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Dr. Kathleen Edwards
Juvenile Justice Commission Chair
2901 Meadow Lark Drive,
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Response to 2015 JJC Juvenile Facility Inspection – Camp Barrett

Dr. Edwards,

FOLLOW-UP ON 2013 RECOMMENDATIONS-Behavioral Health:

Recommendation made to increase mental health staffing. Staffing remains at previous levels.

RESPONSE:

With the closure of Campo, BHS STAT-Team staff will be transferred to Camp Barrett to provide support and service to youth detained at Camp Barrett.

The 2015 Juvenile Justice Commission recommends that Behavioral Health:

1. RECOMMENDATION:

Approximately 30% of minors at CB are on psychotropic medication, yet a very small number of these minors are followed with mental health services in the community. These transition services are critical to improved outcomes.

RESPONSE:

BHS has an extensive network of resources in the community, including services designed specifically for youth leaving the detention facilities, including the Vista Hill Juvenile Court Clinic. There are multiple ways to access the network of services which include collaboration through the Probation Case Manager. All youth leaving the detention facilities have a Probation Case Manager who supports connection to services outside the detention facilities. BHS STAT-Team is available to provide collateral information to outpatient providers. The BHS System of Care utilizes an Electronic Health Record that affords treating providers access to clinical documents about services received. BHS outpatient services are voluntary in nature and there are times that a youth and his/her family decline offered services. The youth's Probation Officer serves as a case manager and continues to offer and explore service options with the youth and their family, but ultimately the youth has to be amenable to the service.

2. RECOMMENDATION:

The Suicide Watch policy needs clarification. Staff states that any suicidal minor is immediately transferred to East Mesa Juvenile Detention Center. However, two Critical Incident Reports referenced a suicidal minor with no notation of transfer to EM or appointment with the Stabilization, Transition, Assessment, and Treatment Team (STAT team).

RESPONSE:

Policies regarding suicide are being updated to reflect evidence based research. Any person in the detention facility may place a youth on Suicide Watch. Only licensed STAT-Team clinicians may discontinue Suicide Watch status. Probation is reviewing documentation expectations on CIR's to ensure they accurately reflect the events.

3. RECOMMENDATION:

Behavioral Health staff is available only during business hours Monday through Friday. This is not the time when minors are most needy, since they are involved in the school program for six hours a day. Staffing needs to be shifted to include evening and weekend hours. It should be noted that under the current contract, mental health staff is not reimbursed for mileage to and from Camp Barrett.

RESPONSE:

Camp Barrett provides ongoing therapeutic services for a selected group of detained youth. Due to the nature of the needs of youth at Camp Barrett, the behavioral health component has a focus on treatment as opposed to assessment and brief supportive services. Probation provides a structured milieu at all times that promotes the safety and security of youth, as well as general well-being. All youth receive education on how to access mental health support. Staff are trained to assess when mental health support is warranted and to make appropriate, timely referrals. There are situations that call for immediate intervention and generally the initial focus is safety-oriented with follow-up stabilization through a mental health practitioner. When the immediate crisis is psychiatric in nature, there are protocols for accessing appropriate services which at the extreme may include a transfer to the Emergency Screening Unit which is staffed by a multi-disciplinary mental health team.

County staff are compensated for mileage when they have to travel from their primary work site.



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