

BEHAVIORAL HEALTH SERVICES

REASON FOR INVESTIGATION

The Nevada County Civil Grand Jury has the responsibility to review citizen complaints concerning a department of Nevada County, as well as to review county departments, programs, and processes to determine if they are meeting the needs of the community.

PROCEDURE FOLLOWED

The Grand Jury interviewed management and staff of the Behavioral Health Services, the County Administrator, the Assistant County Administrator, the Human Services Director, the retiring Behavioral Health Director, the acting Behavioral Health Director, the new Behavioral Health Director, contractual workers, the Sheriff and a county financial analyst.

FINDINGS

1. The Behavioral Health Services serves approximately 1300 "at risk" clients and has an annual budget of \$6.5 million, a staff of approximately 77 full-time-equivalents, and a similar number of outside contractors including psychiatrists, therapists, crisis workers and others.
2. The department is funded primarily by managed care reimbursements, client fees, and federal and state grants. Discretionary money is provided via state "realignment funds," the sources of which are state sales taxes and vehicle license fees. The County General Fund, as required by state rules, provides \$30,893 each year.
3. The Grand Jury was told that the Behavioral Health Services was not billing MediCal for a significant portion of the reimbursable services that it provides to clients. The department was also incurring rising hospitalization and transportation costs, some of which are not reimbursable. As a result, the department is drawing down discretionary funds that will be depleted in 2002. The new Behavioral Health Director's charge is to solve a projected \$1,000,000 shortfall in the behavioral health budget.
4. The Grand Jury was told that the Behavioral Health Services is understaffed and turnover is high. Many management positions turned over in the past one to two years. Both internal and contracted positions are difficult to fill due to low compensation. The former Behavioral Health Director retired in September 2000, yet the new Behavioral Health Director was not on staff until March 2001. About 11 staff positions are unfilled. Five or six employees are on medical leave and cannot be replaced except by temporary workers, who are difficult to find. Some employees, including some on medical leave, are suffering from post-traumatic stress as a result of the January 10, 2001 shootings at the Behavioral Health Services. The Grand Jury was informed that productivity and morale were low even before the shootings.
5. Both staff and the Behavioral Health Director stated that psychiatric resources were inadequate. The current director stated that staffing should consist of a full-time, employee medical director and the equivalent of two full-time psychiatrists. At the time of this report, seven part-time independent contractor psychiatrists were providing the equivalent of about

two full-time doctors, a low level that resulted when one of the contracting psychiatrists recently left his county position. No one provides medical supervision of the doctors and their treatments.

6. The California Code of Regulations, Title 9, section 620 defines the requirements to be a mental health director. The new Behavioral Health Director satisfies these requirements in that he has a master's degree in clinical social work and a master's degree in public administration.
7. The California Code of Regulations, Title 9, section 622 states that if the mental health director does not have a physician's license, there shall be a medical officer who holds a physician's license. To correct this deficiency, the Behavioral Health Director recommends that a full-time medical director be hired as soon as possible to oversee psychiatric staff and client treatment.
8. The Behavioral Health Services is required to accept all clients who qualify. This creates challenges in managing resources, especially during periods of peak demand for services. Nonetheless, for more than a year clients have often faced waits of six weeks or longer to get an appointment. The Grand Jury was informed that one client was told there would be a wait of several weeks to obtain authorization for a prescription refill. The authorization was provided when a senior county official intervened on the client's behalf.
9. The Grand Jury was informed that, although contracts provide for a wide range of services, psychiatrists are used primarily to prescribe medications and are not used to provide psychotherapy or case review. Psychiatrists are allowed about an hour with a new patient and 20 minutes for a follow-up visit. During those periods, the doctor diagnoses the patient, prescribes medication or adjusts dosages, and completes the paperwork for cost reimbursement.
10. Social worker interns or private therapists provide psychotherapy. The interns are temporary county employees who are working toward licenses and are supervised by an independent contractor who is a licensed clinical social worker.
11. The Grand Jury was told that non-medical staff could override psychiatrists' recommendations. A psychiatrist who ordered a patient hospitalized later learned that a non-medical staff member reversed his order.
12. It was admitted to the Grand Jury that no one person is specifically responsible for overseeing the progress of a patient.

CONCLUSIONS

1. The shootings at the Behavioral Health Services were the catalyst that led to an examination of the operations of that department. In its investigation, the Grand Jury was dismayed to find an organization with severe problems in management, in fiscal planning, and in providing services to its clients. Further, the county has failed to pursue initiatives to acquire sufficient state, federal and private grant funding.
2. The department has had a great deal of management turnover, which is always a source of turmoil, and little focus by county senior management. Problems have been allowed to persist. Poor financial planning has led the department to use up its discretionary reserves to meet normal operating costs. This has occurred when the economy was booming and sales tax

revenue was at a high level. The department faces empty reserves just as the economy is slowing and tax revenue could decline.

3. Despite spending beyond its means, the department has been over-focused on meeting budget to the detriment of the client. For example, to save money the department experimented with processing applicants for mental health services in a group, rather than individually discussing their problems and needs. This was done despite warnings from mental health professionals that this would only discourage people from seeking needed help. There is little medical influence. Expensive psychiatrists are independent contractors working part-time for the county who are used in a limited role and are not involved in department decision-making. Non-medical people cannot oversee psychiatrists, nor can county employees supervise independent contractors. There is no one in charge of the individual client's case.
4. The new Behavioral Health Director has taken on the massive job of curing many problems in this organization. He appears to be an experienced and able administrator with a good understanding of what is needed. He should be fully supported in his efforts to make needed changes, beginning with his proposal to hire a full-time medical officer who can provide medical direction.

