



# Update on the Los Angeles County Health Agency

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### **HEALTH AGENCY MISSION**



The mission of the Los Angeles County
Health Agency is to improve health
and wellness across Los Angeles
County through effective, integrated,
comprehensive, culturally appropriate
services, programs, and policies that
promote healthy people living in
healthy communities.

### HEALTH AGENCY STRATEGIC PRIORITIES



- Consumer Access and Experience
- 2. Housing and Supportive Services for Homeless Consumers
- 3. Overcrowding of Psychiatric Emergency Departments
- 4. Cultural Competency and Linguistic Access
- Diversion of Corrections-Involved Individuals to Cempunity-Based Programs and Services
- Expanded Substance Use Disorder Benefit
- 7. Vulnerable Children and Transition Age Youth
- 8. Chronic Disease and Injury Prevention



# CONSUMER ACCESS AND EXPERIENCE

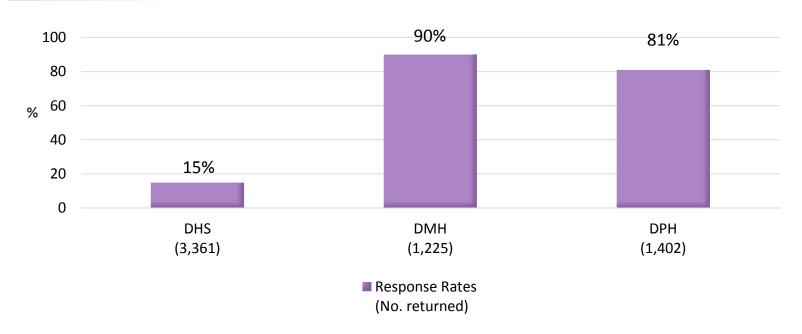
### **CONSUMER FEEDBACK SURVEY**



- DMH's survey was administered at 22 DMH outpatient clinics in October 2016.
- DPH's survey was administered at 14 public health centers in November 2016.
  - ➤ The self-administered surveys were sequentially and systematically offered in a similar manner to both DMH and DPH adult patients.
  - ➤ The only exception was that DMH patients were offered non-monetary incentives to complete the survey
- DHS used the Press Ganey Survey and it was mailed to each adult who received outpatient services from November 2016 to March 2017.

### **SURVEY RESPONSE RATES**





Surveys are available in:

**DHS:** English and Spanish, Chinese (Traditional)

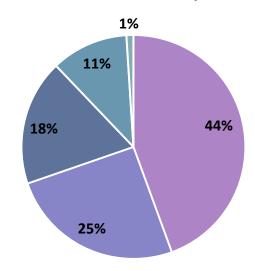
**DMH:** English and Spanish

**DPH:** English, Spanish, Chinese (Traditional), Farsi and Armenian

### **DEMOGRAPHICS**



#### Race/Ethnicity



- Hispanic
- Non-Hispanic White
- African American
- Asian
- Native American or other Pacific Islander

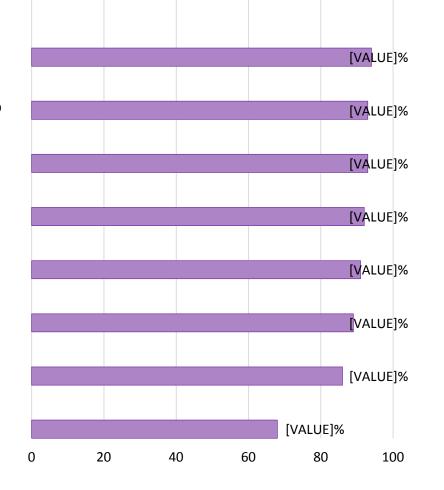
### Of **5,988** total respondents:

- 52% female; 43% male
- 42% between 50-64 years of age
- 59% were high school graduates or higher
- 58% received Medi-Cal
- 13% received Medicare
- 11% had private insurance
- 13% were uninsured
- 12% were homeless at time of survey

## PROVIDER RATING AND PROVIDER COMMUNICATION



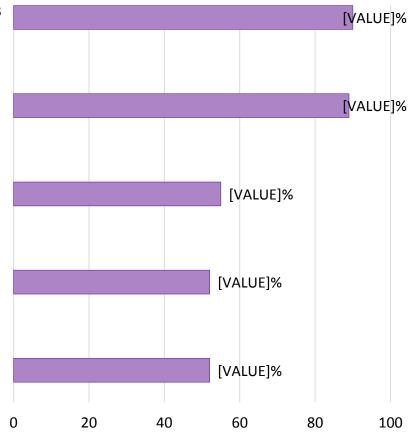
- Listened carefully to the patient
- Explained things in a way that was easy to understand
- Showed respect for what patient had to say
- Spent enough time with patient
- Knew important information about medical history of the patient
- Would recommend their providers office
- Gave easy to understand information to the patient
- Overall Provider Rating



