

## Legislation Details (With Text)

| File #:        | 08-1   | 442       | Version:       | 1 |               |                    |        |
|----------------|--|-----------|----------------|---|---------------|--------------------|--------|
| Туре:          | Age  | nda Item  |                |   | Status:       | Approved           |        |
| File created:  | 9/12   | 2/2008    |                |   | In control:   | Board Of Superviso | rs     |
| On agenda:     | 9/30   | /2008     |                |   | Final action: | 9/30/2008          |        |
| Title:         | Mental Health Department recommending Chairman be authorized to sign retroactive Agreement 271-<br>00911 (7223-09-058) with the County of Sacramento in the amount of \$100,000 for the term of July 1,<br>2008 through June 30, 2009 to provide acute inpatient psychiatric treatment for individuals referred by<br>the County of Sacramento Department of Health and Human Services.<br>RECOMMENDED ACTION: Approve.<br>FUNDING: Sacramento County. |           |                |   |               |                    |        |
| Sponsors:      |  |           |                |   | -             |                    |        |
| Indexes:       |  |           |                |   |               |                    |        |
| Code sections: |  |           |                |   |               |                    |        |
| Attachments:   | 1. Sac County PHF use.pdf, 2. Sac County PHF use blue route.pdf  |           |                |   |               |                    |        |
| Date           | Ver.   | Action By | ,              |   | Acti          | on                 | Result |
| 9/30/2008      | 1  | Board Of  | f Cum am dia d |   |               | proved             | Pass   |

Mental Health Department recommending Chairman be authorized to sign retroactive Agreement 271 -00911 (7223-09-058) with the County of Sacramento in the amount of \$100,000 for the term of July 1, 2008 through June 30, 2009 to provide acute inpatient psychiatric treatment for individuals referred by the County of Sacramento Department of Health and Human Services. **RECOMMENDED ACTION:** Approve.

FUNDING: Sacramento County.

| BUDGET SUMMARY:           |           |           |
|---------------------------|-----------|-----------|
| Total Estimated Cost      |           | \$100,000 |
|                           |           |           |
| Funding                   |           |           |
| Budgeted                  | \$100,000 |           |
| New Funding               | \$        |           |
| Savings                   | \$        |           |
| Other                     | \$        |           |
| Total Funding Available   | \$100,000 |           |
| Change To Net County Cost |           | \$0       |

Fiscal Impact/Change to Net County Cost: The total funding for this revenue generating agreement is \$100,000. T here is no Change to Net County Cost.

Background: Throughout California there is a shortage of acute inpatient psychiatric facilities. Sacramento County has requested to contract with El Dorado County to access the Psychiatric Health Facility (PHF) services for residents requiring short term inpatient mental health services. El Dorado County retains the exclusive right of refusal of referrals from Sacramento County if the PHF is unable to accommodate additional clients at any time.

Services provided at the PHF will include psychiatrist services, clinical psychological services, nursing services, rehabilitation services, health record services, restraint, seclusion, pharmaceutical services, and use of outside resources where appropriate. To the extent possible, Sacramento County residents referred will be encouraged to bring their own medications, or be sent with their medications to the PHF as there is no pharmacy on site.

This agreement covers the period July 1, 2008 through June 30, 2009. The Department worked with Sacramento County for over a year and did not receive the final contract from them until August 2008.

Reason for Recommendation: Approval of this agreement will allow for use of the El Dorado County

PHF for Sacramento County residents who require inpatient treatment for psychiatric health services.

Action to be taken following Board approval:

- 1. Chairman will sign five (5) original Agreements.
- 2. Board Clerk's Office to return all five (5) original agreements to the Mental Health Department.
- 3. Mental Health Department to forward to Sacramento County for signatures.
- 4. Sacramento County will return one original agreement to MHD to provide to the Board Clerk.

Contact: John Bachman, Mental Health

Concurrences: This agreement has been approved by County Counsel and Risk Management and a copy is on file in the Board Clerk's Office.