

Santa Clara County Mental Health Enhanced/Supplemental Board and Care Services

Adult/Older Adult Division
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24 Hour Programs

Enhanced/Supplemental Board and Care Services

Historical Background

- ▶ To provide Santa Clara County adult/Older adult consumers with enhanced individualized services that are in addition to the standard Title 22 required services.
- ▶ To assist consumers manage behavioral issues and transition smoothly from locked settings
- ▶ To maintain the consumers in the least restrictive environment
- ▶ To work in close coordination with the consumers case manager and psychiatrist

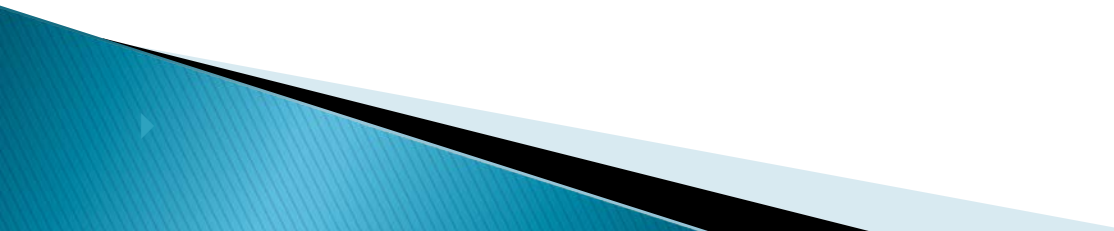
Supplemental Homes

- ▶ To assist consumers to understand and reach medication adherence and teach clients how to self-administer medication
- ▶ Santa Clara County contracts with the following residential care facilities (RCF).
 - ▶ Riviera Villa, Lassen park Villa, Laurel Haven, South County Retirement Inn, St. Joseph's Care Home, CNBA Residential Care, Stone Haven and Anita's Care Home.
 - ▶ In July FY 15, we will be adding two new providers: Evonne & Sunrise RCF to our list of contractors.

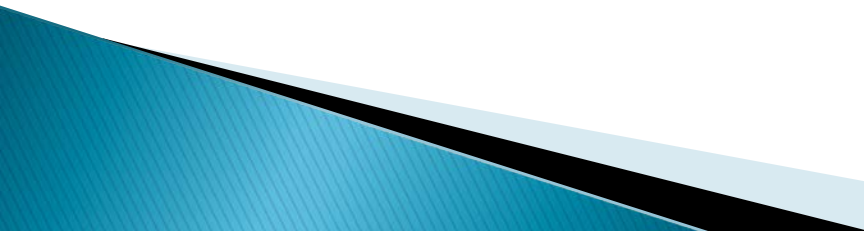
Enhanced/ Supplemental Services

- ❖ The Supplemental Services (SS) patches is a daily negotiated rate that ranges from \$30.00 to \$50.00 a day paid to a County Contracted Board and Care provider.
- ❖ This SS patch rate is paid in addition to the Social Security Income (SSI) benefit paid by the consumer to the provider (\$1004 a month + \$30, \$40 or \$50.00 a day).
- ▶ Supplemental services rate is paid based on the clients need and not the home, if a consumer no longer requires supplemental or enhanced services the rate is dropped.

