

A3 Contra Costa Community Crisis Initiative: \$5,000,000 (One-time) and \$20,000,000 (On-going)

The A3 Contra Costa Community Crisis Initiative, designed by Contra Costa Health Services, City Managers, and a consortium of community partners including individuals with lived experience, family members, law enforcement, fire and emergency medical responders, and community-based organizations, is requesting funding from the Board of Supervisors to implement the model of providing appropriate behavioral health crisis services in Contra Costa County for anyone, anywhere, anytime.

The components for which we are requesting funding include the Miles Hall Crisis Call Center, the Mobile Crisis Teams across the entire county, and a designated Crisis Services location with expanded services to address and prevent crises.

Contra Costa Health Services and members of the improvement and design teams request consideration of a one-time funding allocation of \$5 million and on-going support in the amount of \$20 million.

1. The one-time request of \$5 million will provide the needed initial infrastructure for this project including:
 - Physical location renovation, upgrade and furnishings;
 - Technological equipment required to run a state-of-the-art call center;
 - Vehicles to support the mobile crisis teams; and
 - Information technology such as modification of the electronic health record for triage and documentation to support billing, purchase and implementation of dispatching and communication software for the call center and mobile teams as well as network and system integration with 911 systems across the county.

2. On-going funding of \$20,000,000 requested to begin immediately will support a robust array of services, being deployed in new and unique ways, to our community including:
 - Miles Hall Crisis Call Center staffing to include medical and psychiatric oversight, administrative and project management support and licensed and peer staff to answer the calls and triage and dispatch mobile crisis teams;
 - Mobile crisis teams that are stationed and available 24 hours a day, 7 days a week across the county with flexible staffing to meet the needs of the community;
 - Development of additional community crisis services as alternate destinations to emergency rooms, psychiatric emergency services and detention facilities that provide multi-disciplinary medical and psychiatric support;
 - Expanded outreach and education across the county of existing and new crisis and behavioral health resources; and
 - On-going administration, program support, infrastructure maintenance and quality improvement activities for the entire A3 Community Crisis Initiative.

With this funding, Contra Costa Health Services will be able to utilize existing and new revenue sources at the state and federal levels for crisis services, thereby leveraging the dollars provided by Measure X. There are also other local revenue possibilities as we understand and measure the impact of the A3

Community Crisis Initiative on reducing the demand on other local government services such as law enforcement, emergency medical services and 911 dispatch centers. Finally, we envision the A3 Initiative as partnering and contracting with hospital and health systems and health insurers across Contra Costa to serve ALL Contra Costa residents as the requirement to provide parity for behavioral health services becomes the reality for our community.

Background

When someone faces a crisis – a fire, crime, or medical emergency – they call 911 with the expectation of getting immediate emergency services. However, when that emergency is a behavioral health crisis, there is no appropriate, reliable, and comprehensive response system. Without a dedicated and fully funded response system, individuals and families in the midst of a mental health or substance abuse crisis are left without necessary support at critical moments in their lives. Impacts of these crises on individuals is sometimes felt on the entire Contra Costa community.

The Contra Costa A3 Community Crisis Initiative seeks to:

- Create the conditions for wellness and provide for the safety of individuals who are most in need of critical mental health and substance use services;
- Enhance community safety and well-being through culturally sensitive therapeutic response;
- Address the identified community need of alternate destinations for people in crisis;
- Provide a new level of care for those seeking behavioral health services;
- Expand the current limited system to a comprehensive crisis response available across Contra Costa;
- Reduce involvement of other local government resources including dispatch services, law enforcement and emergency medical services to respond to behavioral health crises.

What is the need

There is a compelling, immediate need for robust, integrated crisis response services. Just as communities nationwide have demanded alternatives to police response to behavioral health crises, Contra Costa’s residents are likewise advocating for increased behavioral health crisis services. County statistics underscore this pressing need.

- It is estimated that about one in five adults in Contra Costa County are struggling with behavioral health issues.
- Experts at Crisis Now, a nationally recognized organization, estimate that based on our population here in Contra Costa, there will be 28,800 acute crisis episodes every year.
- In 2019 approximately 13% or 14,000 of Contra Costa County's 108,000 emergency medical calls were related to behavioral health.
- Some community members are seeking support at sometimes higher levels of care than what is needed such as Psychiatric Emergency Services (PES) and hospital Emergency Departments. Others come to the attention of law enforcement and fall into the criminal justice system as a last resort.

The AIM

- To develop a system where anyone in Contra Costa County can access timely and appropriate behavioral health crisis services anywhere, at any time.
- The team prioritized three areas for a future Contra Costa model:
 - Someone to talk to - a centralized call center (hub) to receive calls for help

- Someone to respond - 24/7 trained mobile crisis teams responding across the county
- A place to go – locations to get care

The Process

Over the past year, Contra Costa Health Services has partnered with individuals and organizations across the county to better understand gaps in the County’s crisis response system and identify needed changes. In Fall 2020, we brought together a multi-disciplinary, county-wide team with diverse experiences and created an initial framework to develop a system where anyone in Contra Costa County can access timely and appropriate behavioral health crisis services anywhere, at any time. The multi-disciplinary team conducted three multiple week-long improvement workshops from November 2020 to June 2021 to document both the current state of the behavioral health crisis response and create and test a future ideal model.