RECOMMENDATIONS

The Grand Jury recommends that:

1. The county find the funds to hire the legally required and urgently needed full-time medical director.
2. The Behavioral Health Services meet client needs and achieve good financial management.
3. The county support the Behavioral Health Director while he makes the changes needed to stabilize and improve the department, even if additional General Funds are required.
4. The County Administrator should develop a constructive oversight process that can detect issues before they become severe.
5. The county pursue initiatives to acquire sufficient funding for behavioral health.

REQUIRED RESPONSES

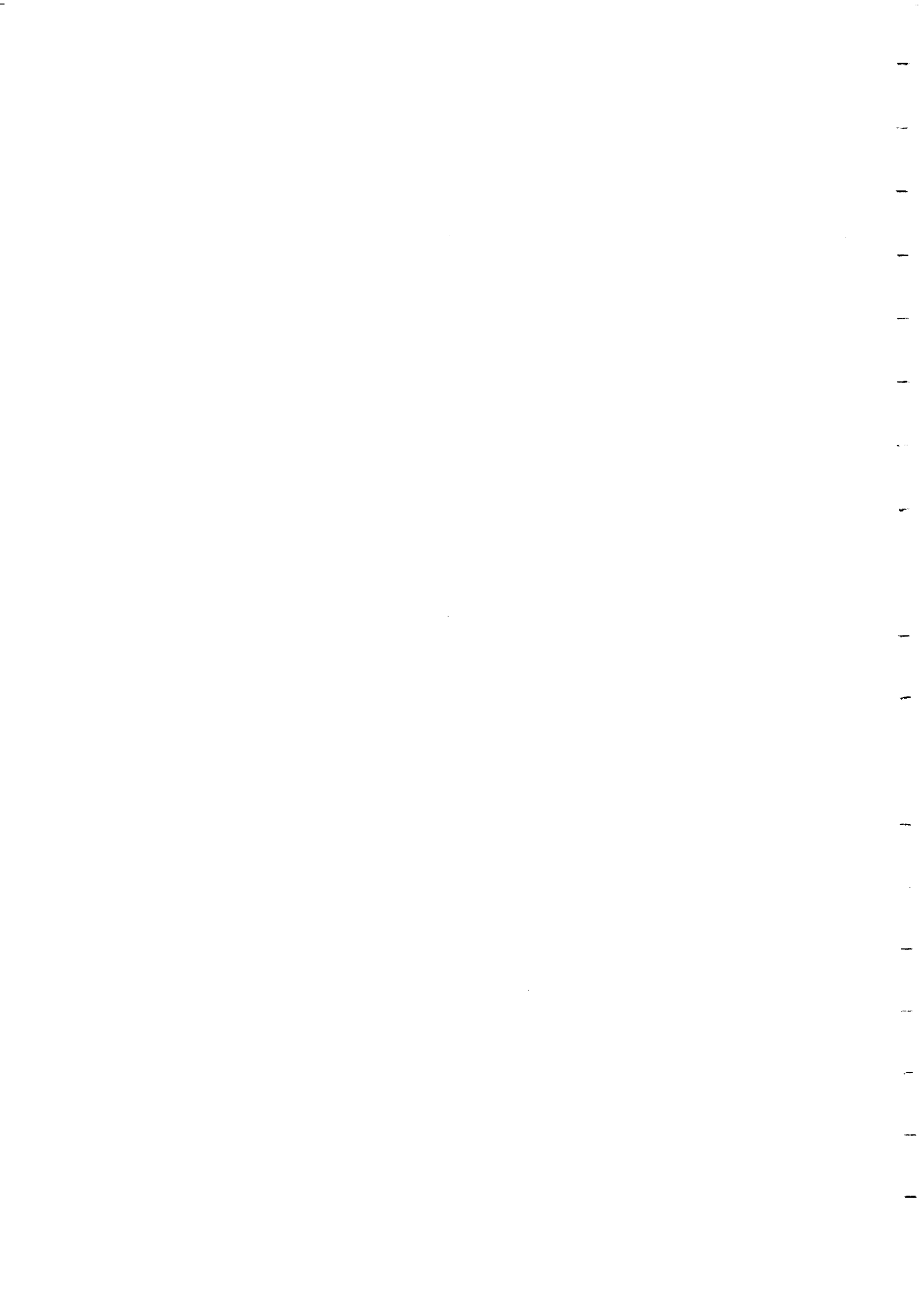
Board of Supervisors, due August 22, 2001

County Administrator, due July 23, 2001

Director, Human Services Agency, due July 23, 2001

Director, Behavioral Health Services, due July 23, 2001

RESPONSES



COUNTY OF NEVADA

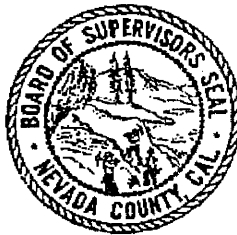
STATE OF CALIFORNIA

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August 21, 2001

The Honorable Kathleen Butz
Presiding Judge of the Nevada County Courts
Nevada County Court House
Nevada City CA 95959

Subject: Board of Supervisors Responses to the 2000-2001 Nevada County Civil Grand Jury Interim Report No. 12, dated May 21, 2001 regarding Behavioral Health Services.


