

RESPONSE TO GRAND JURY REPORT

Report Title: Humboldt County, Behavioral Health, Substance Use, and the Streets What Works?

Report Date: June 28, 2024

Response by: Humboldt County Board of Supervisors

FINDINGS

The county agrees with Findings numbered 1-9.

RECOMMENDATIONS

Recommendations numbered 1-3 will not be implemented.

Recommendation 4 has been implemented.

Date: September 10, 2024 Signed: 

Number of pages attached: 5



COUNTY OF HUMBOLDT

COUNTY ADMINISTRATIVE OFFICE

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INTEROFFICE MEMORANDUM

TO: BOARD OF SUPERVISORS
FROM: COUNTY ADMINISTRATIVE OFFICE
SUBJECT: RESPONSE TO 2023-24 GRAND JURY REPORT "HUMBOLDT COUNTY, BEHAVIORAL HEALTH, SUBSTANCE USE, AND THE STREETS WHAT WORKS?"
DATE: SEPTEMBER 10, 2024

In the Grand Jury Report, "*Humboldt County, Behavioral Health, Substance Use, and the Streets What Works?*," the Grand Jury has requested that the Board of Supervisors respond to all Findings (1-9) and all Recommendations (1-4). The County Administrative Office is proposing the following response as detailed below.

FINDINGS

Finding 1: *The Crisis Alternative Response Eureka program demonstrates a successful, proactive model for compassionately providing Eureka with community based, high-quality, easy-access mental health and substance use mobile crisis services. These services help people to live better lives and benefit everyone in our community.*

Response: Agree.

Finding 2: *When people are housed, mentally stable, and free of substance abuse, they use less community resources, resulting in significant savings to our community. (R1)*

Response: Agree.

Finding 3: *When people are housed, mentally stable, and free of substance abuse, they are more likely to contribute financially to our community, resulting in economic stimulus in our community. (R1)*

Response: Agree.

Finding 4: Behavioral health and substance use programs that rely on grant funding for ongoing operations and staffing are always at risk of losing that funding. This reliance on grant funding places programs within Humboldt County at risk. **(R2, R3)**

Response: Agree.

Finding 5: The newest version of the Mobile Intervention and Services Team uses Medi-Cal billing to access federal reimbursements for services provided. This revenue stream may be more sustainable than some used in the past, resulting in a more viable program. **(R2, R3)**

Response: Agree.

Finding 6: The program that allows the Mobile Intervention and Services Team to bill Medi-Cal and to receive reimbursements for services provided ends March 31, 2027, with no guarantee of continued funding. Without this revenue stream the MIST program may need to be reduced or eliminated. **(R2, R3)**

Response: Agree.

Finding 7: The newest version of the Mobile Intervention and Services Team does not have a revenue stream for clients not covered by Medicare and Medicaid, which may result in a shortage of funding. Without a reliable funding source for these clients parts of the Mobile Intervention and Services Team may not be sustainable. **(R2, R3)**

Response: Agree.

Finding 8: The Department of Health and Human Services and the Mobile Intervention and Services Team have chronic difficulties filling open positions. Without stable staffing, the program cannot be effective. **(R2, R3)**

Response: Agree.

Finding 9: During the 2022-2023 State of California Behavioral Health Justice Intervention Service's one-year grant, the Humboldt County Department of Health and Human Services and the Humboldt County Sheriff's Office did not adequately track calls for service involving law enforcement and staff from the Mobile Intervention and Services Team program. This resulted in incomplete data which could be used to improve the program. **(R4)**

Response: Agree.

RECOMMENDATIONS

Recommendation 1: *The Humboldt County Board of Supervisors commission a study to determine the cost/benefit relationship between providing Mobile Intervention and Services Team services to at-risk citizens versus continuing to use other community resources for untreated people. This study is to be completed by no later than June 30, 2025. For funding recommendations, see the wording below Recommendation #5. (F2, F3)*

This recommendation will not be implemented.

The Substance Abuse Mental Health Services Administration states in its National Guidelines for Behavioral Health Crisis Care, "With non-existent or inadequate crisis care, costs escalate due to an overdependence on restrictive, longer-term hospital stays, hospital readmissions, overuse of law enforcement and human tragedies that result from a lack of access to care. Extremely valuable psychiatric inpatient assets are overburdened with referrals that might be best supported with less intrusive, less expensive services and supports. In too many communities, the "crisis system" has been unofficially handed over to law enforcement; sometimes with devastating outcomes. The current approach to crisis care is patchwork and delivers minimal treatment for some people while others, often those who have not been engaged in care, fall through the cracks; resulting in multiple hospital readmissions, life in the criminal justice system, homelessness, early death and suicide. A comprehensive and integrated crisis network is the first line of defense in preventing tragedies of public and patient safety, civil rights, extraordinary and unacceptable loss of lives, and the waste of resources. There is a better way. *Effective crisis care that saves lives and dollars requires a systemic approach.*"

Conducting a study as described in this recommendation, at local cost, would be duplicative.