The team represented many facets of mental health and substance abuse crisis response. Their participation has been vital to the progress and success of this effort.

- Those with lived experience
- Family members
- Law enforcement
- Fire and emergency medical responders
- Behavioral health professionals
- Community-based organizations
- Improvement advisors
- Mobile crisis team members

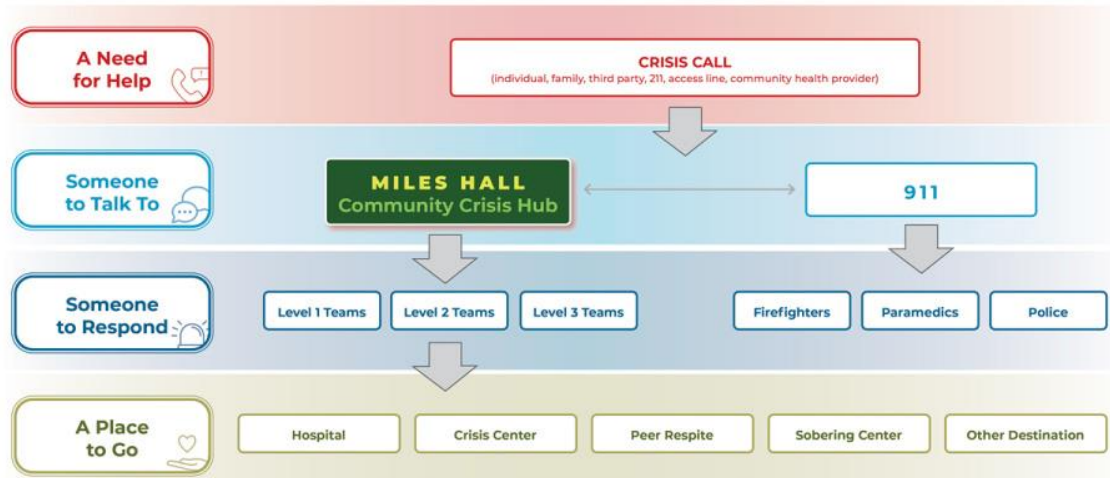
The process included data analysis, listening including to those with lived experiences, observing current processes, evaluating available services, and conducting multiple learning sessions with various counties, states, and even the United Kingdom to identify and borrow best practices. Particularly important were the National Guidelines for Behavioral Health Crisis Care from the Substance Abuse and Mental Health Services Administration (SAMSHA).

In addition, the Public Managers Association designated a subset of their membership to act as project advisors, with the following city managers providing input, guidance and resources:

- San Pablo
- Pittsburg
- Concord
- Walnut Creek
- Lafayette
- San Ramon
- Antioch

The Model

The following model was developed to guide the County’s crisis response efforts to ensure that anyone, anytime, anywhere has someone to talk to, someone to respond, and a place to go.



Someone to Talk To

In the Contra Costa model, behavioral health crisis calls from individuals, families, law enforcement, businesses or community agencies can arrive via multiple pathways (e.g., 911, 211).

Under the A3 model, these calls will be quickly transferred to the Community Crisis Hub, a 24/7 service, where an experienced clinician will ascertain an individual's needs and perform a rapid triage to determine if they can resolve issues by telephone or if a specially trained response team is required to meet the individual in person at their location.

In Contra Costa County, 13% of all calls for ambulance services are for mental health-related issues. Ultimately these calls and referrals from other authorities and families result in 10,000 to 11,000 5150 holds each year, impacting care at Psychiatric Emergency Services and Contra Costa Regional Medical Center’s inpatient psychiatric unit, as well as law enforcement time and effort. It is critical that a trained dispatch center triage these calls to ensure clients experiencing behavioral health crises receive the most appropriate level of care to meet their needs.

- Named for Miles Hall, a young man who was tragically killed by law enforcement while experiencing a behavioral health episode, and in honor of the hundreds of other Contra Costa residents who face not only the challenge of a mental health incident, but also the added jeopardy of getting no help or the wrong help because of a system not designed for their unique situation. The Community Crisis Hub will be the front-door to be able to access mobile crisis services.

Someone to Respond

Specially trained response teams will be available 24 hours per day, 7 days a week deployed from different locations throughout the county.

Based on the determination by the Miles Hall Community Crisis Hub with a sophisticated triage algorithm, the appropriate response team will be dispatched.

Teams would be stationed regionally in order to respond quickly and would be spread across the hours of the day depending on demand. Existing county or city facilities could be utilized as regional deployment centers so that teams arrive in a timely manner.