Dear Judge Butz:

The attached responses by the Board of Supervisors to the 2000-2001 Nevada County Civil Grand Jury Interim Report No. 12, dated May 21, 2001 are submitted as required by California Penal Code §933.

These responses to the Grand Jury's findings and recommendations were approved by the Board of Supervisors at their regular meeting on May 21, 2001. Responses to findings and recommendations are based on either personal knowledge, examination of official county records, review of the response by the County Administrator, Director of the Human Services Agency, and the Behavioral Health Department, or testimony from the Board chair and county staff members.

The Board of Supervisors would like to thank the members of the 2000-2001 Grand Jury for their participation and effort in preparing this Interim report.

Sincerely,


Elizabeth J. Martin
Chair of the Board

Attachment

ejm:pjw:pb

cc: Foreman, Grand Jury
Ted Gaebler, County Administrator
County Counsel
Phyllis Murdock, Director, HSA
Robert Erikson, Director, Behavioral Health

**NEVADA COUNTY BOARD OF SUPERVISORS RESPONSES TO
2000-2001 CIVIL GRAND JURY INTERIM REPORT NO. 12
DATED MAY 24, 2001
RE: BEHAVIORAL HEALTH SERVICES**

Responses to findings and recommendations are based on either personal knowledge, examination of official county records, review of the responses by the County Administrator, the Director of the Human Services Agency, and the Department of Behavioral Health, or testimony from the board chairman and county staff members.

I. GRAND JURY INVESTIGATION:

Behavioral Health Services

A. RESPONSE TO FINDINGS & RECOMMENDATIONS:

Findings:

- 1. The Behavioral Health Services serves approximately 1,300 "at risk" clients and has an annual budget of \$6.45 million, a staff of approximately 77 full-time equivalents, and a similar number of outside contractors including psychiatrists, therapists, crisis workers and others.**

Agree

- 2. The department is funded primarily by managed care reimbursements, client fees, and federal and state grants. Discretionary money is provided via state "realignment funds", the sources of which are state sales taxes and vehicle license fees. The County General Fund, as required by state rules, provides \$30,893 each year.**

Agree

The annual county Maintenance of Effort (MOE) contribution of \$30,893 is a fixed sum established as part of the state "Realignment" funding of mental health services.

- 3. The Grand Jury was told that the Behavioral Health Services was not billing MediCal for a significant portion of the reimbursable services that it provides to clients. The department was also incurring rising hospitalization and transportation costs, some of which are not reimbursable. As a result, the department is drawing down discretionary funds that will be depleted in 2002. The new Behavioral Health Director's charge is to solve a projected \$1,000,000 shortfall in the Behavioral Health budget.**

Partially disagree.

The Board has no knowledge of what the Grand Jury was told, but partially disagrees with the finding apparently based upon such testimony and its implications..

Although some non-reimbursable Mental Health costs have risen and are projected to increase in the future, discretionary funding for Mental Health services will not be depleted in 2002 and there will not be a projected \$1,000,000 shortfall in the Behavioral Health budget for 2001-2002. Management and procedural changes in the Behavioral Health department since the Grand Jury report has been released should reduce the department budget shortfall to no more than \$280,000 rather than \$1,000,000. Additional funding in the California State Budget for 2001-2002 for expanded Mental Health services in Nevada County should also help reduce the budget shortfall.

4. **The Grand Jury was told that the Behavioral Health Services is understaffed and turnover is high. Many management positions turned over in the past one to two years. Both Internal and contracted positions are difficult to fill due to low compensation. The former Behavioral Health Director retired in September 2000, yet the new Behavioral Health Director was not on staff until March 2001. About 11 staff positions are unfilled. Five or six employees are on medical leave and cannot be replaced by temporary workers, who are difficult to find. Some employees, including some on medical leave, are suffering from post-traumatic stress as a result of the January 10, 2001 shootings at the Behavioral Health Services. The Grand Jury was informed that productivity and morale were low even before the shootings.**

Partially disagree

The Board has no knowledge of what the Grand Jury was told, but partially disagrees with the findings apparently based upon such testimony and its implications.

Behavioral Health Services has had significant turnovers and vacancies, however, these problems exist state-wide and Nevada County vacancy rates are similar to those of other similarly sized counties in California. The primary reasons for personnel turnover in the Behavioral Health department this past year were due to retirement in two cases, moving in one, and a promotional opportunity in another. Contracting for mental health therapists and psychiatrists is also difficult in Nevada County, as it is throughout the state. The difficulty in filling these positions is not totally related to compensation issues, but rather due to the scarcity of qualified professionals available and interested in working for governmental agencies. Current vacancies are targeted for aggressive recruiting efforts throughout the upcoming year. Changes in the county classification and compensation system, presently being implemented, will make compensation more competitive and should help recruitment efforts.

The January 10, 2001 shootings were stressful on certain employees and upon the department generally. Four employees are presently on extended medical leave and can only be replaced by temporary workers, which are generally difficult to find and less productive than experienced permanent employees. The County is also exploring other options to encourage return to work of the employees on leave or to obtain permanent replacements. These positions have remained

open and additional time to recover has been provided to these employees due to the exceptional circumstances related to the January 10th shootings. The four vacancies are the only vacancies that presently exist in the department. Behavioral Health is functioning well in view of the turnovers and vacancies, but looks forward to improved productivity and morale once it gets back to full staffing.

