



County of Orange

County Executive Office

August 25, 2015

Honorable Glenda Sanders
Presiding Judge of the Superior Court of California
700 Civic Center Drive West
Santa Ana, CA 92701

Subject: Response to Grand Jury Report, "The Mental Illness Revolving Door: A Problem for Police, Hospitals, and the Health Care Agency"

Dear Judge Sanders:

Per your request, and in accordance with Penal Code 933, please find the County of Orange response to the subject report as approved by the Board of Supervisors. The respondents are the Orange County Board of Supervisors and the Health Care Agency.

If you have any questions, please contact Jessica O'Hare of the County Executive Office at 714-834-7250.

Sincerely,

Frank Kim
County Executive Officer

Enclosure

cc: FY 2014-15 Orange County Grand Jury Foreman
Mark Denny, Chief Operating Officer, County Executive Office
Jessica O'Hare, Assistant to the COO, County Executive Office
Mark Refowitz, Health Care Agency



Responses to Findings and Recommendations
2014-15 Grand Jury Report:

“The Mental Illness Revolving Door: A Problem for Police, Hospitals, and the Health Care Agency”

SUMMARY RESPONSE STATEMENT:

On June 30, 2015, the Grand Jury released a report entitled: “The Mental Illness Revolving Door: A Problem for Police, Hospitals, and the Health Care Agency.” This report directed responses to the Orange County Board of Supervisors and the OC Health Care Agency. Below is the combined County response.

FINDINGS AND RESPONSES:

F.3. Orange County’s Centralized Assessment Team is inadequate in that it takes too long for them to respond to the scene to assist police officers in their evaluations of the mentally ill.

Response: Disagrees wholly with the finding.

The Orange County Centralized Assessment Team response time is not inadequate. The response time goal is to respond to the scene to assist police officers and provide an evaluation within 30 minutes. This goal has been met on 83% of calls received.

F.4. Orange County’s mental illness triage system is inadequate in that there are no field screening protocols that would allow medical clearance in the field by law enforcement personnel or paramedics.

Response: Disagrees wholly with the finding.

Orange County’s mental illness triage system is not inadequate. Current Orange County EMS Agency policies and procedures already provide medical direction for triage and transport of patients to appropriate receiving facilities. However, law

enforcement personnel are outside the jurisdiction of the Health Care Agency (HCA).

F.5. Orange County's mental illness triage system is inadequate in that the police agencies either do not have a triage desk to advise and assist officers in the field or do not have psychiatric crisis mobile response teams at their disposal.

Response: Disagrees wholly with the finding.

Orange County's mental illness triage system is not inadequate. For every police agency that has requested to have a Psychiatric Emergency Response Team (PERT) assigned to their agency, it has been implemented. Police agencies have the ability to contact the Centralized Assessment Team (CAT) or the Evaluation and Treatment Services (ETS), 24/7 for consultation or to request for a clinician to respond to the scene.

F.6. Orange County's Psychiatric Evaluation and Response Team clinicians are insufficient in number to meet the needs of police agencies in Orange County.

Response: Disagrees wholly with the finding.

Orange County's Psychiatric Evaluation and Response Team (PERT) clinicians are not insufficient in number. For every police agency that has requested a PERT assigned to their agency, it has been implemented. Police agencies have the ability to contact the CAT or the ETS, 24/7 for consultation or to request for a clinician to respond to the scene.

F.7. Orange County's Evaluation and Treatment Services facility is inadequate in that its capacity is insufficient to permit police officers to take all the mentally ill to it and drop them off at the facility, instead of transporting the patient to a hospital emergency room.

Response: Disagrees wholly with the finding.

Orange County's Evaluation and Treatment Services (ETS) is not inadequate in its capacity to permit police officers to take mentally ill individuals directly to the facility. ETS has sufficient capacity for police officer drop offs. Police directly take clients to the ETS, the only persons police are not able to directly take to ETS are those requiring medical clearance at a hospital emergency department.

F.8. Orange County's Evaluation and Treatment Service facility is inadequate in that the County does not permit medical triage or medical clearance in the field, and therefore directs police officers to obtain medical screening for even minor health conditions that could easily be treated at the facility.

Response: Disagrees wholly with the finding.

Orange County's ETS is not inadequate in its permission of medical triage or clearance in the field. Police officers do have the ability to take those with minor health conditions to the ETS. Although there currently is not a process to allow field medical triage or clearance by police officers, law enforcement personnel are outside the jurisdiction of HCA.

F.9. Orange County's Evaluation and Treatment Service facility is inadequate in that it directs police officers to take the mentally ill who may be under the influence of alcohol or drugs to a hospital emergency room rather than to a psychiatric emergency facility.

Response: Disagrees wholly with the finding.

Orange County's ETS is not inadequate in directing police officers to take individuals who may be under the influence of drugs or alcohol to a hospital emergency room. ETS is able to take individuals with a lower (≤ 0.15) blood alcohol level and this direction has been shared with law enforcement. Those individuals who have additional medical conditions are referred to an emergency room.