Response teams will vary in their composition in order to meet the needs of the individual. Team compositions may include:

- Level 1: Peer Support Worker, Emergency Medical Technician (EMT) is dispatched for individuals identified by law enforcement or others as needing a welfare check or a response where there is not a risk of escalation including addressing social needs.
- Level 2: Peer Support Worker, Mental Health Clinician and potentially an EMT or substance use counselor is dispatched for individuals in an acute and serious behavioral health crisis or in need of additional assessment.
- Level 3: Peer Support Worker, Mental Health Clinician, Law Enforcement and potentially an EMT is dispatched for individuals in an acute and serious behavioral health crisis with a suggestion of risk of escalation.

A Place to Go

Developing alternative locations for care, in addition to those already available including hospital emergency departments and psychiatric emergency services, would allow individuals to receive appropriate timely care and facilitate connections to on-going care. These locations could include a crisis center open 24/7, a sobering center and peer respite, and could be co-located.

A recent data analysis by Contra Costa Health Services showed that community crisis support teams were found to reduce Psychiatric Emergency Services admissions by 41% as well as a statistically significant 3.5% reduction to psychiatric inpatient admissions.

We are pleased to present the shared A3 Community Crisis Initiative as a model that is possible and within reach to be able to better serve all of our residents.

Funding for a crisis hub in the amount of \$1 million is identified in the list of Community Project Funding requests for inclusion in the federal fiscal year 2022 appropriations bills. Although not yet approved by Congress, the project has the support of Congressman DeSaulnier and the Appropriations Committee in the House of Representatives. In addition, \$1.1M is included in the FFY 2022 Labor, Health and Human Services appropriations bill for the expansion of mobile crisis response teams, which was also submitted by Congressman DeSaulnier. If received these monies will supplement the County model.

Recommendation:

The County Administrator's recommendation is to fund planning and the first operational cycle (April 1, 2022 through June 30, 2023) at \$5,000,000. The on-going recommendation when fully operational in FY 2023-2024 is \$20,000,000.

A3 Contra Costa Community Crisis Initiative (10-20-2021)				
	Estimated Annual Salary & Benefits	ONE-TIME Total Cost	ON-GOING Total Cost	
Miles Hall Community Crisis Call Center				
1 Psychiatrist	\$348,563.00		348,563.00	
1 Behavioral Crisis System of Care Director	\$202,558.00		202,558.00	
11 Mental Health Clinicians- Call Center	\$147,673.00		1,624,403.00	
1 Secretary	\$76,381.00		76,381.00	
1 Overall-Project Manager	\$168,656.00		168,656.00	
2 Overall Program Managers	\$168,656.00		337,312.00	
1 IT Clinical System Analyst	\$234,682.03		234,682.03	
1 Planner Evaluator	\$123,539.00		123,539.00	
5 Administrative Support	\$76,381.00		381,905.00	
Hub Crisis Services/Alternate Destination				
4 Licensed Mental Health Clinicians	\$147,673.00		590,692.00	
9 Substance Abuse Counselors	\$112,596.00		1,013,364.00	
4 Peer Support Workers	\$64,599.00		258,396.00	
9 Registered Nurses	\$213,978.07		1,925,802.66	
Collaborative Response Teams- 34 Teams				
24 Licensed Mental Health Clinicians	\$147,673.00		3,544,152.00	
10 Emergency Medical Technicians	\$66,138.25		661,382.50	
24 Peer Support Workers	\$64,599.00		1,550,376.00	
5 Law Enforcement Officers	\$185,260.00		926,300.00	
10 Outreach Specialists	\$54,266.07		542,660.67	
10 Medical Social Worker	\$108,465.76		1,084,657.65	
Other Costs				
a. 24 Vehicles	\$29,415.00		705,960.00	
b. 34 Radios & Equipment	\$1,719.00		41,256.00	
c. Physical Location for Crisis Services		3,387,290.86	228,908.81	
d. Regional Deployment Centers - 3 additional locations in Far East, East and West	\$486,000.00		1,458,000.00	
e. Computers, phones and ongoing communication costs	\$83,400.00		83,400.00	
f. Dispatching Technology purchase, installation and configuration		1,239,105.00		
g. Electronic Health Record configuration and maintenance including billing and revenue tracking		373,604.00	858,000.00	
h. Training	\$147,673.00		147,673.00	
i. Evaluation and ongoing quality improvement		0.00	881,020.00	
		\$5,000,000	\$20,000,000	
Footnotes:				
1. Physical Location for Hub costs includes cost of full repairs and, furniture, and then ongoing maintenance need				
2. Vehicles - 24 because not all 34 teams will be deployed at one time				
3. Radios & Equipment - 24 radios because not all 34 teams will be deployed at one time				
4. Regional Deployment Centers costs are based on current budgeted occupancy costs for Mobile Crisis Response Team location.				
5. Dispatching Technology includes estimated costs for CAD, RapidSOS and Dispatch computers.				