# Behavioral Health Division Update Mental Health Commission February 28, 2018 Meeting (January 2018 Data)

# ASSISTANT & DEPUTY DIRECTOR UPDATES (Katy Eckert & Jamie Samboceti)

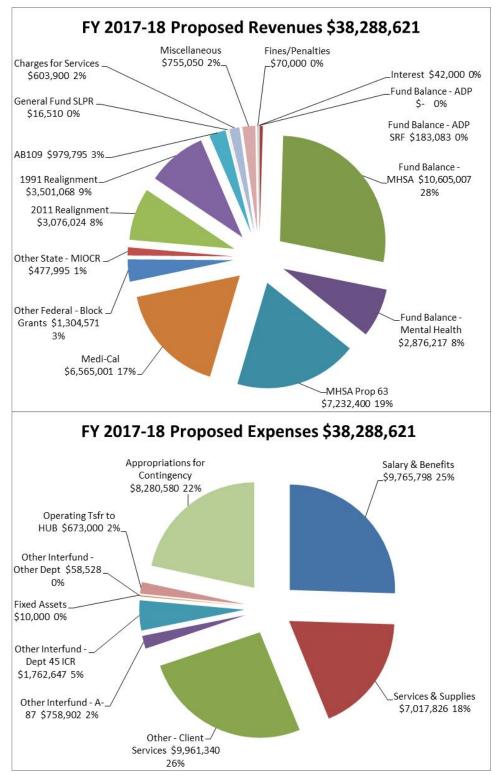
- Telecare Corporation, the Psychiatric Health Facility contractor, has hired a new Administrator. We will be receiving more information about the new Administrator soon.
- We have a lot going on regarding the Drug Medi-Cal Organized Delivery System waiver.
- We are still working through the negotiation/approval process for the Drug Medi-Cal Organized Delivery System waiver rates. We have had several rounds of discussion with the State and they are reviewing the latest round.
- We are developing a "Request for Proposal" for Drug Medi-Cal services to be released sometime in the next couple of months. The intent is to solicit treatment service providers before our proposed go-live date of July 1, 2018.
- The State is coming out in March to do our "Readiness-Review" for the Drug Medi-Cal Organized Delivery System waiver. We expect that the site review will highlight some additional deliverables that we will need to complete before we can officially start the program.

# EL DORADO COUNTY BEHAVIORAL HEALTH DIVISION STAFFING:

# • New Hires:

- Nik Jones, MH Clinician WS, Adult Outpatient
- Natalie Studzinski, MH Clinician WS, ICM
- Promotions:
  - o Salina Drennan, Alcohol and Drug Programs Manager
- Recruitments:
  - Ongoing
    - Patients' Rights Advocate (0.4 FTE)
    - MH Clinician WS
  - New
    - Mental Health Worker Extra Help
    - Mental Health Clinicians Extra Help
    - Mental Health Aide-Regular and Extra Help
- Separations:
  - Haley Turner, MHW SLT resigned 1/31/18
  - Lori Bock, MHW-EH WS resigned 2/14/18
  - Shirley White, Alcohol and Drug Programs Manager, 2/2/18
- Position Changes:
  - Vanessa Martinez, MHW SLT, will now be working swing shift in the MIOCR house

# EL DORADO COUNTY BEHAVIORAL HEALTH FINANCIAL UPDATE:



#### Highlights:

- Most funding coming into Behavioral Health is tied to delivery of services for specified programs.
- Base funding levels for individual counties are now set for 2011 Realignment.
- The county budgets full use of fund balance on the revenue side and an appropriation for contingencies on the expense side to allow flexibility throughout the year.
- MHSA Revenues are paid at an estimated rate all year long, a true up occurs in the July/August timeframe. The true up can either greatly increase or decrease revenues received for the year.

#### Areas of Concern:

- When the economy slows down and sales tax receipts drop statewide, we will experience a reduction in 1991 & 2011 Realignment.
- When the economy slows and California millionaire's income levels drop, MHSA revenues will likewise drop.

# **CASELOAD AND NEW SERVICE REQUEST DATA**

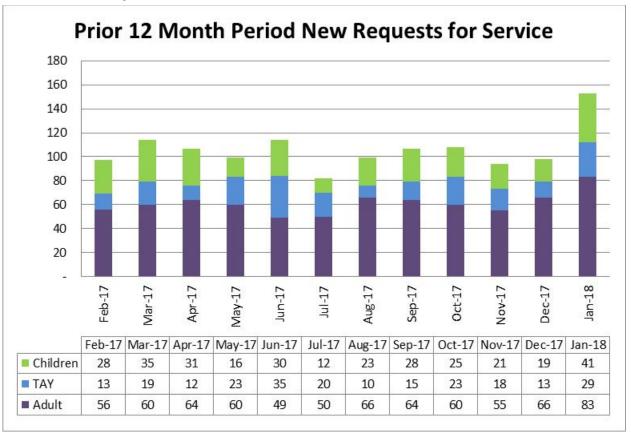
Children's Outpatient South Lake Tahoe	Clients	Children's Outpatient West Slope	Clients	Total
TAY*	7	TAY*	25	32
Clinic*	0	Clinic*	12	12
Contractor: Sierra Child & Family Services (SCF)**	43	Contractor: Sierra Child & Family Services (SCF)**	94	137
Contractor: Tahoe Youth & Family (TY)**	5	n/a		5
		Contractor: Summitview (SV)**	79	79
		Contractor: New Morning (NM)**	23	23
		Contractor: Stanford Youth Solutions (SYS)**	3	3
Subtotal Children's	55	Subtotal Children's	236	291
Subtotal Children's Adult Outpatient South Lake Tahoe	55 Clients	Subtotal Children's Adult Outpatient West Slope	236 Clients	291 Total
Adult Outpatient		Adult Outpatient		
Adult Outpatient South Lake Tahoe	Clients	Adult Outpatient West Slope	Clients	Total
Adult Outpatient South Lake Tahoe Clinic	Clients	Adult Outpatient West Slope Clinic	Clients 303	Total 362