5. **Both staff and the Behavioral Health Director stated that the psychiatric resources were inadequate. The current director stated that staffing should consist of a full-time, employee medical director and the equivalent of two full-time psychiatrists. At the time of this report, seven part-time independent contractor psychiatrists were providing the equivalent of about two full-time doctors, a low level that resulted when one of the contracting psychiatrists recently left this county position. No one provides medical supervision of the doctors and their treatments.**

Disagree

The Board has no knowledge of what the Grand Jury was told, but disagrees with the finding apparently based upon such testimony and its implications that the quality of Mental Health care provided by the Behavioral Health department was degraded due to staffing shortages. Despite staff vacancies, clients with acute mental disorders were provided needed intervention and treatment services on a priority basis. Other less critical mental health services were provided as the level of treatment required and as resources permitted.

Since the report was issued, a medical director has been hired to provide medical supervision of the psychiatrists under contract to the Behavioral Health department.

6. **The California Code of Regulations, Title 9, section 620, defines the requirements to be a mental director. The new Behavioral Health Director satisfies these requirements in that he has a master's degree in clinical social work and a master's degree in public administration.**

Agree

7. **The California Code of Regulations, Title 9, section 622, states that if the mental health director does not have a physician's license, there shall be a medical officer who holds a physician's license. To correct this deficiency, the Behavioral Health Director recommends that a full-time director be hired as soon as possible to oversee psychiatric staff and client treatment.**

Agree

A medical director was hired on June 13, 2001 to oversee psychiatric staff and client treatment.

8. **The Behavioral Health Services is required to accept all clients who qualify. This creates challenges in managing resources, especially during periods of peak demand for services. Nonetheless, for more than a year, clients have often faced waits of six weeks or longer to get an appointment. The Grand Jury was informed that one client was told there would be a wait of several weeks to obtain authorization for a prescription refill. The authorization was provided when a senior county official intervened on the client's behalf.**

Partially disagree

California State law under "Realignment" regulations allows for mental health services to be provided only to the extent that resources are available. In reality however, it is difficult to decline or ration mental health services to those who need them. This limitation does not apply to mental health services provided under Medi-Cal (Medicaid) which is a Federal entitlement program.

In some cases, clients in need of non-critical mental health treatment have occasionally had to wait as long as six weeks for an appointment. Immediate crisis intervention and treatment services have consistently been available for clients in need of acute mental health care.

The Board can not substantiate the Grand Jury testimony that a client was told there would be a wait of several weeks to obtain authorization for a prescription refill and that authorization was only provided after intervention by a senior county official.

9. **The Grand Jury was informed that, although contracts provide for a wide range of services, psychiatrists are used primarily to prescribe medications and are not used to provide psychotherapy or case review. Psychiatrists are allowed about an hour with a new patient and 20 minutes for a follow-up visit. During those periods, the doctor diagnoses the patient, prescribes medication or adjusts dosages, and completes the paperwork for cost reimbursement.**

Partially disagree

Although psychiatrists do not normally perform psychotherapy or case review, they work closely with psychotherapists and other department staff to ensure all prescribed treatments, case review procedures, and medical record documentation requirements are properly accomplished. New patient appointments are routinely scheduled for one hour and follow-up appointments for twenty minutes, but additional time can be given to clients if needed to provide critically needed treatment and counseling. The psychiatrist must document the services provided to ensure consistency of treatment and allow for reimbursement of eligible medical treatment costs.

10. **Social worker interns or private therapists provide psychotherapy. The interns are temporary county employees who are working toward licenses and are supervised by an independent contractor who is a licensed social worker.**

Agree

The interns may be either Social Work interns or Marriage and Family Therapy interns.

- 11. The Grand Jury was told that non-medical staff could override psychiatrists' recommendations. A psychiatrist who ordered a patient hospitalized later learned that a non-medical staff member reversed his order.**

Disagree

The Board has no knowledge of what the Grand Jury was told, but disagrees with the finding apparently based upon such testimony and its implications that mental health treatment prescriptions are being improperly administered by non-medical staff members.

There is no county policy or practice that allows for non-medical Behavioral Health department staff to overrule a medical treatment judgment by a psychiatrist. In some cases, a Crisis Worker may obtain additional information following an initial medical evaluation by a psychiatrist prescribing detention for further evaluation and treatment. After additional intervention, if it is clearly determined by a Crisis Worker that detention is not needed, Behavioral Health managed care procedures allow for Crisis Workers to make judgement decisions regarding involuntary commitment of patients under Welfare & Institutions Code Section 5150.

- 12. It was admitted to the Grand Jury that no one person is specifically responsible for overseeing the progress of a patient.**

Agree

The Behavioral Health department uses a team approach under managed care procedures to provide mental health care.

Recommendations:

- 1. The County find the funds to hire a legally required and urgently needed full-time medical director.**

The recommendation has been implemented.

Dr. Douglas Crisp, M.D., was hired as the full-time Behavioral Health medical director on June 13, 2001.

- 2. The Behavioral Health Services meet client needs and achieve good financial management.**

The recommendation has not yet been fully implemented but will be by September 1, 2001.

The Behavioral Health Department, under the direction of new Behavioral Health Department Director, Robert Erickson, is presently in the process of reviewing all aspects of department service delivery systems, financial management procedures, and classification and staffing authorizations. Significant changes have already been made to streamline department operations and services and a new service delivery system will be implemented on September 1, 2001.

