

Safety Net Workgroup Update June 23, 2020

Purpose/Overview:

The purpose of the Safety Net Workgroup is to discuss and make recommendations to improve the continuum of safety net and/or crisis services developed statewide. Discussions of this workgroup will include assessment of the progress made to creating a safety net, identifying areas for evaluation, recommendations from the stakeholder community, and considerations of new models of care for individuals whom private sector vendors cannot, or will not, serve.

Meeting date(s): December 12, 2019; July 1, 2020

Discussion items:

- Safety Net Plans (Overviews & Input)
- Safety Net Development Updates
- Brainstorm Preventive Strategies
- Recommendations for Future Focus Areas
- Safety Net Response to COVID-19/COVID-19 Data
 - State Operated Acute Crisis Services
- Institutes for Mental Disease (IMD) Transitions
- Transitions from the Secure Treatment Program at Porterville DC
- Intensive Wrap-Around Services
- Medical Safety Net
- Identifying Trends in Special Incident Reporting (SIR) Data

Recommendations/Input on priorities:

- Early identification and interventions are critical
 - Educate parents, pediatricians, first responders, DSP's early childhood educators on resources, how to access safety net services
- Increase the number of specialized providers:
 - BCBA's, speech therapists, LMFTs, psychiatrists, OT, PT, etc.
- Focus on prevention and de-escalation:
 - Enhanced behavioral day services
 - Discharge assessments
 - Transition to fully community-based day programming
 - Appropriate future person-centered planning
 - Mental health and medical assessment
- Increased employment opportunities/supports, coordination with DOR
- Knowledgeable, trained staff at necessary levels/ratios
 - Including available "substitute" staff
 - Provide adequate wages & identify ways to limit staff turnover
 - Build capacity of DSPs
 - Educate Service Coordinators on options
 - Explore a shareable menu of available crisis services, too much regional variability
- Continuity of care and collaboration, especially between settings/for transitions
- Identification/defining of crisis trends
 - How to develop services around different types of crisis or transitions
- Mobile crisis services need to be more accessible, more in-person vs. via phone, and provide training for staff, families, others involved

- Look for innovative ideas from similar fields:
 - Substance use disorder treatment, homelessness, mental health