F.10. Orange County's crisis intervention system is inadequate in that there is only one Evaluation and Treatment Service facility for the entire County.

Response: Disagrees wholly with the finding.

Orange County's crisis intervention system is not inadequate. ETS is only one element of the crisis intervention system. There are many other crisis intervention programs that are currently in place or being developed, such as CAT, PERT, crisis residential, and in home crisis stabilization programs. The Agency is in active discussions with the community, other Counties, and the Hospital Association of Southern California on expanding psychiatric emergency services.

F.11. The County's crisis intervention system is inadequate in that it does not provide strategically located, stand-alone, drop-off psychiatric emergency stabilization facilities with medical treatment capability at convenient locations throughout the County.

Response: Disagrees wholly with the finding.

Orange County's crisis intervention system is not inadequate. The Health Care Agency is in active discussions with the community, other Counties, and the Hospital Association of Southern California on expanding psychiatric emergency services.

F.12. The County's crisis intervention system is inadequate in that there is no real-time, empty-bed registry to enable officers and clinicians in the field to

determine bed-availability at the Evaluation and Treatment Service facility and at designated hospitals.

Response: Disagrees wholly with the finding.

Orange County's crisis intervention system is not inadequate. The Health Care Agency (HCA) does not have information on psychiatric bed availability to implement an empty-bed registry. Only the hospitals have access to this information that would need to be entered into a registry, possibly through ReddiNET. To implement a process for officers and clinicians to review this registry, access would be required, potentially through subscriptions (i.e., ReddiNET, which is owned by HASC).

F.13. The County's crisis intervention system is inadequate in that there is no 5150, case management, and conservatorship database in place to assist officers and clinicians in the field to triage the mentally ill who do not qualify for a 5150 hold.

Response: Disagrees wholly with the finding.

Orange County's crisis intervention system is not inadequate. HCA clinicians do have access to the HCA client information system and are able to utilize this information as appropriate. A database for conservatorship would need to be established by the State court system and is therefore outside of the County's jurisdiction. It is not legal to establish a database with personal health information on individuals being evaluated for a 5150 for officers because of the Health Insurance Portability and Accountability Act of 1996 (HIPAA; Pub.L. 104-191, 110 Stat. 1936, enacted August 21, 1996).

F.14. The Health Care Agency has not established benchmarks and a complete performance-measurement system with which to track the success and cost effectiveness of Laura's law, as directed by the Board of Supervisors in May 2014.

Response: Disagrees wholly with the finding.

The Health Care Agency has established benchmarks and performance measures for Laura's Law. Specific data to collect and specific performance outcomes have been identified to track the effectiveness of the Laura's Law program. A solicitation has been released for an outside independent evaluation of the program as directed by the Board of Supervisors and negotiations are currently in progress.

RECOMMENDATIONS AND RESPONSES:

R3. Orange County's Centralized Assessment Team's response time should be improved significantly with a goal of eventually reducing its maximum response time to less than 20 minutes. (F.3.)

Response: The recommendation will not be implemented because it is not warranted or is not reasonable.

The Centralized Assessment Team's goal is to respond to the scene and provide an evaluation within 30 minutes. This goal has been met on 83% of calls received. Establishing a goal of 20 minutes is not warranted.

R4. The Orange County Health Care Agency should adopt field screening protocols to allow (a) medical clearance in the field by law enforcement personnel and/or paramedics; and (b) transport by paramedics rather than police officers. (F.4.)

Response: The recommendation will not be implemented because it is not warranted or is not reasonable.

Current Orange County EMS Agency policies and procedures already provide medical direction for triage and transport of patients to appropriate receiving facilities. Law enforcement personnel are outside the jurisdiction of HCA.

R5. All law enforcement agencies should either have a psychiatric triage desk to advise and assist officers in the field or a psychiatric crisis mobile response team. (F.5.)

Response: The recommendation has been implemented.

All law enforcement agencies have the ability to contact the CAT, or the ETS, 24/7 for consultation or to request for a clinician to respond to the scene. For every police agency that has requested to have a PERT assigned to their agency, it has been implemented.

R6. The Orange County Psychiatric Evaluation and Response Team staff should be increased significantly so that an embedded clinician can be placed with each law enforcement agency and can provide service 24/7 if requested. (F.6.)

Response: The recommendation will not be implemented because it is not warranted or is not reasonable.

For every law enforcement agency that has requested to have a PERT assigned to their agency, it has been implemented. It is not feasible or warranted to have a clinician embedded with each department 24/7. All law enforcement agencies have access to the CAT 24/7, which will be dispatched to the scene as requested.

R7. Orange County's Evaluation and Treatment Services facilities should be expanded to easily accommodate all 5150 walk-ins and all 5150s dropped off by police, paramedic, or ambulance. (F.7.)

Response: The recommendation will not be implemented because it is not warranted or is not reasonable.

It is not reasonable to have all potential 5150 evaluations for either walk-in clients and/or for those dropped off by police, paramedic, or ambulance at the County's ETS. ETS is neither a hospital emergency room nor does it operate under the license of an acute care hospital and therefore, is unable to accept those individuals needing medical clearance.