The Director of the Human Services Agency and the County Administrator will monitor department performance indicators throughout the remainder of 2001 and the first half of 2002 to ensure changes that have been made are achieving desired results. Additional changes to improve department efficiency and program effectiveness will be made by the Behavioral Health department as needed and as resources become available.

The Board will continue to monitor the status of the effort to upgrade the quality and responsiveness of Behavioral Health services and improve the financial management of the department. A report will be presented to the Board by June 30, 2002 as part of the county 2001-2002 budget process and further action will be taken as required to ensure Behavioral Health department services are provided at the highest possible level consistent with available resources.

- 3. The County support the Behavioral Health Director while he makes the changes needed to stabilize and improve the department, even if additional General Funds are required.**

The recommendation has been implemented.

The Board of Supervisors and the County Administrator have consistently supported every recommendation presented to date by the new Director of Behavioral Health and are committed to do so in the future as the need exists and resources allow.

Also, the Board increased the General Fund appropriation to the Behavioral Health Department in the FY 2001-2002 county budget to \$61,893, twice that of the previous year. Additional General fund appropriations will be considered if required as part of the FY 2002-2003 budget.

4. The County Administrator should develop a constructive oversight process that can detect issues before they become severe.

The recommendation has been implemented.

The County Administrator has implemented a structured functional oversight process for all county operations and services. This process includes measurable goals and objectives developed through the county strategic planning program and implemented as part of the FY 2001-2002 budget process. Quantitative and qualitative performance measurements are in place for all departments, including the Behavioral Health department. Additionally, the County Administrator evaluates all department heads under a new senior executive manager review and development system that measures management and leadership effectiveness against program results. Other internal oversight procedures exist and continue to be implemented within each department to ensure all employees are responsive and sensitive to the needs of county citizens, both now and in the future.

5. The County pursue initiatives to acquire sufficient funding for Behavioral Health.

The recommendation has been implemented and will be continue to be addressed on an on-going basis.

Additional county General Funds have been appropriated to the Behavioral Department as part of the FY 2001-2002 budget and other requests will be considered by the Board as the need arises and resources become available (See response to Recommendation No. 3).

The county has also received \$400,000 in additional funds as part of the California State Budget for FY 2001-2002 to conduct a three-year pilot program to expand mental health treatment programs in Nevada County. Other legislative opportunities to enhance mental health funding are also underway and additional opportunities will be sought as opportunities arise.

B. OTHER RESPONSES REQUIRED:

Board of Supervisors – August 22, 2001
County Administrator – July 23, 2001
Director, Human Services Agency – July 23, 2001
Director, Behavioral Health Services – July 23, 2001

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COUNTY OF NEVADA
COUNTY ADMINISTRATOR

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Rec'd
JUL 23 2001

July 23, 2001

Hon. Kathleen Butz
Nevada County Superior Court
201 Church St.
Nevada City, CA 95959

Judge Butz:

RE: Response to Grand Jury Report – Nevada County Administrator

Attached is the Nevada County Administrator's response to the Nevada County Grand Jury report on the Nevada County Behavioral Health Department. I believe my response to be accurate and appropriately detailed to address the issues raised by the Grand Jury.

Sincerely,



Ted A. Gaebler
County Administrator

cc: Honorable Board of Supervisors

Nevada County Administration
Grand Jury Report
Response to Nevada County Behavioral Health Department Inquiry

FINDINGS

1. The Behavioral Health Services serves approximately 1300 ““at risk”” clients and has an annual budget of \$6.5 million, a staff of approximately 77 full-time-equivalents, and a similar number of outside contractors including psychiatrists, therapists, crisis workers and others.

Response: Agree

The comment is essentially correct.

2. The department is funded primarily by managed care reimbursements, client fees, and federal and state grants. Discretionary money is provided via state ““realignment funds,”” the sources of which are state sales taxes and vehicle license fees. The County General Fund, as required by state rules, provides \$30,893 each year.

Response: Agree

The comment is essentially correct.

3. The Grand Jury was told that the Behavioral Health Services was not billing MediCal for a significant portion of the reimbursable services that it provides to clients. The department was also incurring rising hospitalization and transportation costs, some of which are not reimbursable. As a result, the department is drawing down discretionary funds that will be depleted in 2002. The new Behavioral Health Director’s charge is to solve a projected \$1,000,000 shortfall in the behavioral health budget.

Response: Agree

The comment is essentially correct.

4. The Grand Jury was told that the Behavioral Health Services is understaffed and turnover is high. Many management positions turned over in the past one to two years. Both internal and contracted positions are difficult to fill due to low compensation. The former Behavioral Health Director retired in September 2000, yet the new Behavioral Health Director was not on staff until March 2001. About 11 staff positions are unfilled. Five or six employees are on medical leave and cannot be replaced except by temporary workers, who are difficult to find. Some employees, including some on medical leave, are suffering from post-traumatic stress as a result of the January 10, 2001 shootings at the Behavioral Health Services. The Grand Jury was informed that productivity and morale were low even before the shootings.

Response: Partially disagree

Compensation has been addressed in the last year through the completion of the countywide class and compensation study. The implementation of that study is over a three period beginning retroactively to October 1, 1999 with implementation complete on October 1, 2001. It is true that some employees are still on medical leave for both physical and psychological reasons from the shootings in the January 10, 2001 tragedy.