### **Unduplicated Caseload as of January 2018**

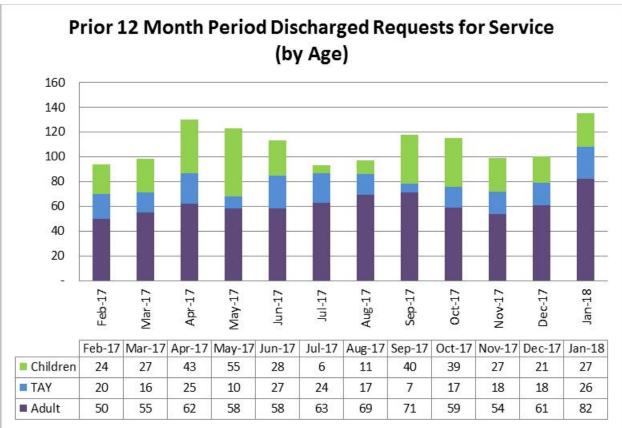
Includes Children/TAY who are seen by the Behavioral Health Division's Psychiatrist only (aka "Med Only")

\*\* May include Children/TAY who are seen by the Behavioral Health Division's Psychiatrist

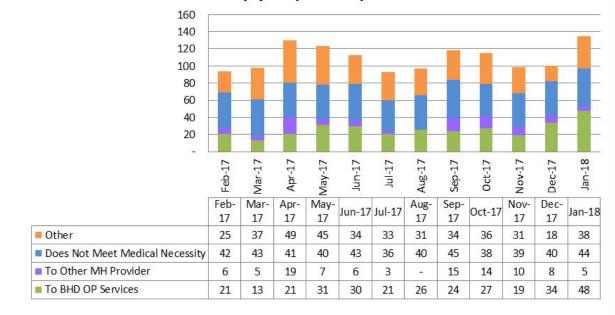
## **New Service Request Trends**

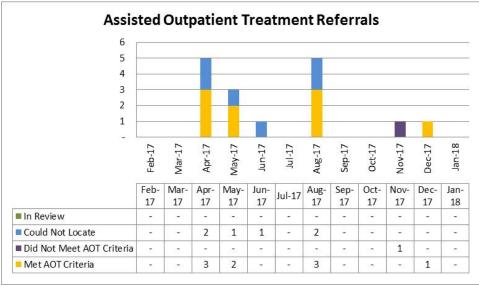


# **Discharged Service Request Trends**

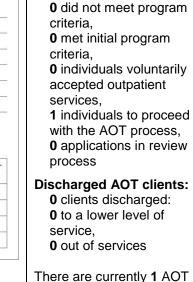


Prior 12 Month Period Discharged Requests for Service (by Disposition)





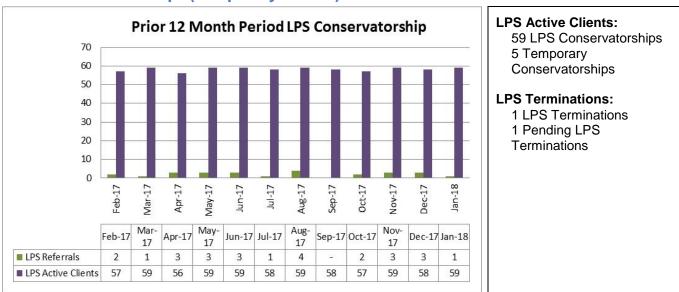
# **Assisted Outpatient Treatment: (Rhapsody Flores)**



**Disposition of Referrals:** 

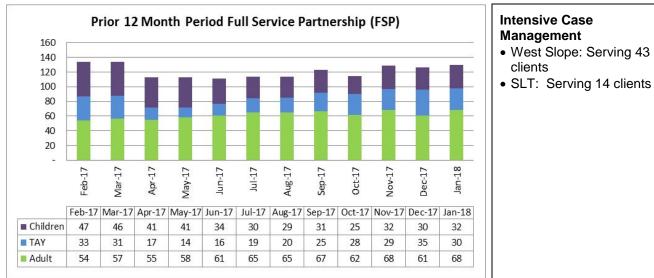
clients receiving services voluntarily.

One AOT Petition was filed with the court, and the individual is now participating in Specialty Mental Health Services.

