responsible for coordinating mental health treatment for each client.

Response: The recommendation has not yet been implemented, but is targeted to be implemented within the next 90 days.

The Probation Department will take the lead to facilitate and coordinate entrance multi-disciplinary team meetings where each case is individually reviewed and a plan for treatment created for the period during rehabilitation, while the CMH and their subcontractors in conjunction with DADS will coordinate treatment services for each client. This multi-system approach speaks to a best practices client centered approach.

RECOMMENDATION 1c:

Probation leadership at the Ranches should evaluate communication systems currently in use by providers at each of the facilities, and they should work to ensure that open communication

and file sharing programs are put into place. In addition, the frequency of site-wide team meetings or other programs should be increased in order to ensure that various team members know one another and are familiar with the treatment programs for all minors under their care.

Response: The recommendation is in the initial process of implementation.

Probation, SCVHSS, CMH, DADS and CBOs have begun discussions around improved communication and sharing of information. All partners recognize the value of each others insight and observations in the treatment of our clients. Verbal exchanges are often shared and at times written documentation as well.

Recently implemented has been a higher level quarterly meeting amongst all the stakeholders where policies and practices are discussed. A vision of regularly scheduled multi-disciplinary case conferences at the worker level appears to be a strategy welcomed by all. Discussions around the frequency and logistics are still being worked out. However, certain federal regulations (notably C.F.R. 42 part 2, which provides strong privacy protections for individuals in treatment for substance abuse disorders) around the sharing of some information supersede even the Standing Order referenced and signed by the presiding judge. Still, all agencies understand the spirit and intent of the recommendation and continue to contemplate and seek legal counsel on avenues for a shared file.

FINDING 2:

Communication among individual professionals about mental health needs is limited and inefficient and is exacerbated because separate records, such as medical charts and progress notes, are maintained.

Response: The respondent agrees with the finding.

RECOMMENDATION 2:

Santa Clara Valley Health & Hospital System should institute one chart or one recordkeeping system, such as the UNICARE system already in place, and require its use by CMH, Custody Health, DADS, and the relevant CBOs.

Response: The recommendation requires further analysis.

SCVHHS is at the initial stages of discussion and design of an electronic database to maintain records which would be used to share information. This project is still in its embryonic stage and may not come to fruition for another couple of years. In the interim, the CBOs will provide copies of each minor's records to the Medical Department for placement

in the minor's Medical Record. The CBOs documentation will be maintained in a separate section of the Medical Record but it will be accessible to all parties which have legal access to minor's health information. The documentation completed by the Psychiatrists of the Mental Health Department is currently maintained in Medical Records maintained by the Medical Department. DADS is seeking legal directive on its federal regulations around the sharing of information, while the CBOs are upbeat to this idea as they also review policies and practices.

It is estimated that resolution to many of the obstacles will be forthcoming, which will enable us to implement some form of a shared information system within the next 90 days.

FINDING 3:

Metrics are available but are not used to evaluate whether mental health needs are being met, whether needs are increasing, or whether the various CBO providers are being used in the most efficient manner.

Response: The respondent agrees with the finding.

RECOMMENDATION 3a:

Probation and CMH should agree on benchmarks to identify which minors in custody should receive mental health or social services counseling.

Response: The recommendation has not yet been implemented, but will be implemented in the near future.

The Probation Department will be implementing the Juvenile Assessment and Intervention System tool late this fall. The JAIS is one of the best evidence-based, gender-specific assessment and supervision systems in corrections. It is a valid and reliable risk assessment tool with proven supervision strategies to guide case planning, treatment, and supervision. The JAIS complements the professional judgment of Probation Officers by providing insight into the reasons causing a youth to act out and identifies strategies that emphasize public safety, rehabilitation, and accountability while focusing on criminogenic needs. The JAIS has two components; a screening section as well as a more thorough assessment component to identify areas of concern around substance abuse, mental health and or trauma. The entrance multi-disciplinary team will share the results of the JAIS to inform the treatment plan. Within each treatment plan individual goals will be set for each youth and monitored to ascertain progress and/or the need for modification. Implementation is scheduled for late fall 2011.

RECOMMENDATION 3b:

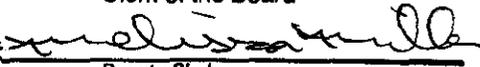
Probation and CMH should agree on which metrics are necessary to plan staffing needs, and review those metrics at regular communication meetings.

Response: The recommendation has not yet been implemented, but will be implemented in the future.

The Probation Department and CMH are at the initial stages of discussion around the utilization of the JAIS. Training on the interpretation and results will take place in early fall. Once implemented, an assessment of workload and caseload will be required to determine staffing needs for the ranch populations. Data around number of contacts per youth, hours of service in therapy versus crisis intervention are already being collected and presented at the higher level quarterly meeting. More discussion needs to be had around the qualitative measures of progress and how this information can be quantified.

The foregoing instrument is a correct copy
of the original.

ATTEST: Maria Marinos
Clerk of the Board

BY: 
Deputy Clerk

Date: AUG 09 2011