5. Both staff and the Behavioral Health Director stated that psychiatric resources were inadequate. The current director stated that staffing should consist of a full-time, employee medical director and the equivalent of two full-time psychiatrists. At the time of this report, seven part-time independent contractor psychiatrists were providing the equivalent of about two full-time doctors, a low level that resulted when

one of the contracting psychiatrists recently left his county position. No one provides medical supervision of the doctors and their treatments.

Response: Partially disagree

Since the issuing of this report a medical director has been hired to provide medical supervision of the contracted psychiatrists. It is true that the department has struggled to keep adequate psychiatric resources.

6. The California Code of Regulations, Title 9, section 620 defines the requirements to be a mental health director. The new Behavioral Health Director satisfies these requirements in that he has a master's degree in clinical social work and a master's degree in public administration.

Response: Agree

We are very fortunate to have Robert Erickson as our Director of Behavioral Health.

7. The California Code of Regulations, Title 9, section 622 states that if the mental health director does not have a physician's license, there shall be a medical officer who holds a physician's license. To correct this deficiency, the Behavioral Health Director recommends that a full-time medical director be hired as soon as possible to oversee psychiatric staff and client treatment.

Response: Partially disagree

A contracted psychiatrist filled this role in the past. Currently, (see Response #5) there is a full-time medical director on the County's payroll.

8. The Behavioral Health Services is required to accept all clients who qualify. This creates challenges in managing resources, especially during periods of peak demand for services. Nonetheless, for more than a year clients have often faced waits of six weeks or longer to get an appointment. The Grand Jury was informed that one client was told there would be a wait of several weeks to obtain authorization for a prescription refill. The authorization was provided when a senior county official intervened on the client's behalf.

Response: Partially disagree

With the exception of MediCal clients who are entitled to service, the balance of clients receive services based the amount of resources available. This is a statewide problem, but it is a severe problem in Nevada County.

9. The Grand Jury was informed that, although contracts provide for a wide range of services, psychiatrists are used primarily to prescribe medications and are not used to provide psychotherapy or case review. Psychiatrists are allowed about an hour with a new patient and 20 minutes for a follow-up visit. During those periods, the doctor diagnoses the patient, prescribes medication or adjusts dosages, and completes the paperwork for cost reimbursement.

Response: Agree

The comment is essentially correct.

10. Social worker interns or private therapists provide psychotherapy. The interns are temporary county employees who are working toward licenses and are supervised by an independent contractor who is a licensed clinical social worker.

Response: Agree

The comment is essentially correct. The County encourages the appropriate use of qualified interns in all its departments.

11. The Grand Jury was told that non-medical staff could override psychiatrists' recommendations. A psychiatrist who ordered a patient hospitalized later learned that a non-medical staff member reversed his order.

Response: Partially disagree

This office was not made aware of any such incidents. It is common in the managed care arena for non-medical professionals to question medical recommendations.

12. It was admitted to the Grand Jury that no one person is specifically responsible for overseeing the progress of a patient.

Response: Agree

The comment is essentially correct. The Behavioral Health Department uses a team approach in providing care.

RECOMMENDATIONS

The Grand Jury recommends that:

1. The county find the funds to hire the legally required and urgently needed full-time medical director.

Response: This recommendation has been completely implemented. On June 13, 2001, a medical director began employment with the County.

2. The Behavioral Health Services meet client needs and achieve good financial management.

Response: The County will meet the needs of the clients within the resources available. The Behavioral Health Director is taking all necessary actions to improve the financial management of the Department.

3. The county support the Behavioral Health Director while he makes the changes needed to stabilize and improve the department, even if additional General Funds are required.

Response: This office and the Board of Supervisors has supported and expedited every recommendation brought forward by the Director of Behavioral Health thus far and will continue to do so as appropriate. In addition, without a request from the Director the Board of Supervisors doubled the General Fund contribution to \$61,893.