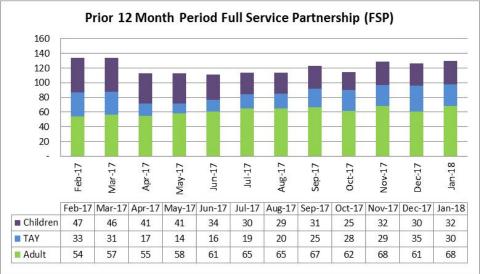


# LPS Conservatorship: (Rhapsody Flores)

# Full Service Partnership (FSP) and Intensive Case Management (ICM) (Rhapsody Flores and Karen Naegeli)



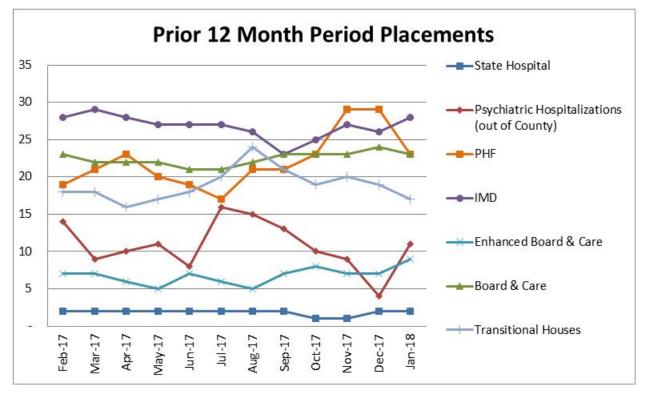
# **Outpatient Services (excludes FSP and Out-of-County Placements)**





Discharges:

# **PLACEMENTS**



# Board and Care / IMDs / Secure Placements (Rhapsody Flores)

- 28 IMD beds Crestwood/Canyon Manor/California Psychiatric Transitions (CPT)
- 2 State Hospital
- 9 Enhanced Board and Care beds including Willow Glen & Silver Ridge
- 23 Board and Care Sacramento & Galt (including Grace Home)
- Total:
  - 56 Out of County Placements
  - 6 In County Placements (Silver Ridge)

#### **Transitions Treatment Program / MIOCR (Rhapsody Flores / Sabrina Owen)**

- WS: 11 of 15 beds filled
- SLT: 6 of 12 beds filled :
  - T1 3 openings, (2 male or female / 1 female)
  - T2 (MIOCR) 3 openings, (1-3 male / 2 female)

## Permanent Supportive Housing (Ren Scammon / Sabrina Owen)

#### Trailside Terrace

Clients receive services from the Wellness and Recovery team or from community based supports

- 5 of 5 units occupied
- Wait List:
  - 1 bedroom: 14
  - o 2 bedroom: 6
  - o 3 bedroom: 0

#### The Aspens at South Lake

Clients receive ICM team coverage

- 6 of 6 units occupied
- Wait List: unknown
  - The Aspens is a floating unit configuration based on household size rather than a specific number of apartments for each number of bedrooms

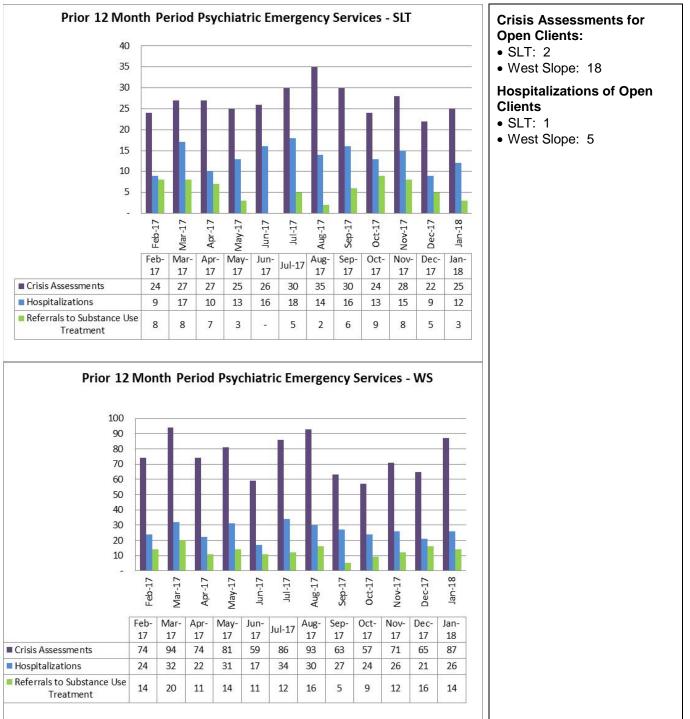
# **Psychiatric Health Facility (Jamie Samboceti)**

- There were 32 Admissions; 23 Admissions were El Dorado County residents and 9 were Out of County residents
- There were 22 El Dorado County residents discharged; 14 to Home with Support, 2 to Home without support, 0 MHRC/IMD, 2 Board and Care, 0 to ICM T-House, 3 to Shelter, 0 to Other, and 1 to Emergency Department
- Upon discharge, 19 El Dorado County residents were insured and 3 El Dorado County residents were pending insurance
- There were 1 Seclusion Episodes (15 minutes, 0 Physical Restraint Episodes (0 minutes), 1 Assaults (client to staff), 0 Elopements, 1 Medication Errors\*, 25 Client Surveys
- There were 4 denials of El Dorado County referrals: 1 for suboxone; 1 had reached maximum benefit from treatment; 1 had primary diagnosis of substance use disorder; 1 due to full census
- Average daily census was 10.8 (range 6-15), with 7 days average length of stay.

<sup>\*</sup> Medication parameters were not noted on the Medication Administration Record but were placed after identified during overnight audit.

