



County of Orange
California

Thomas G. Mauk
County Executive Officer

August 3, 2005

Bette Flick, Foreperson
FY 05/06 Grand Jury
Superior Court of California
700 Civic Center Drive West
Santa Ana, CA 92702

Subject: Response to Orange County Grand Jury Report, "Substance
Exposed Babies – Potentially, a Lifetime of Public Support"

Dear Ms. Flick:

Per your request, and in accordance with Penal Code 993, enclosed please find the County of Orange response to the subject report as approved by the Board of Supervisors. If you have any questions, please contact Brian Wayt at (714) 834-4104 in the County Executive Office who will either assist you or direct you to the appropriate individual.

Very truly yours,

A handwritten signature in black ink, appearing to read "T. G. Mauk", is written over a horizontal line.

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County Executive Officer

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2004-2005 Grand Jury Report
“Substance Exposed Babies – Potentially a Lifetime of Support”
Response to Findings and Recommendations

Response to Findings 7.1 – 7.5:

- 7.1 The grand jury could not find an overall coordinated effort to ensure that referrals are made and services are provided to pregnant women. Although public and private programs are directed toward the same goal, an organized, collaborative effort was not evident.

Response: Agrees with the finding

- 7.2 Orange County agencies use 13-year-old prevalence rate data (1992) for planning and allocation of prenatal and perinatal resources. The applicability of the prevalence data is now questionable because of changed prevalence rates, changed demographics, and changed substances of choice.

Response: Disagrees partially with the finding

It is agreed that a major statewide study like the one conducted in 1992 has not been conducted recently and that there may have been significant changes in the past 13 years. However, other useful and more current data are available to the Orange County Health Care Agency (HCA) and other interested organizations to assist in planning and resource allocation. This includes information on the numbers, types and sources of referrals for current service providers; information compiled by the Assessment and Coordination Team (ACT) on the drugs of choice for the program's referred pregnant clients; the birth and death data that are compiled and analyzed annually by HCA Public Health Services; hospitalization data available from the Office of Statewide Health Planning and Development; a 2002 Health Care Agency survey of Alcohol, Tobacco and Other Drug Use Prevalence among adults; and information from the California Alcohol and Drug Data System that identifies the “substance of choice” for individuals, including pregnant women, admitted into publicly funded treatment programs in Orange County.

- 7.3 The prenatal and perinatal staff and resources are insufficient for current caseloads and referrals. Therefore, many substance-using mothers go unattended.

Response: Disagrees with the finding

HCA: It is agreed that the current need for perinatal substance abuse services is extremely challenging for the Public Health Nurses of the Assessment and Coordination Team (ACT), as well as the treatment programs coordinated through

HCA Behavioral Health Alcohol and Drug Abuse Services. Growth in demand for services will require continued assessment of available resources.

We do not agree that “many substance using mothers go unattended.” The nurses of the ACT program do not refuse any referrals and provide services to anyone requesting assistance. The outpatient perinatal substance abuse treatment programs are able to offer services without a waiting period. Although there are waiting lists for perinatal residential substance abuse treatment programs, which may temporarily delay treatment, interim services are provided immediately to anyone on the waiting list for more than 14 days. These interim services include both counseling and education, and in the case of pregnant women, referral for prenatal care.

SSA: SSA social workers currently respond and provide services in accordance with the Welfare and Institution Code (WIC) and State program mandates regarding child protective services. Current resources are sufficiently allocated to address prenatal and perinatal issues associated with children and families referred and served by SSA.

- 7.4 For its 18 communities, south Orange County has only one county healthcare facility serving substance abusing pregnant women. Compounding the problem, public transportation to north county healthcare providers is lengthy, inconvenient, and tiring.

Response: Agrees with finding

- 7.5 The HCA and SSA websites are difficult to navigate. The sites are agency-oriented, not services-oriented.

Response: Disagrees partially with the finding

HCA: It is agreed that the sheer size of HCA’s website and the number of programs and services listed can be a navigation challenge for the public. In addition, we recognize that any website can be improved and that website design is constantly evolving.

However, the HCA website has always been intended to be services-oriented. For example, a Services Directory is displayed on the HCA home page and includes an alphabetical listing of all services provided by the Agency regardless of the organizational placement. In addition, HCA’s home page includes a Search function that allows users to target their area of interest.

SSA: The SSA website is designed to accommodate all consumers, including clients, organizations, intergovernmental associates, staff, and the public. Services, resources, and contact information are clearly posted at the following

Universal Resource Location (URL): <http://www.ssa.ocgov.com>. Major headings include a) *Agency Services*, b) *Frequently Asked Questions* and, c) *Contact Us*.