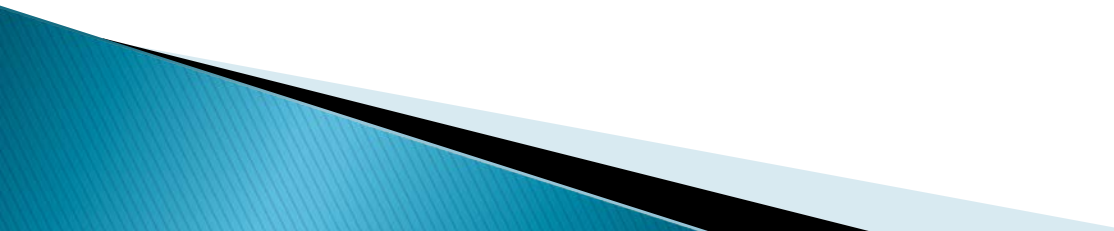
Criteria for Supplemental Services

- ▶ This includes but not limited to individuals with the following symptoms:
 - ▶ Consumers with a history of failed placements in a regular board and care home and are at risk of recidivism (consumers unable to maintain in the community and are frequently in and out of EPS/Acute settings).
 - ▶ Consumers suffering from an ‘institutionalized’ syndrome.
 - ▶ Consumers who are diabetic and Insulin –dependent who require assistance managing the disease and performing the basic self–care required to stabilize blood sugar levels.
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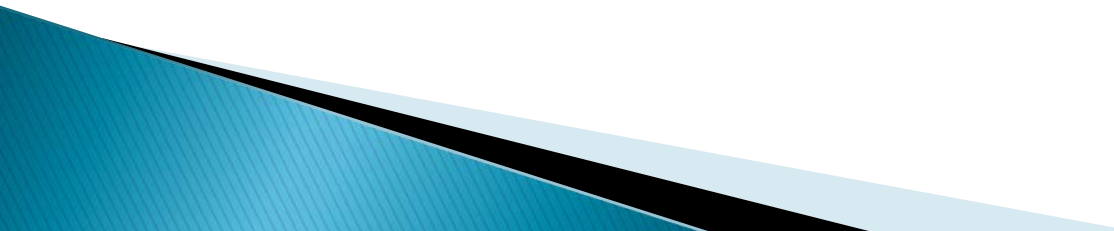
Criteria for Supplemental Services

- ▶ Developmentally delayed consumers that need special support and prompting to live in an open community setting
 - ▶ Medically frail consumers with severe medical and mental health needs.
 - ▶ Consumers who require specialized culturally proficient services due to language barrier i.e. monolingual Vietnamese, Chinese, Korean and Spanish speaking individuals.
 - ▶ Consumers incontinent of urine or bowel
 - ▶ Consumers who are non-ambulatory (on a wheel chair, Walker or cane). These consumers sometimes require specialized & customized homes.
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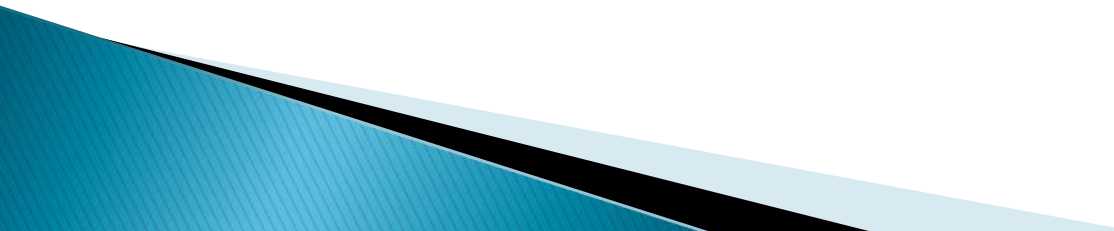
Expectation of Supplemental Providers

- ▶ The Enhanced/SS providers are expected to transport consumers to medical and psychiatric appointments, and keep the case managers informed of pertinent information.
 - ▶ The providers are expected to immediately attend to consumers in crisis situations and notify both the case manager and the public Guardian if the consumer is conserved.
 - ▶ The Providers are expected to provide services to consumers with significant behavior issues. When necessary the provider will provide one-on-one behavior management and staff supervision by utilizing prompts, education, and re-direction.
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discharges

- ▶ The supplemental providers are expected to notify 24 hour care of any discharges or placement into their facility within 24 hours
 - ▶ All providers are given a 10 day bed hold when a consumer is admitted into an acute hospital or medical hospital. Clients are automatically discharged if they end up in jail
 - ▶ All providers are expected to coordinate with the case manager to move the client to a lower level of care
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Referral Process