# **CRISIS SERVICES**

### Psychiatric Emergency Services (PES) (Sabrina Owen and Angie Larrigan)



# **Crisis Intervention Teams (CIT) (Angie Larrigan and Sabrina Owen)**

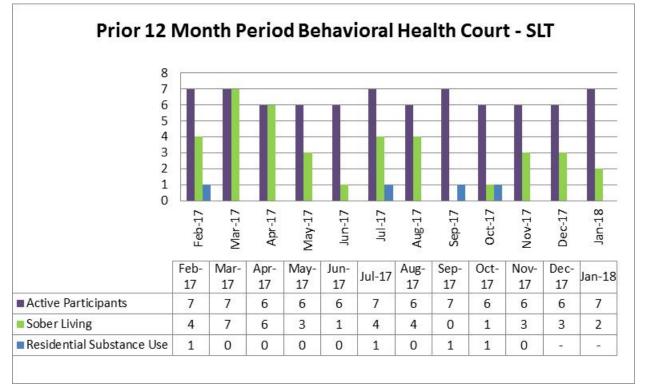
- **SLT:** SLT resumed its MDT meeting after several months of problems with scheduling. Law enforcement was provided with training tools to help officers to better recognize criteria for 5150's including a how to write a 5150 guide. Discussion also took place on new protocols for individuals being incarcerated that have known or suspected mental health issues.
- WS: WS CIT MDT has tripled in size since November. New attendees include EDC In-Home Supportive Services, Public Guardian, Adult Protective Services/In-Home Supportive Services Program Manager, EDSO HOT team, Community Health Clinic Medication Assisted Treatment representatives and Summitview Group Home representatives. The MDT has been productive and due to the increase in attendance and amount of information sharing, the meeting is now scheduled for two hours each month.

PERT- On January 23rd, 2018, EDCBH and EDSO officially partnered in the field to provide <u>P</u>sychiatric <u>E</u>mergency <u>R</u>esponse <u>T</u>eam (PERT) services to our community.

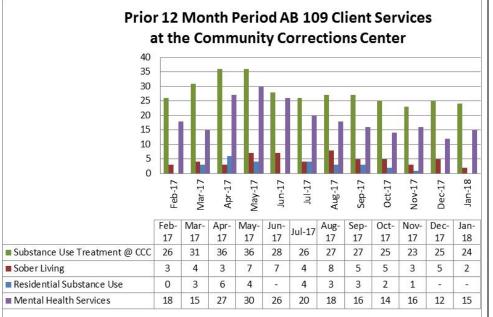
- The PERT team provides emergency assessment, intervention and referral to individuals with suspected mental illness who come to the attention of law enforcement for emergency WIC 5150 related assistance. The PERT team carefully evaluates each situation, assesses the mental health status of each individual and provides appropriate intervention. Interventions may include 5150 hold, safety planning, referral to community based resources (EDCBH, SUD treatment, The Center for Violence Free Relationships, Nomadic Shelter, Primary Care, etc.). Additionally, the PERT team will provide followup contact to individuals formally in need of PERT and or CIT intervention in attempt to enhance the probability of stabilization and reduce any identified barriers to accessing appropriate services. PERT services are available Tuesday-Friday from 11am-9pm.
- Data from January 23-January 31st 6 days of PERT are as follows:
  - 17 face to face PERT contacts.
    - ✓ 4 WIC 5150 holds placed- all for Grave Disability.
    - ✓ 10 Safety plans created
    - ✓ 2 Individuals taken to Jail
    - ✓ 1 Individual taken to Juvenile Hall
- Additionally, approximately 28 follow up telephone contacts and 18 case reviews were conducted during this 6 day period.

# **JUSTICE SERVICES**

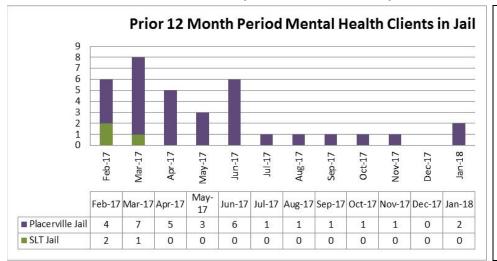
#### Behavioral Health Court (John Schumacher)



# AB 109 (John Schumacher)



- 4 clients are receiving Substance Use Education services in the South Lake Tahoe jail.
- **19** clients are receiving Substance Use Disorder treatment in Placerville Jail.
- 0 clients are receiving treatment from a contracted community provider in SLT.
- 3 clients are receiving treatment from a contracted community provider in Placerville.



# Mental Health Clients in Jail (Jamie Samboceti)

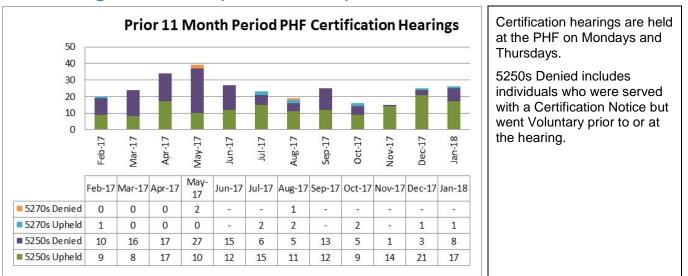
Count of Behavioral Health's existing clients that were receiving Specialty Mental Health Services at the time of their incarceration in the Placerville or SLT Jails only.

# **Restoration of Competency (Rhapsody Flores)**

- **0** Outpatient ROC referrals; **0** Jail ROC referral
- 1 client receiving ROC Outpatient services
- **0** clients receiving ROC Inpatient services (CPT)

# **QUALITY ASSURANCE & PATIENT RIGHTS**

# Patients' Rights Advocate (Ren Scammon)



# **Quality Improvement/Utilization Review (Ren Scammon)**

 Preparations are underway for the annual External Quality Review Organization (EQRO) review of the Mental Health Plan performed by Behavioral Health Concepts. EQRO is scheduled for March 22, 2018.  QI/UR continues to work on implementing the updated 42 Code of Federal Regulations Part 438, also known as the "Mega Regs". The State has recently released information notices related to required network capacity, Notices of Adverse Benefit Determination (NOABD, previously called "Notices of Action" or "NOAs"), grievances, appeals and beneficiary rights.