Additionally, the county is facing a budget deficit of over \$15 million in Fiscal Year 2024-25 and therefore is not in the financial position to allocate funds to commission a study for this purpose. Further, the county appreciates the value of the Mobile Intervention and Services Team (MIST) program and recognizes the importance of this resource that provides field-based proactive case management, peer support and clinical care before, during and after a mental health crisis. Unlike any other program in the county, MIST offers effective outpatient and crisis services in the least restrictive manner – in the field, seven days a week.

The City of Eureka has established the successful Crisis Alternative Response of Eureka (C.A.R.E.) program and the Eureka Police Department's Community Safety Engagement Team (CSET), these initiatives are limited to Eureka and do not match the comprehensive, countywide reach of MIST. Given that no other community resources in Humboldt County provide services comparable to MIST, commissioning a study to determine the cost/benefit relationship of MIST's services versus using alternative community resources for untreated individuals is unnecessary.

Recommendation 2: *The Humboldt County Board of Supervisors provide permanent funding for the Mobile Intervention and Services Team to cover services that cannot be reimbursed by Medi-Cal. This funding is to be available by no later than July 1, 2025. For funding recommendations, see the wording below Recommendation #5. (F4, F5, F6, F7, F8)*

This recommendation will not be implemented.

As noted in the response to the first recommendation, the county is facing a budget deficit of over \$15 million in Fiscal Year 2024-25. The county's current budget situation makes it difficult to allocate funds for MIST services that are not reimbursable by Medi-Cal. However, the county recognizes the unique value MIST brings to the community and remains committed to its continuation and support. The county has previously supported the MIST program through Measure Z funds, however, due to limited resources in Measure Z, the program was not funded in Fiscal Year 2024-25 with this funding source. Humboldt County's Department of Health & Human Services will continue to explore additional funding options to sustain the vital services provided by MIST.

Recommendation 3: *Unless other funding for the Mobile Intervention and Services Team is secured prior to the 2026-2027 fiscal year, the Humboldt County Board of Supervisors provide sufficient funds to continue this program. This evaluation and potential financial commitment is to be completed by no later than April 1, 2026. For funding recommendations, see the wording below Recommendation #5. (F4, F5, F6, F7, F8)*

This recommendation will not be implemented.

The county anticipates challenging budget years to come with an ongoing budget deficit and no anticipated substantial increases in discretionary revenue sources, therefore, the county is not in the financial position to commit to funding MIST by the Civil Grand Jury's April 1, 2026 deadline at this time.

As previously noted, the county acknowledges the value MIST brings to the community and is committed to its continued support. Humboldt County's Department of Health & Human Services will actively seek additional funding options to sustain the critical services provided by MIST.

Recommendation 4: *The Humboldt County Department of Health and Human Services and the Humboldt County Sheriff's Office develop and enact a plan to document calls for service where both the Mobile Intervention and Services Team and the Humboldt County Sheriff's Office respond. This is to be completed by no later than January 1, 2025. (F9)*

Funding Recommendation: *The Humboldt County Civil Grand Jury recommends that the Humboldt County Board of Supervisors fund the expenses listed in R1, R2, and R3 with existing appropriations in the current fiscal year. If current appropriations are not sufficient, the Grand Jury recommends that the Board of Supervisors, at its next earliest opportunity, pursue additional funding from an appropriate agency, including state or federal agencies. The Grand Jury further recommends that the Board of Supervisors seek local academic partners to conduct R1 at minimal or no cost to the County.*

This recommendation has been implemented.

The Humboldt County Department of Health & Human Services' Behavioral Health branch has worked with the Humboldt County Sheriff's Office (HSCO) to create a secure email address where calls from dispatch can be emailed to MIST teams for response. Some calls may require a law enforcement only response, while

others may require a joint response of HCSO and MIST, while others may only require MIST to respond. This process allows both the HCSO and DHHS's Behavioral Health team to track all calls and referrals to MIST. These referrals are tracked and reported on quarterly. This process was established in April 2024 and remains operational to date.