R8. Orange County Evaluation and Treatment Services should acquire the capability of conducting limited medical screening for minor health problems and cease from directing police officers to obtain medical screening for 5150s with minor health conditions that could easily be treated at Evaluation and Treatment Services facilities. (F.8.)

Response: The recommendation has been implemented.

Orange County's ETS does have the capability of conducting medical screening and does not direct police officers to obtain medical screening for those individuals. Consistent with the written ETS Medical Guidelines, ETS accepts clients that have medical co-morbidities that are not acute in nature and that will not pose a threat to their safety or interfere with emergency psychiatric treatment. It is a standard hospital requirement that clients obtain medical clearance prior to admission to inpatient psychiatric units by designated psychiatric hospitals. ETS is not a licensed acute care hospital nor does it operate under the license of an acute care hospital.

R9. Orange County's Evaluation and Treatment Services facilities should acquire the capability of handling 5150s who may have ingested alcohol or drugs, but who are not under the influence to such an extent that it inhibits stabilization or requires medical clearance at a hospital. (F.9.)

Response: The recommendation has been implemented.

Orange County's ETS does have the capability of handling 5150s who may have ingested alcohol or drugs. Consistent with the written ETS Medical Guidelines, ETS accepts clients who have used alcohol and/or drugs and do not require medical treatment and/or detoxification. The blood alcohol level acceptable for ETS admission is 0.15, which is nearly twice the legal limit. Chart monitoring activities for the last 12 months reveal 66% of admitted clients had positive urine drug screens and/or were positive for alcohol use.

R10. The Orange County Health Care Agency's crisis intervention system should be expanded so as to provide a minimum of four Psychiatric Emergency Service facilities—one in South County, one in Central County, one in West County, and one in North County. (F.10.)

Response: The recommendation will not be implemented because it is not warranted or is not reasonable.

The Agency is in active discussions with the community, other Counties, and the Hospital Association of Southern California to expand the crisis intervention system and to potentially establish a Psychiatric Emergency Services (PES). It has not yet been determined by a thorough analysis how many facilities will be needed. Such analysis cannot reasonably be accomplished within six months as establishment of one PES needs to be completed prior to determining the County's additional unmet needs. Per the Grand Jury response guidelines, those items requiring more than six months to analyze are deemed not warranted or reasonable.

R11. The County's Health Care Agency should provide strategically located, stand-alone, drop-off psychiatric emergency stabilization facilities with medical treatment capability at convenient locations throughout the County. (F.11.)

Response: The recommendation will not be implemented because it is not warranted or is not reasonable.

The Agency is in active discussions with the community, other Counties, and the Hospital Association of Southern California to expand the crisis intervention system and to potentially establish a Psychiatric Emergency Services (PES). It has not yet been determined by a thorough analysis how many facilities will be needed. Such analysis cannot reasonably be accomplished within six months as establishment of one PES needs to be completed prior to determining the County's additional unmet needs. Per the Grand Jury response guidelines, those items requiring more than six months to analyze are deemed not warranted or reasonable.

R12. The County's Health Care Agency should provide a real-time, empty-bed registry to enable officers and clinicians in the field to determine immediately and accurately the current bed availability at Evaluation and Treatment Services facilities and at designated hospitals. (F.12.)

Response: The recommendation will not be implemented because it is not warranted or is not reasonable.

The Health Care Agency (HCA) does not have information on psychiatric bed availability to implement an empty-bed registry. Only the hospitals have access to this information that would need to be entered into a registry, possibly through ReddiNET. To implement a process for officers and clinicians to review this

registry, access would be required, potentially through subscriptions (i.e., ReddiNET, which is owned by HASC).

R13. The County's Health Care Agency should create and maintain a 5150, case management, and conservatorship database in place to assist officers and clinicians in the field to triage the mentally ill in the field who do not qualify for a 5150 hold, but who may qualify for Laura's Law. (F.13.)

Response: The recommendation will not be implemented because it is not warranted or is not reasonable.

HCA clinicians do have access to the HCA client information system and are able to utilize this information as appropriate. A database for conservatorship would need to be established by the State court system and is therefore outside of the County's jurisdiction. It is not legal to establish a database with personal health information on individuals being evaluated for a 5150 for officers because of the Health Insurance Portability and Accountability Act of 1996 (HIPAA; Pub.L. 104-191, 110 Stat. 1936, enacted August 21, 1996).

R14. The Health Care Agency should establish benchmarks and a complete performance-measurement system with which to track the success and cost effectiveness of Laura's law, as directed by the Board of Supervisors in May 2014.

Response: The recommendation has been implemented.

The Health Care Agency has established benchmarks and performance measure for Laura's Law. Specific data to collect and specific performance outcomes have been identified to track the effectiveness of the Laura's Law program. A solicitation has been released for an outside independent evaluation of the program as directed by the Board of Supervisors and negotiations are currently in progress.