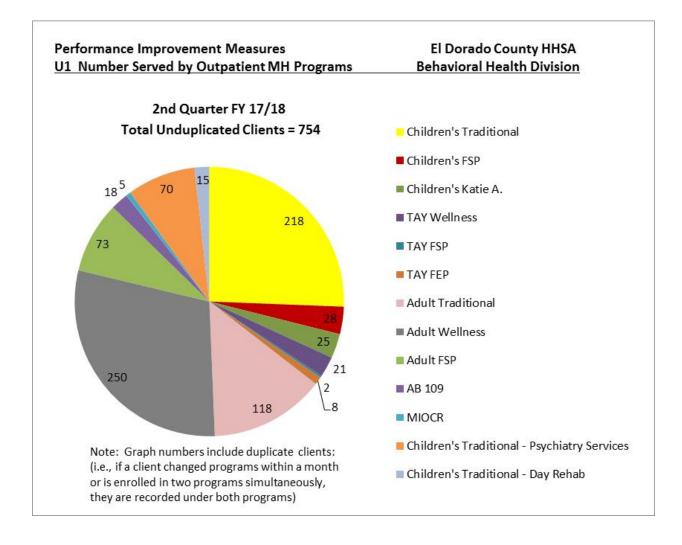
Month Filed	Month Completed	Туре	Торіс	Location	Outcomes (Appeals / Hearings Only)
10-2017	01-2018	Grievance	Access Request for a service provider not contracted with the County	WS Adult	
10-2017	01-2018	Grievance	Access Request for a service provider not contracted with the County	WS Adult	
10-2017	01-2018	Grievance	Access Request for a service provider not contracted with the County for services not allowable under Medi-Cal per State contract	WS Adult	
11-2017		Hearing	Denial of Services Possible intellectual/neurocognitiv e delay; Client would not likely benefit from specialty mental health services as it would not likely improve or maintain his mental health status	SLT Adult	Hearing request on hold pending State's receipt of proper documentation from Claimant
12-2017		Grievance	Other Communication preferences	WS Adult	

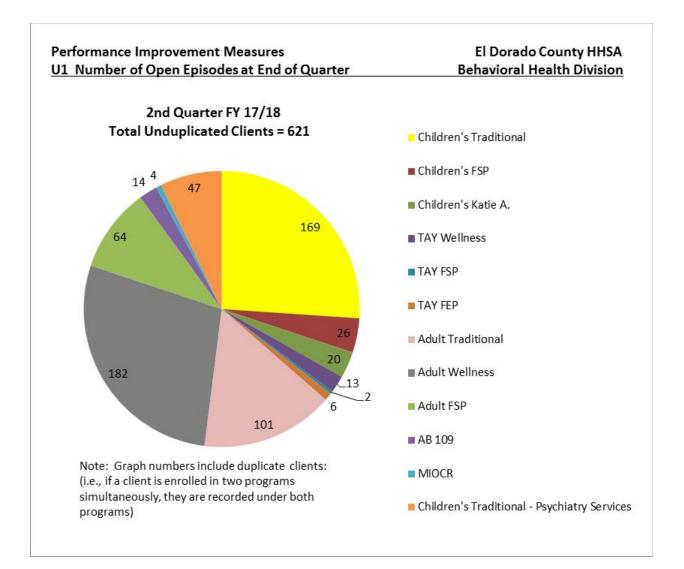
# **Grievances/Appeals/Hearings (Ren Scammon)**

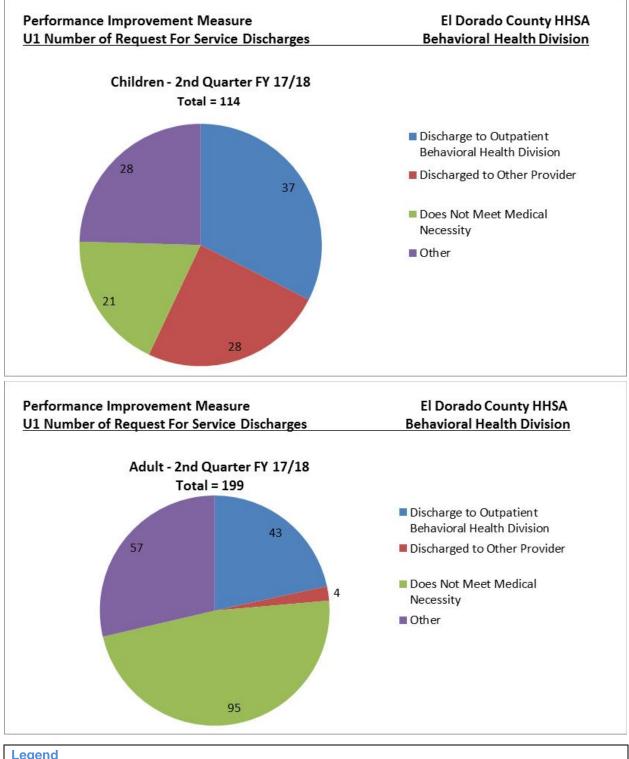
Month Filed	Month Completed	Туре	Торіс	Location	Outcomes (Appeals / Hearings Only)
01-2018	02-2018		Denial of Services Possible intellectual/neurocognitiv e delay; Client would not likely benefit from specialty mental health services as it would not likely improve or maintain his mental health status		Authorized for further assessment to determine potential benefit from Specialty Mental Health Services

