

NOTES FROM THE ADMHS BIDDERS' CONFERENCE

Santa Maria Crisis Residential Facility

December 8, 2004

Santa Maria Inn

PRESENTERS

1. James Broderick, Ph.D., ADMHS Director
2. Jeffrey Davis, D.O., ADMHS Medical Director
3. Heidi Garcia, MFT, ADMHS Asst. Director, Programs
4. Laura Mancuso, MS, CRC, ADMHS Project Manager
5. Dana Fahey, ADMHS Contracts Manager
6. Rob Walton, RN, MPA, ADMHS QA/UR/Access Manager

ATTENDEES

1. Peter Hacker, Horizon Health
2. Cynthia McCoy, Telecare Corp.
3. Chitu Patel, PharmD, Mental Health Commission
4. Bill Batty, Family Service Agency
5. Jeanie Sleigh, Community Action Commission
6. David Scott, Community Action Commission
7. Matt Hamlin, Coast Valley (SATC) Treatment Center
8. Ross Peterson, CEO, Telecare Corp.

NOTES

Welcome & Introduction

Dr. Broderick welcomed all and gave an introduction to this project that has developed from an initiative to transform the ADMHS system through Proposition 63. ADMHS is seeking a close partnership with community providers to avoid hospitalization when possible to resolve client and family issues. The vision for this project is integration of Mental Health and Alcohol Drug services to avoid referral out of the county or incarceration.

Overview of CARES Initiatives

Ms. Mancuso gave a brief overview of what is being done.

1. ADMHS is in the process of selecting a Crisis Services Program Manager who will oversee all aspects of our crisis services, and serve as the central point of contact for the CRF providers.
2. ADMHS has contracted with San Luis Obispo County to easily refer North county clients who require hospitalization to their PHF.
3. Assignment of 3,0 FTE ADMHS crisis services workers at Marian Medical Center. These persons will be dually competent in helping people with addiction, mental illness, or co-occurring disorders.

4. Development of a collocated Crisis Intervention Center and a Crisis Residential Center near Marian Medical Center.
5. Creation of a regional psychiatric inpatient unit (long-term) in partnership with SLO County, Horizon Health, and Marian.

The Crisis Intervention Center will provide round-the-clock assessment for all ages; serve as the hub for crisis services in North County; and will be the source of referral to the Crisis Residential Facility.

The Crisis Residential Center will be a 12-bed, adults only center.

Questions and Answers on the RFP

Q: Unable to download the RFP.

A: ADMHS will look into this problem and resolve it.

Q. Has ADMHS allocated funds for the building or for the services?

A. ADMHS has allocated funds for the building and for the services (RFP).

Q. Should applicants exclude the cost of facility in their proposed budgets?

A. Yes. Applicants should not include the cost of facility rental. ADMHS will provide initial furniture and fixtures. The applicants should budget for maintenance of furniture and fixtures over time (e.g., replacement as needed).

Q. Should applicants include the cost of utilities in their budgets?

A. Yes. Further, they should also include computers for their staff in their proposed budgets.

Q. In reference to the detox beds being available, is Good Sam the only facility offering social model detox in Santa Maria?

A. Yes, that is our understanding.

Q: Comment re: list of community agencies on page 8...Suggest addition of "211" entity (Family Service Agency), which should be available in July 05 or January 06.

A: OK.

Q: Comment re: list of community agencies on page 9...Suggest adding Family Service Agency as an ADP Provider (part of collaborative providing Big Brother/Big Sister program in Lompoc). Also, under Children's Mental Health, Family Service Agency provides intensive in-home and in-school programs.

A: OK.

Q. On page 8, it says that "on a case-by-case basis, people with a history of, or facing charges of, violent crime or sexual predation" or those "with infectious disease, contagious conditions, acute medical needs, or substantial medical needs" may be excluded from the CRF. Who will make those assessments/those decisions? The Crisis Intervention Center staff, or the CRF staff?

A. These decisions will be made collaboratively between the Crisis Intervention Center and the Crisis Residential Facility staff.

Q: If the CRF is to serve people who have drug and alcohol problems, but no mental illness diagnosis, it will need to be certified by ADP, will it not?

A: Yes, we agree. In addition to the certifications listed, the applicant will need to obtain Program Certification from the State Alcohol & Drug Program.

Q. Has ADMHS already identified a particular format for data collection?

A. No. This will be worked out collaboratively between ADMHS and the provider.

Q. For purposes of budgeting, what % of clients do you expect will not have MediCal (e.g., budgeting for cost of prescription medications)?

A. Typically, about 70% of our clients in Santa Maria have MediCal. However, the applicant should make their own estimate and indicate this in their application.

Q. How will the CRF provide physical health services to people who do not have MediCal?

A. Simple medical situations will probably be handled by the medical/nursing staff at the CRF. The CRF will need to assess the seriousness of primary medical problems. The Public Health Department has a Clinic in Santa Maria that serves people who are indigent, with or without MediCal. Also, we expect the provider to develop a close working relationship with Marian Medical Center re: medical services.

Q. Should the applicant budget for medications for 5 to 10 days, or for 30 days?

A. The applicant should decide and indicate this in their proposal.

Q. Will there be close association with outpatient services?

A. Yes. The provider will need to work closely with outpatient services. The Crisis Service Manager will assist with this.

Q. Could an applicant propose to share the services of a psychiatrist with the ADMHS Crisis Intervention Center?

A. Yes, such a proposal would be welcomed.

Q. ADMHS is providing the facility. When will the facility will be ready? What opening date should we use in preparing a timeline for our program?

A. Our best estimate at this time is that the facility will be ready to be open in September 2005 (subject to change). Develop you plans using that date. Because that date may change, and for ease in preparing the applications, we are requesting applicants to submit a 12-month operating budget for FY 05/06.

Q. The RFP indicates that DMH requires a 1:1.6 staff to client ratio in short-term crisis residential facilities. Hoe does that apply to the various shifts?

A. The DMH staff ratio applies to the entire 24-hour period. The applicant should allocate staff on each shift as needed.

Q. Should applicants budget for local transportation? Sometimes providers spend a lot of time and money transporting clients to/from facilities.

A. Yes, the applicant should budget for all program needs, including local transportation. This will be particularly important in discharge planning and disposition. Keep in mind that all referrals will come from the Crisis Intervention Center.

Q. It is requested that applicants provide a 5% match (cash or in-kind). Can you say more about that?

A. Yes. In addition to the funding request from ADMHS, applicants are expected to contribute a 5% match to the program, either in cash or in-kind.

Closing Comments

Please contact Carrie Topliffe with any questions at 681-4092 or by email at ctopliffe@co.santa-barbara.ca.us. This contact information can also be found on the front page of the RFP.

All questions and answers, if any, will be posted on the web site each Wednesday. The link is: www.countyofsb.org/ADMHS. Click on C.A.R.E.S. Projects.

Attendees were thanked for their participation in what will be a renaissance in our system of care.

Laura Mancuso and the ADMHS staff were thanked for putting together the RFP.