### **ACCESS TO HEALTH CARE**

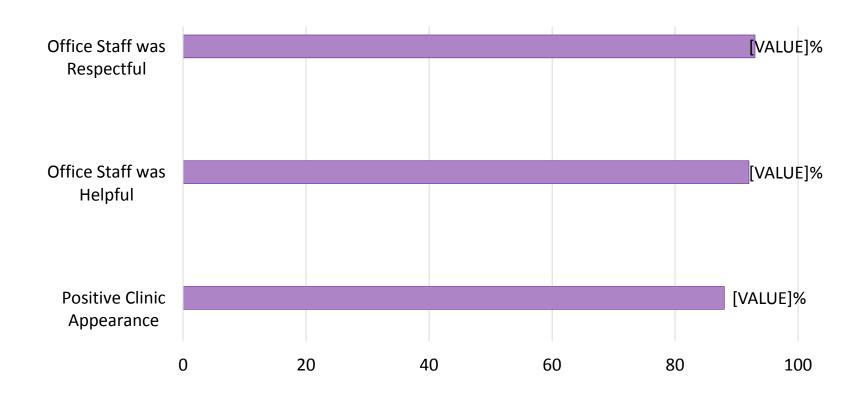


- Were able to get <u>urgent</u> appointments as soon as they thought they needed them
- Were able to get <u>routine</u> appointments as soon as they thought they needed them
- Phoned <u>during regular hours</u> and received an answer to a medical question
- Of respondents reported seeing a provider within 15 minutes
- Phoned <u>after regular hours</u> and received an answer to a medical question



### **CLINIC APPEARANCE AND OFFICE STAFF QUALITY**

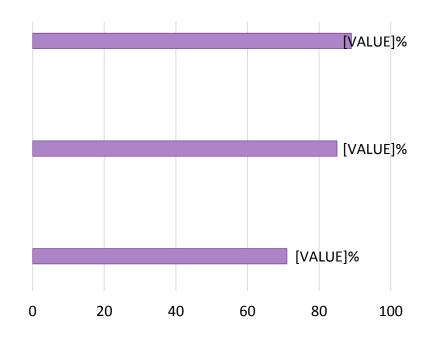




### **CULTURAL AND LINGUISTIC COMPETENCY**



- Services were provided in their preferred language
- Written information was available in their preferred language
- Agreed that staff was sensitive to their cultural background





### **CULTURAL COMPETENCY**

- 1. Screening for REAL (Race, Ethnicity, and Language)-SOGI (sexual orientation/gender identity) built into EHR
  - Commenced training of staff on how to appropriately communicate with patients regarding these sensitive questions
- 2. EHR Patient Portal being modified to include materials in Spanish



# DIVERSION OF CORRECTIONS-INVOLVED INDIVIDUALS TO COMMUNITY-BASED PROGRAMS

### **OVER 1,400 DIVERTED**



- Misdemeanor Incompetent to Stand Trial-Community Based
  Restoration (MIST-CBR): Since October 2015, 590 clients have been
  removed from jail and connected to community based treatment in
  including community outpatient, inpatient, and supportive housing
  programs.
- Office of Diversion and Reentry (ODR) Housing: Since August of 2016, 866 homeless clients with serious mental or substance use disorders have been released to housing from LA County jail.
   Program provides intensive case management services, linkage to mental health and substance use treatment, interim housing, and permanent supportive housing.

### LEVERAGING NON COUNTY DOLLARS



- Launched LA County's first Law Enforcement Assisted Diversion (LEAD)
  program to divert individuals with substance use disorders at the point of
  arrest for drug or prostitute charges. Awarded \$5.9M from the Board of
  State and Community Corrections. 48 individuals have been diverted since
  November 2017.
- Awarded \$20M in Proposition 47 funding from Board of State and Community Corrections to provide supportive services, linkage to mental health and substance use treatment services, and recovery bridge housing to over 1200 individuals.
- Launched LA County's first Pay For Success project to scale ODR work to provide permanent supportive housing to homeless inmates with mental health and substance use disorders. Awarded \$2M from the Board of State and Community Corrections and raised \$10M from private investors.





- Over 2,000 first responders from 48 jurisdictions have received Crisis Intervention Training (CIT) in the last 18 months.
- The total number trained to date as of October 19 is 606.
- The CY17 anticipated total trained patrol personnel is 702.

### **JAIL REENTRY SERVICES**



- The Whole Person Care (WPC) Reentry program aims to enroll 1,000 LA County jail inmates per month who are eligible for Medi-Cal, are high utilizers of health or behavioral health services, and are at high risk due to chronic medical conditions, mental illness, substance use disorders, homelessness, or pregnancy.
- WPC staff conducts a comprehensive assessment covering areas including health, mental health and substance use history, homelessness, education/employment, family and social support.
- Clients are also assigned a WPC Community Health Worker (CHW) in the community, who has a shared lived experience of incarceration.
- Since the program began ramp up in May 2017, 1,461 WPC Reentry clients have been served.