# **PERFORMANCE IMPROVEMENT METRICS (reported quarterly)**

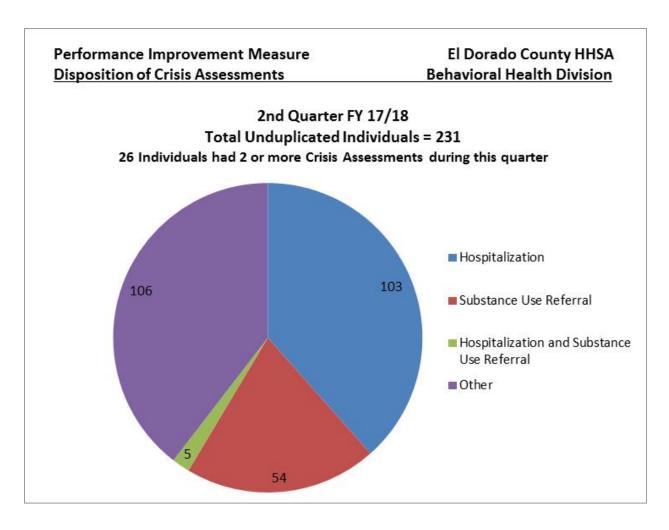
#### Quarter 2 (October through December 2017)







Legenu	
Discharge to Outpatient MHD	Discharged to Mental Health program or ADP
Discharge to Other Provider	Discharged to Managed Care Provider or Private Insurance
Does Not Meet Medical Necessity	Discharged to Primary Care or referred to community base services
Other	Moved out of county, canceled, client could not be contacted



Next Report Period: Quarter 3 (January through March 2018) Reporting Month: April 2018

# **PROGRAM ACTIVITY UPDATES**

# Alcohol and Drug Programs (ADP) / Substance Use Disorder (SUD) Programs (Salina Drennan)

- Shirley White retired February 2, 2018, and Salina Drennan was the selected candidate to fill the Alcohol and Drug Programs Manager position.
- Preparation for the Drug Medi-Cal / Organized Delivery System (DMC-ODS) continues. Behavioral Health is preparing the required documentation and requests for proposals (RFPs).
- The State's Readiness Review with the County is scheduled for March 2018.

# MENTAL HEALTH SERVICES ACT (MHSA) (Heather Longo/Tami Smith)

Community Planning Process meetings

Date/Time	Host	Address
Thurs. Jan. 4, 2018 12 p.m.	EDC Wellness Center, Peer Leadership (consumers)	768 Pleasant Valley Road Diamond Springs, CA (Wellness Center)
Wed. Jan. 10, 2018 1:30 p.m.	EDC MHSA/Latino Outreach Stakeholder meeting	768 Pleasant Valley Road Diamond Springs, CA
Thurs. Jan. 18, 2018 9:30 a.m.	Commission on Aging	El Dorado Hills Community Services District 1021 Harvard Way El Dorado Hills, CA (gym classroom)
Mon. Jan. 29, 2018 5:30 p.m.	NAMI EI Dorado Hills	Raley's grocery store 3935 Park Drive El Dorado Hills, CA (conference room at the end of aisle 16)

MHSA Surveys received: 333 (223 online; 110 paper)

Top responses to the "six biggest gaps or needs in mental health-related services" question:

- Alcohol and drug/substance use disorder services (35.741%)
- More services for homeless individuals (30.03%)
- More mild-to-moderate mental health providers (29.13%)
- Transportation to/from services (28.83%)
- After crisis care (24.62%)
- More services for children (24.32%)

# **OUTPATIENT SERVICES**

# (Sabrina Owen and Karen Naegeli (SLT); Lesly Van Sloten and Rhapsody Flores (WS))

#### **Wellness Center Activities:**

Tahoe:

• A diversity themed party was held in January which celebrated and highlighted a variety of different cultures unique and important contributions. Clients enjoyed a diverse menu and games including a crowd favorite - a pinata!

West Slope:

- The West Slope Wellness Center is going through some reorganizing of supplies and sheds.
- Peer leaders have increased their involvement in the Wellness Center. They're taking more initiative in starting and completing tasks.

#### **ICM Activities:**

Tahoe:

• ICM clients continue to gain skills to learn how to live independently and several have engaged (some successfully!) in the difficult task of trying to find affordable housing in SLT.

West Slope:

• Two ICM clients were successful in finding housing. They will be moving out of the T-House in February.

#### **Children's Services (Angie Larrigan)**

- Together with the support of Child Welfare Services and our community partners, the Behavioral Health Division has implemented the children and family team service per AB 403 Continuum of Care Reform. According to the Bill, a child and family team is defined as group of individuals who are convened by the placing agency and who are engaged through a variety of team-based processes to identify the strengths and needs of the child or youth and his or her family, and to help achieve positive outcomes for safety, permanency, and well-being.
- Child Welfare Services and the Behavioral Health Division partnered and implemented procedure and formal documents to initiate and receive AB 1299 Presumptive Transfer and Waiver of Presumptive Transfer. Presumptive Transfer ensures that foster children placed outside of their county of original jurisdiction are able to access mental health services in a timely manner. The bill requires presumptive transfer, or waiver of transfer of responsibility, for providing or arranging for mental health services to a foster child from the county of original jurisdiction to the county in which the foster child resides. A waiver of Presumptive Transfer is made when it has been determined that the transfer of mental health services would disrupt continuity of care or timely access to services. AB 1299 requires the mental health plan in the host county to assume

responsibility for the authorization and provision of mental health services, and payments for services, upon the presumptive transfer.