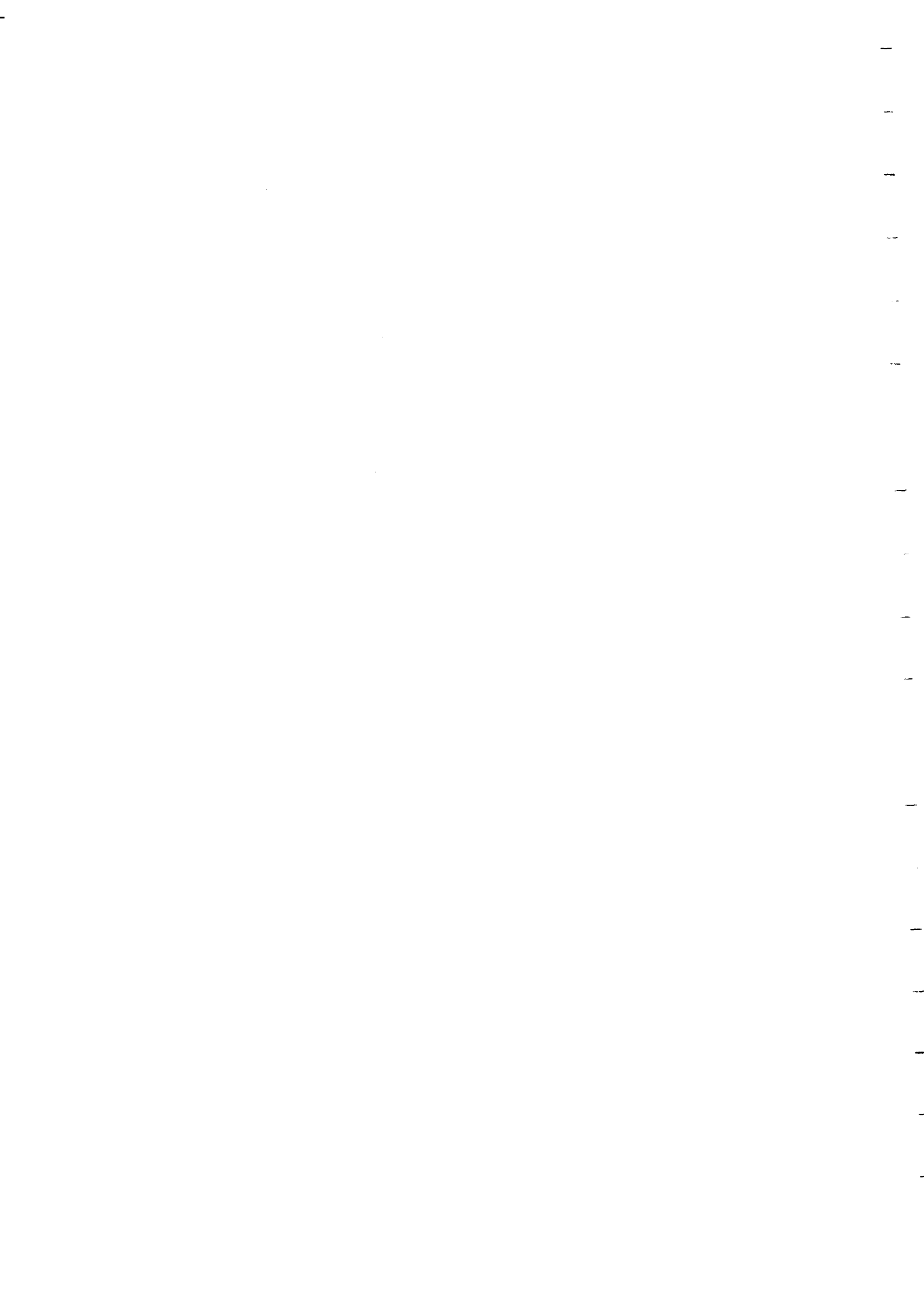
4. The County Administrator should develop a constructive oversight process that can detect issues before they become severe.

Response: Over the past 18 months the County Administrator has installed a new review and development system for senior executive managers to provide exactly this type of oversight. In addition, broader efforts are underway to transform the entire County organization's culture and responsiveness.

5. The county pursue initiatives to acquire sufficient funding for behavioral health.

Response: Through the leadership of the Board Chair and the support of the Board of Supervisors, strong advocacy of additional funding in the amount of \$400,000 for the Behavioral Health Department has been successful with the California State Legislature. These funds

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**COUNTY OF NEVADA
COUNTY ADMINISTRATOR**

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October 15, 2001

Ray Hoffman, Foreman Pro Tem
2001-2002 Nevada County Civil Grand Jury
950 Maidu Avenue
Nevada City, CA 95959

Dear Mr. Hoffman:

I am writing this letter on behalf of Ted Gaebler who is currently on vacation. Thank you for your two letters of September 25, 2001 received in this office on October 2, 2001 regarding incomplete responses to the Grand Jury's Report on the Behavioral Health and the Grand Jury's report on County Facilities. I would like to apologize on behalf of the County Administrator's Office for these inadvertent omissions.

With regards to the Behavioral Health report and the unfinished sentence on recommendation 5, that response should be finished as follows (in bold):

- 5. The county pursue initiatives to acquire sufficient funding for behavioral health.

*Response: Through the leadership of the Board Chair and the support of the Board of Supervisors, strong advocacy of additional funding in the amount of \$400,000 for the Behavioral Health has been successful with the California State Legislature. **These funds are to be provided over a three-year period. These funds may be used for dual diagnosis clients and possibly a crisis stabilization program. Dual diagnosis clients are those with both mental illness issues and substance abuse problems.***

(For the Grand Jury's information, after the submission of this response the Governor did sign the budget with this funding included for Nevada County. The Behavioral Health Department is currently working with the State Department of Mental Health on program specifics.)

In reference to the County Facilities report, the response to Finding # 8 should read as follows (once changes/additions are in bold):

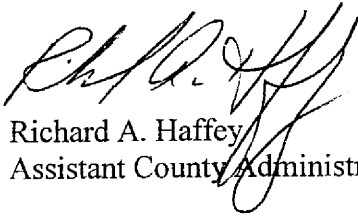
*Response: **Partially Disagree***

It is not chaired by a member of the BOS, but initially by the Assistant County Administrator and currently by the General Services Director. Effective in fiscal year

2000/2001, all departments looking at major facility modifications or additions were required to bring them to the Capital Facility Task Force.

Once again, on behalf of this office, please accept my apology for our omissions. We will endeavor to be more diligent in the future. For the Grand Jury's information, we are currently reviewing all of last year's reports from our office. Should we find any other corrections, we will communicate them to the Grand Jury as soon as possible.