Nevertheless, the SSA is interested in ongoing quality improvements to services, including website access, navigation, and postings. Therefore, the SSA's Internet Development Committee will evaluate and implement services-oriented enhancements to the SSA's website by January 15, 2006. This may include publishing additional links from the SSA's website such as the Health Care Agency (HCA) for consumers seeking pre-and-perinatal services and information and other websites that provide additional service specific information.

Response to Recommendations 8.1 - 8.5:

- 8.1 Recommend HCA initiate and support an ongoing steering committee to direct the focus and activities and promote collaboration of all agencies, departments, and contract firms to the same goal.

Response: The recommendation has been not yet been implemented, but will be implemented in the future.

By January 15, 2006, a Steering Committee modeled after the Grand Jury's recommended membership structure will be established and will begin meeting to provide direction to Agency efforts and promote collaboration between the public and private sectors.

- 8.2 Recommend Orange County design, develop, and undertake a new prevalence study headed by HCA and supported by active participation from the recommended steering committee.

Response: The recommendation has been not yet been implemented, but will be implemented in the future.

By June 1, 2006, a new prevalence study will be designed and cost estimates developed for presentation to the Steering Committee and other appropriate individuals and organizations for review and consideration.

Implementing a new comprehensive prevalence study will be contingent upon securing needed funding. The Children and Families Commission of Orange County has expressed an interest in partnering with the Health Care Agency to pursue the possibility of repeating the study. Participation and support will be sought from other agencies and organizations.

- 8.3 Recommend the county increase prenatal and perinatal staffing and resources for the Orange County Health Care Agency and the Orange County Social Services Agency.

HCA Response: The recommendation will not be implemented because it is not warranted

For the past several years, Orange County has faced significant financial challenges. These challenges include, but are not limited to, uncertainty about revenues due from the State of California, which has faced its own continuing budget crisis. These financial circumstances have made it extremely difficult to consider program expansions and, in fact, many programs have faced reductions or elimination. The County's budget situation appears to be stabilizing but there is still uncertainty about the future of State funding, with the possibility looming of a State-spending cap that could result in withholding funds from local governments.

We believe that it is essential that the Grand Jury's recommendation for a Steering Committee be implemented to provide coordination and direction to an overall approach to meeting the needs of substance using pregnant women in Orange County. Essential to this process will be the information that would be gained from a new prevalence study to provide accurate information about the current nature of the problem. Once the committee has been formed and the study conducted, the County will be in a better position to evaluate needs and develop a plan to organize a coordinated public-private approach to address this important issue.

Until such time as resources become available for a sustained, long-term approach to meeting the needs of substance using mothers, the County will attempt to supplement its existing programs through targeted grants. Current examples of this effort include:

A two-year grant from the Children and Families Commission of Orange County that provides funding through June 2006 for one Senior Public Health Nurse serving with the Assessment and Coordination Team (ACT).

A Dependency Drug Court program funded through December 2005 that serves 90 substance-abusing parents of children in the child welfare system, primarily the parents of substance exposed infants. These parents receive Behavioral Health Services through the existing perinatal programs or outpatient clinics.

A grant application pending with the Federal Substance Abuse and Mental Health Services Administration to provide substance abuse treatment for 60 mothers of substance exposed infants beginning in January 2006.

SSA Response: The recommendation has been implemented

Current resources are sufficiently allocated to address prenatal and perinatal issues associated with children and families referred and served by SSA.

- 8.4 Recommend the county consider providing healthcare facilities for substance-using pregnant women in south Orange County.

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

The Health Care Agency has four sites at which perinatal substance abuse treatment programs are currently offered. These sites are located geographically in the north, south, east and west regions of the County. It is not reasonable to expand service locations in South Orange County at this time due to the limited financial resources available, the need to allow time for the establishment of the recommended Steering Committee, and the need to conduct a new prevalence study.

- 8.5 Recommend HCA and SSA design websites that are client friendly by listing services, rather than organization.

Response: The recommendation has been not yet been implemented, but will be implemented in the future.

HCA: By April 1, 2006, improvements will be implemented to the HCA website to make the site more "client-friendly" including making the available Services Directory and Search feature more prominent.

SSA: SSA is evaluating measures for enhancing the client friendliness of the website and assessing the ability for additional links to be included for consumers seeking pre-and-perinatal services and information and other service specific information. Services-oriented enhancements to the SSA's website should be completed by January 15, 2006.