• The Behavioral Health Division and Child Welfare Services continue to collaborate in preparation for awaited guidance surrounding AB 403 STRTP and Therapeutic Foster Care Continuum of Care Reform stages.

#### TAY DBT/FEP Program (Sabrina Owen and Lesly Van Sloten)

Tahoe

 Anastasia is now facilitating three DBT groups - one at STHS, one at Tallac and one (by request) at the CCC (California Conservation Corps). She has also been asked to begin a substance used focused DBT at the high school. There has also recently been a discussion with a LTCC student ambassador about how to provide a similar group/peer support at the college. Anastasia is currently seeing 3 FEP clients.

Placerville

 Kate continues to facilitate 4 DBT Groups at Independence High School and 2 at Charter Community School. Kate attended an all staff meeting at Independence High School last week where the Principal and Vice Principal recognized the work Kate is doing on Campus, noting students were: "Less Rowdy" for the remainder of the day, motivated to attend group, and learning to support each other on campus outside of the designated group. Charter Community School DBT Groups are also going well with numerous group students requesting 1:1 sessions and high volume referrals from the Principal. Kate currently sees 2 FEP clients who are engaged in individual and family therapy. One client hopes to transition back into a public high school this month; which was a major goal at the beginning of treatment.

# ADULT OUTPATIENT GROUP SCHEDULES

# **WS Adult Outpatient Services**

Monday	
BHC/Wellness - Check In Group	10:30 am - 11:30 am
Manage your Emotions Group	1:15 pm - 2:00 pm
Current Events Group	1:15 pm - 2:00 pm (Wellness/Peer Led)
Exercise Group	2:00 pm - 3:00 pm (Wellness/Peer Led)
Basic Conversation Skills	2:00 pm - 3:00 pm (Wellness)
Stress Reduction	3:00 pm - 4:00 pm (Wellness)
Play a Game Group	3:00 pm - 4:00 pm (Wellness)
Tuesday	
Music Group	10:00 am - 11:00 am (Staff and Peer Led)
Current Events Group	1:15 pm - 2:00 pm (Wellness/Peer Led)
Women's Co-Occurring Recovery Group	1:15 pm - 2:45 pm (ADP)
Art Group with Jan from NAMI	1:30 pm - 3:00 pm (Wellness/Peer Led)
Healthy Pleasures	1:30 pm - 2:30 pm (Staff and Peer Led)
Job Connections Group	1:30 pm - 3:30 pm (Wellness)
Smoking Cessation	3:00 pm - 4:00 pm (Wellness)
Wednesday	
DBT Skills Group - Skills Training	10:00 am - 12:00 pm
SAMHSA - Medication Education	11:00 am - 12:00 pm (On Hold)
Transitional Housing Independent Living Skills	12:00 pm - 1:00 pm
Dual Recovery Anonymous - Peer Support Group	1:00 pm - 2:00 pm (Wellness/Peer Led)
Current Events Group	1:15 pm - 2:00 pm (Wellness/Peer Led)
Self-Care/ADLS Group	1:30 pm - 3:30 pm (Wellness)
Therapeutic Music Group	2:00 pm - 3:00 pm (Wellness/Peer Led)
Anger Management Group	2:00 pm - 3:00 pm
Physical Activity (1 mile walk)	3:00 pm - 3:45 pm (Wellness)
MH Peer Leadership Academy	2:00 pm - 4:00 pm, monthly, (Wellness)
Thursday	
Improv & Intro to music	10:00 am - 11:00 am
Women's Trauma Group (using seeking safety)	12:00 pm - 1:00 pm (Wellness)
Current Events Group	1:15 pm - 2:00 pm (Wellness/Peer Led)
Women's Co-Occurring Recovery Group	1:15 pm - 2:45 pm (Seeking Safety, ADP)
Get Fresh Nutrition Classes - EDC PH	1:30 pm - 2:30 pm (Wellness)
Nutrition/Meal Planning group	In the T-houses on a rotating schedule
Crafts with the Textile Division	2:00 pm - 4:00 pm (Peer Led)
DBT Skills Group	2:30 pm - 3:30 pm
Life Skills Group	3:00 pm - 4:00 pm (Wellness/Peer Led)
Gardening Group 2x/Month	3:00 pm - 4:00pm (Will Resume in June)
Friday	
DBT Group - Skills Training	10:00 am - 12:00 pm
Men's Co-Occurring Recovery Group	10:00 am - 12:00 pm (ADP)

Current Events Group	1:15 pm - 2:00 pm (Wellness/Peer Led)
Ted Talks and Cinema Club	1:30 pm - 3:30 pm (Wellness)
DBT Group - Skills Training	1:30 pm - 2:30 pm
Mindfulness Group	2:45 pm - 3:30 pm (Wellness)