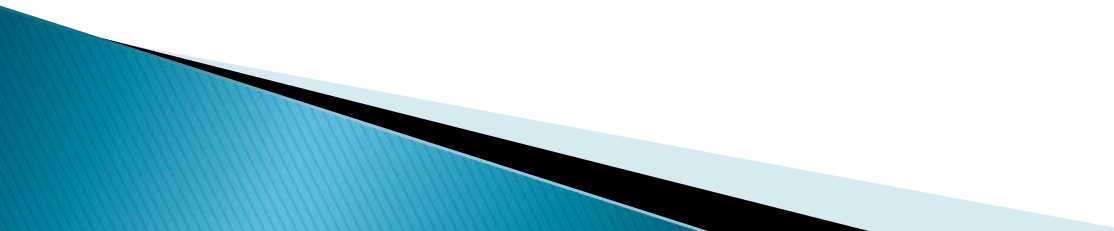
- ▶ Referral for Supplemental Services can only be generated through the mental health assigned outpatient case manager.
 - ▶ If the consumer is in an acute hospital or Emergency Psychiatric Services, the referral should be generated by the hospital discharge planner.
 - ▶ If the consumer is in the Institute of Mental Disease (IMD) or a Skilled Nursing Facility (SNF) placement the referral should be generated by the IMD/SNF discharge coordinator.
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Utilization Process


- ▶ Consumers are expected to progress from Enhanced/Supplemental services program to non-supplemental status and eventually move into a regular board and care or independent living.
- ▶ The 24 Hour staff assess consumers, every 6 months to assess for continued need for supplemental services.
- ▶ At the end of the assessment which includes, a one -to-one meeting with the client, the 24 Hour care staff reading the monthly supplemental logs and a conversation with the clients case manager, a determination is made whether to re-authorize supplemental services or not.



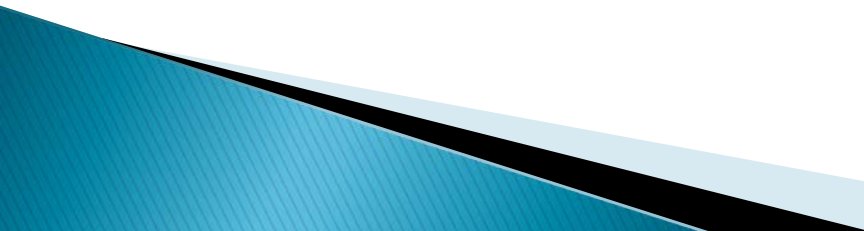
Utilization Process Cont.d

- ▶ If a consumer continues to require supplemental services, this service is authorized for another 6 months.
 - ▶ If a consumer no longer requires supplemental services, the provider and the case manager are provided a 30 day written notice.
 - ▶ The provider will work with the consumer and the case manager on alternative placement options.
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The Role of 24 Hour Care in Enhanced/Supplemental Program

- ▶ The 24 Hour Care staff are responsible for monitoring all the consumers placed in the Supplemental board and care homes.
 - ▶ There currently 216 consumers receiving supplemental services in the board and care homes.
 - ▶ The team performs a review of the homes annually. This review process usually includes the Consumer Affairs program, Case Managers from the various Outpatient Clinics, the adult/older contract monitors and housing services.
 - ▶ The 24 Hour Care managers and the adult division director meet quarterly with Community Care Licensing to discuss issues or concerns regarding board and care homes in Santa Clara County.
 - ▶ The 24 Hour Care team has worked collaboratively with the Consumer Affairs program to set up a resident council
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The Role of 24 Hour Care in Enhanced/Supplemental Program

- ▶ In several of the RCF homes, to offer the consumers an avenue to discuss their concerns with the RCF provider as often as necessary.
 - ▶ The 24 Hour Care Team follows up on any complaint received regarding any one of our contracted homes by performing a site visit
 - ▶ A meeting is held with the supplemental providers quarterly to discuss concerns and to offer the providers support.
 - ▶ Trainings are being designed for the providers to meet the required 20 hours CEU approved by Community Care Licensing (CCL) for B/C administrators
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The Role of 24 Hour Care in Enhanced/Supplemental Program

- ▶ Our Mental health Outpatient medical director, attends the quarterly meetings with the RCF providers to address pertinent issues such as psychotropic medications, Nutrition and other medical related topics.
 - ▶ The 24 Hour care also partners with In-Home support and Adult protective Services to perform site visits on other housing related issues that involves our consumers.
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