# IMPLEMENTATION OF EXPANDED SUBSTANCE USE DISORDER (SUD) BENEFITS

### DRUG MEDI-CAL ORGANIZED DELIVERY SYSTEM



- Launched on July 1, 2017
- 70 providers are under contract with 210 overall sites
- Methods to facilitate and promote access to SUD services have been developed and implemented:
  - Substance Abuse Service Helpline
  - Service and Bed Availability Tool (SBAT)

### SCREENING, BRIEF INTERVENTION AND REFERRAL TO TREATMENT (SBIRT) TRAINING



- DHS has incorporated SBIRT into its ORCHID workflow and is now focused on training staff on SBIRT to operationalize this new functionality.
- DMH has incorporated SBIRT into its IBHIS workflow and has also trained staff on SBIRT.
- SBIRT services will be tracked beginning January 2018.

### **MEDICATION ASSISTED TREATMENT (MAT)**



- SAPC, DHS, and Safe Med LA have worked together to launch two learning collaboratives focused on Medication-Assisted Treatment (MAT):
  - One for primary care providers; the second for specialty SUD providers.
  - They are focused on expanding the number of MAT programs across the County by building the operational and clinical expertise needed for the programs.
- SAPC is working with the Opioid Treatment Programs that are leading the California Hub and Spoke grant implementation in the County to ensure that these efforts are aligned with the broader MAT expansion efforts across the County.
- The Safe Med LA MAT Action Team has trained over 150 new buprenorphine prescribers in the County.



### **HEALTH AGENCY COLLABORATION**

### **CENTER FOR HEALTH EQUITY**



### Center for Health Equity Initial Launch Event 10/10/17

 First public event introducing the Center to leaders from other County Departments and community organizations

#### **Resident & Community Engagement**

 One listening session in each Supervisorial District being scheduled

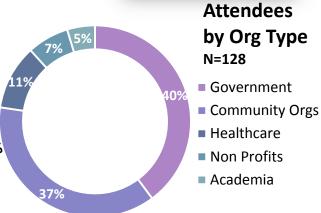
### **Workforce Engagement**

Interactive webinar for each Health Agency department

#### **Summary Report**

 All information collected during listening sessions will be used to finalize the Center's work plan







### **Infant Mortality**



Sexually Transmitted Infections (STIs)

THE CENTER'S KEY FOCUS AREAS



**Environmental Justice** 



**Health Neighborhoods** 



Cultural & Linguistic Competency

### **JUST CULTURE**



- One policy across the Health Agency
- In-person training for all Health Agency staff
- Town Hall Meeting
  - Support from Labor Partners
  - Audio/visual-related technical assistance for satellite sites





### CORRECTIONAL HEALTH SERVICES (CHS)

# CORRECTIONAL HEALTH – SYSTEM ACHIEVEMENTS



- Completed transition from LASD and DMH to DHS in May 2017
- 107 staff hired in past 4 months; 36 new hires pending
- Physicians hired: 4 full time; 4 part-time; 13 relief physicians (in process)
- Nearly 400 hrs./wk. of physician & NP coverage secured in last 3 months
- Expanded 24/7 Urgent Care to open in March 2018
- 47 acute psychiatric beds added near doubling of available acute beds
- Detox Units opened at men's Inmate Reception Center (IRC) and Century Regional Detention Facility (CRDF)
- Olive View & Harbor-UCLA supporting Pitchess & CRDF, respectively
- Continuous Quality Improvement (CQI) unit created
- Cerner jail electronic health record contract transferred to DHS

### CORRECTIONAL HEALTH – PATIENT CARE IMPROVEMENTS



- Mental Health Unit wait time significantly reduced
- 1,300 patients admitted to the new Detox Unit(s) in past 6 months
- 40% fewer incidents of hyper or hypoglycemia among diabetics
- Reduced "Sick Call" wait time from 5 days to less than 2 days
- Many patients receive essential medications in IRC
- Over 300 individuals enrolled in jail Substance Treatment programs
- Over 1,400 patients enrolled into reentry services program (i.e. WPC)







# MISSION POSSIBLE – REBRANDING CHS TO RECRUIT TALENT FOR OUR FUTURE



- CEO Communications team filmed "A day in the life of a jail doctor."
- To create mini-clips and a documentary about correctional health
- Used for recruitment visits and CHS website/social media postings
- Coupled with attractive salary and incentives loan repayment, relocation support, signing bonuses – we hope to show that CHS is a wonderful place for doctors to make a difference and serve
- Goal is to hire new primary care physicians for the Correctional Health Neighborhood implementation to start over the next 10 months