# SLT Adult Outpatient Services

Monday	
Co-Occurring DBT	11:00 am - 12:00 pm
DBT - Mindfulness	1:00 pm - 2:30 pm
DBT - Skill Building	1:30 pm - 2:30 pm (Wellness)
TED Talks - Information & Conversation	3:00 pm - 3:30 pm (Wellness)
Current Events Discussion	3:35 pm - 4:00 pm (Wellness)
Tuesday	
DBT - Distress Tolerance	1:00 pm - 2:30 pm
Health Awareness/Cooking	1:30 pm - 2:30 pm (Wellness)
Peer Leadership	3:00 pm - 3:30 pm (Wellness)
Just One Thing (Mindfulness)	3:35 pm - 4:00 pm (Wellness)
Wednesday	
DBT – Emotional Regulation	1:00 pm - 2:30 pm
Recovery Through Art	1:30 pm - 2:30 pm (Wellness)
Refuge Recovery	3:00 pm - 3:30 pm (Wellness)
Healthy Relationship Skills	3:35 pm - 4:00 pm (Wellness)
Thursday	
Co-occurring Women's group	10:30 am – 12:00 pm (ADP)
Women's Group	1:00 pm - 2:30 pm
Community Excursions	1:00 pm - 4:00 pm (Wellness)
Movement Mindfulness	1:30 pm - 2:30 pm (Wellness)
Stress Management/Coping Skills	3:00 pm - 3:30 pm (Wellness)
Social Awareness	3:35 pm - 4:00 pm (Wellness)
Friday	
BHC Group	12:30 pm - 1:00 pm
Volunteering	1:00 pm - 4:00pm (Wellness)
Anger Management	1:30 pm - 2:30 pm (Wellness)
Leisure Skills	3:00 pm - 3:30 pm (Wellness)
Paths to Recovery (Book Study)	3:35 pm - 4:00 pm (Wellness)
Men's Wellness	2:30 pm - 4:00 pm
Saturday	
Friends 'n Fitness	11:00 am - 12:30 pm

# **INITIALS & DEFINITIONS**

Initials	Definition
AB	Assembly Bill
ACEs	Adverse Childhood Experiences
ADL	Activities of Daily Living
ADP	Alcohol and Drug Programs
AOT	Assisted Outpatient Treatment
APS	Adult Protective Services
ARF	Adult Residential Facility
B&C	Board and Care
BHC	Behavioral Health Court
BHD	Behavioral Health Division (formerly the Mental Health Division)
BOMUSD	Black Oak Mine Unified School District
BSCC	Board of State and Community Corrections
CalMHSA	California Mental Health Services Authority
CBHDA	California Behavioral Health Directors Association
CBO	Community Based Organization
CBT	Cognitive Behavior Therapy
CCC	•
	Community Corrections Center or California Conservation Corps
CCP	Community Corrections Partnership
CCR	Continuum of Care Reform
CFMG	California Forensic Medical Group
CFR	Code of Federal Regulations
CFT	Children and Family Teams
CFTN	Capital Facilities and Technology Needs
CHP	California Highway Patrol
CIT	Crisis Intervention Team
CMS	Centers for Medicare & Medicaid Services
CPP	Community Planning Process
CPS	Child Protection Services
CPT	California Psychiatric Transitions
CSS	Community Services and Supports
DBT	Dialectical Behavior Therapy
DHCS	Department of Health Care Services (California)
DMC-ODS	Drug Medi-Cal Organized Delivery System
Dx	Diagnosis
ED	Emergency Department
EDC	El Dorado County
EDCMH	El Dorado County Mental Health
EDCSO	El Dorado County Sheriff's Office
EDSO	El Dorado Sheriff's Office
EDCVC	El Dorado Community Vision Coalition
EH	Extra Help
EPSDT	Early and Periodic Screening, Diagnosis and Treatment
EQRO	External Quality Review Organization
ER	Emergency Room
FEP	First Episode Psychosis
FSP	Full Service Partnership
FTE	Full-Time Equivalent
FY	Fiscal Year
HHSA	Health and Human Services Agency
HOT	Homeless Outreach Team

ICC ICM IHBS IMD ITWS Katie A. LCSW LL LOCUS LPS LT LTCC MAR MDT MH MHD M-F MHOAC MHRC MHSA MHW MIOCR MOA NM OP PA PATH PCP PD PEI PES PG PHF PIP POC PEI PES PG PHF PIP POC PPD QI QI/UR QI/UR QI/UR QIC RIF RFI RFI RFF RFP ROC RV SAMHSA SB SCF SLT SLTPD SO STHS STHS STRTP SUD	Intensive Case Management Intensive Home-Based Services Institution for Mental Disease (facility) Information Technology Web Services <i>Katie A. vs. Bonta</i> Lawsuit and/or resulting programs/services Licensed Clinical Social Worker Laura's Law Level of Care Utilization System Lanterman Petris Short Limited Term Lake Tahoe Community College Medication Administration Record Multi-Disciplinary Team Mental Health Mental Health Mental Health Division Monday through Friday Mental Health Oversight and Accountability Commission Mental Health Nersight and Accountability Commission Mental Health Worker Mental Health Worker Mental Health Worker Mental Office Assistant New Morning Youth & Family Outpatient Physician Assistant Projects for Assistante in Transition from Homelessness Primary Care Physician Police Department Prevention and Early Intervention Psychiatric Emergency Services Public Guardian Psychiatric Health Facility Primary Intervention Program or Program Improvement Plan Plan of Correction Placerville Police Department Quality Improvement Committee Reduction in Force Request for Information Request for Proposal Restoration of Competence Remi Vista Substance Abuse and Mental Health Services Administration Senate Bill Sierra Child & Family South Lake Tahoe South Lake Tahoe Police Department Short-Term Residential Therapeutic Program
SV	Summitview Child & Family

SYS T-House	Stanford Youth Solutions Transitional Housing
TAY	Transitional Age Youth
TBD	To Be Determined
TFC	Therapeutic Foster Care
TYFS	Tahoe Youth and Family Services
Tx	Treatment
TY	Tahoe Youth & Family
UR	Utilization Review
WET	Workforce Education and Training
WIA	Workforce Investment Act
WOIA	Workforce Innovations and Opportunities Act
WS	West Slope