Sincerely,



Richard A. Haffey
Assistant County Administrator

Cc: Ted Gaebler, County Administrator
Board of Supervisors' Office

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COUNTY OF NEVADA HUMAN SERVICES AGENCY

Phyllis L. Murdock
Agency Director

Director:
Art Davis
Veterans Services
Robert Erickson, LCSW, M.P.A.
Behavioral Health Services
Jess Montoya
Community Health Services
Philip S Reinheimer
Adult & Family Services

960 MAIDU AVE PO BOX 1210 NEVADA CITY CALIFORNIA 95959 TELEPHONE (530) 265-1340 FAX (530) 265-7120

July 23, 2001

Honorable Carl F. Bryan II
201 Church St.
Nevada City, Ca 95959

Honorable Judge Bryan:

This is in response to the 2000-2001 Grand Jury Report on Behavioral Health.

FINDING

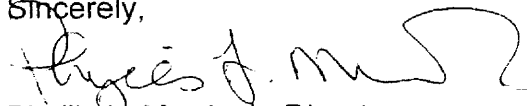
1. Agree with the finding
2. Agree with the finding
3. Agree with the finding, although the shortfall is overstated, it is approximately \$280,000 rather than \$1,000,000
4. Agree with the finding. The turnover in management staff was due to retirement in two cases, moving in one and a promotional opportunity for another created an additional management opening. Therapist and psychiatrist positions are among the most difficult to recruit statewide and our county is no exception. These positions were targeted for high level recruitment efforts during the Fall of 2000 and into the present.
5. Agree with the finding
6. Agree with the finding
7. Agree with the finding, the Medical Director has been hired.
8. Agree with the finding, however cannot substantiate the story related about one client who was told the wait for a prescription refill would be a wait of several weeks.

9. Agree with the finding
10. Agree with the finding
11. Agree with the finding
12. Agree with the finding

RECOMMENDATIONS

1. The recommendation has been implemented, the Medical Director is currently employed.
2. The recommendation is being implemented. The Behavioral health director has reorganized the delivery of client services and is implementing strategies for improving productivity of staff. The official start date of the new delivery system is September 1 of this year.
3. The recommendation has been implemented. The county increased the contribution of general fund dollars to twice that of the previous year.
4. This recommendation will be in the purview of the County Administrator
5. This recommendation has been implemented, we have received \$400,000 of additional funding for behavioral health in the current year state budget.

Sincerely,



Phyllis L. Murdock, Director
Human Services Agency

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**NEVADA COUNTY
HUMAN SERVICES
AGENCY**

rec'd
JUN 11 2001

PHYLLIS L. MURDOCK
Director
Agency Deputy Director:
Robert Erickson, LCSW, MPA
Director, Department of
Behavioral Health
Drug & Alcohol Administrator

**DEPARTMENT OF
BEHAVIORAL HEALTH**

10433 WILLOW VALLEY ROAD, STE. A

NEVADA CITY CALIFORNIA 95959

TELEPHONE (530) 265-1437
FAX (530) 265-7065

June 7, 2001

Honorable Carl F. Bryan
Nevada County Superior Court
201 Church Street
Nevada City, CA 95959

CB 6/7/01

Re: Response to Civil Grand Jury Report on Mental Health published May 24, 2001

Dear Judge Bryan:

The following constitutes my response to the above report:

GENERAL COMMENT:

The report appears to focus on the Mental Health service portion of the responsibilities of this Department and does not address the Alcohol and Drug and Child Welfare Service responsibilities of the Department. This should be borne in mind in the reading of the report. In essence, while it refers to the Behavioral Health Department throughout, it is really a report on the Mental Health Service of the Department, only. My remarks are similarly confined. I will refrain from reiteration of this with regard to the individual findings.

Finding 1: I agree.

Finding 2: I agree.

Finding 3: I agree.

Finding 4: I partially disagree. It is my impression that the compensation portion of the finding has been substantially rectified by the recently completed Classification and Compensation Study but that the impact of this change is only beginning to be felt.

Finding 5: I agree.

Finding 6: I agree.

Finding 7: I agree.

Finding 8: I agree generally. It should be noted that the "Realignment" Act provides that services need be provided only "to the extent that resources are available." In theory, this allows counties to decline to deliver services for which they do not have the needed resources. In practice, it is extremely difficult to ration services on this basis. The limitation to available resources does not apply to the Medi-Cal (Medicaid) program, which is a legal entitlement program.

Finding 9: I agree.

Finding 10: I agree. It should be noted that the interns may be either Social Work interns or Marriage and Family Therapy Interns.

Finding 11: I disagree in part. There is no policy that allows non-medical staff to overrule a medical judgement. I am aware of one instance in which a crisis worker released a person whom a psychiatrist had indicated should be detained pursuant to Welfare and Institutions Code Section 5150. This occurred after the Crisis Worker had done additional intervention with the patient and made a judgement that detention for further evaluation and treatment was not needed. This is a judgement normally within the purview of and routinely made by Crisis Workers.

Finding 12: I agree.

RECOMMENDATIONS SECTION

Recommendation 1: The recommendation has been implemented. The position was approved, by the Board of Supervisors, on May 8, 2001 and is included in the budget for 2001/02.

Recommendation 2: Every reasonable action will be taken toward these objectives. It may not be possible to meet all client needs within the resources available.

Recommendation 3: An increase of \$31,000 in the County General Fund contribution to Mental Health was incorporated into the budget for fiscal year 2001/02.

Recommendation 4: This is beyond my scope.

Recommendation 5: This will be implemented insofar as I am able.

Respectfully,



Robert Erickson, LCSW, MPA
Behavioral Health Director