

**SUBMITTAL TO THE BOARD OF SUPERVISORS  
COUNTY OF RIVERSIDE, STATE OF CALIFORNIA**



**FROM:** Executive Office

**SUBMITTAL DATE:**  
August 28, 2012

**SUBJECT: Response to the Grand Jury Report: 2011-12 Grand Jury Report:  
Riverside County Department of Mental Health – Detention Mental Health Services**

**RECOMMENDED MOTION:** That the Board of Supervisors:

- 1) Approve with or without modifications, the attached response to the Grand Jury's recommendations regarding Riverside County Department of Mental Health – Detention Mental Health Services.
- 2) Direct the Clerk of the Board to immediately forward the Board's finalized response to the Grand Jury, to the Presiding Judge, and the County Clerk-Recorder (for mandatory filing with the State).

**BACKGROUND:** On June 26, 2012, the Board directed staff to prepare a draft of the Board's response to the Grand Jury's report regarding Riverside County Department of Mental Health – Detention Mental Health Services.

Section 933 (c) of the Penal Code requires that the Board of Supervisors comment on the Grand Jury's recommendations pertaining to the matters under the control of the Board, and that a response be provided to the Presiding Judge of the Superior Court within 90 days.

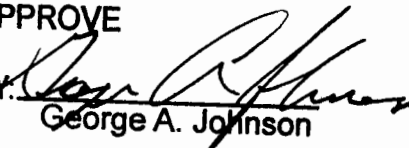
90dayresponsef11detentionhealth08.12

<b>FINANCIAL DATA</b>	Current F.Y. Total Cost:	\$ N/A	In Current Year Budget:
	Current F.Y. Net County Cost:	\$	Budget Adjustment:
	Annual Net County Cost:	\$	For Fiscal Year:

<b>SOURCE OF FUNDS:</b>	Positions To Be Deleted Per A-30
	Requires 4/5 Vote

**C.E.O. RECOMMENDATION:**

**APPROVE**

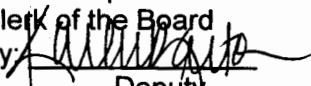
BY:   
George A. Johnson

**County Executive Office Signature**

**MINUTES OF THE BOARD OF SUPERVISORS**

On motion of Supervisor Tavaglione, seconded by Supervisor Buster and duly carried, IT WAS ORDERED that the above matter is approved as recommended.

Ayes: Buster, Tavaglione, Benoit and Ashley  
Nays: None  
Absent: Stone  
Date: August 28, 2012  
xc: EO, Grand Jury, Presiding Judge, Mental Health, Recorder

Kecia Harper-Ihem  
Clerk of the Board  
By:   
Deputy

Prev. Agn. Ref.: 3.3 – 06/26/12 | District: | Agenda Number:

**3.10**

ATTACHMENTS FILED  
WITH THE CLERK OF THE BOARD

Departmental Concurrence

Policy X Policy X

Consent  Consent

Dept's Recomm. Per Exec. Ofc.:

## 2011-2012 GRAND JURY REPORT

### Detention Mental Health Services

#### Findings:

##### Detention Mental Health Staffing.

1. In July, 2011, DMH was advised in a 2010-2011 Grand Jury report and was notified by the Institute of Medical Quality that the medical/mental health staffing levels in county jails needed to be restored to 2007 levels, in order to be in compliance with Title 15, Chapter 4, Article 9. As of this writing, the Grand Jury learned through sworn testimony that during the eight months following the 2010-2011 Grand Jury report, DMH staffing levels were allowed to decrease even further. This was a result of transferring experienced, mental-health, registered nurses out of the jails before licensed clinician replacements were available. The 2012 RCDMH organizational chart reflects currently there are 21 vacant positions out of 40 positions funded with adult detention facilities and three vacant positions out of nine funded in the juvenile facilities. The same chart shows staffing in adult non-detention mental health facilities as having only one vacant position. The Grand Jury learned from sworn testimony that all have the same credentials, but non-detention clinicians have not completed the required background investigation as required by Title 15.

The same issues exist in juvenile facilities, which also experienced staff reductions in 2009. The current 2011-2012 budget has not restored the juvenile facilities staffing of 2007.

The Grand Jury learned from sworn testimony that filling vacant positions in DMH has been made even more difficult due to the non-competitive salary structure.

#### Response:

##### **Respondent disagrees partially with the finding.**

In May 2011, Mental Health Adult Detention Services was surveyed by The Institute for Medical Quality (IMQ). During the survey, the IMQ Surveyors recommended various staffing suggestions which included converting the registered nurse positions to clinical therapist positions. The new model called for Mental Health Detention to provide evidence based practices that combine research based information, clinical expertise and the inmates own needs and values to work towards recovery. Recruitment has been ongoing and to date, over 91% of Detention positions have been filled. In the interim, additional staffing support such as the use of Per Diem Clinical Therapists and overtime for current Department of Mental Health employees has been utilized.

Since 1993, Detention Services has adhered to a pay differential for clinical support staff in both adult and juvenile detention facilities.

Riverside County Department of Mental Health (RCDMH) currently does have vacancies in Juvenile Facilities. The Department makes every effort to fill any vacant positions in Juvenile Detention facilities as quickly as possible. Unfortunately, the hiring process for people working in these facilities is very lengthy.

The Respondent agrees with the statement: *The current 2011-2012 budget has not restored the juvenile facilities staffing of 2007.*

### **Annual Performance Evaluations:**

2. Through sworn testimony, the Grand Jury learned that up to 60 percent of DMH staff working in detention facilities have not received annual performance evaluations as required by Riverside County Board of Supervisors Policy C-21.

### **Response:**

**Respondent disagrees partially with the finding.**

Detention staff within the Department of Mental Health are to receive performance evaluations, but in some cases in juvenile facilities these have not been done in the timely manner consistent with Riverside County Policy C-21. This is most commonly due to changes in supervisory staff assigned to do the evaluations.

### **Communication within Detention Mental Health:**

3. The Grand Jury learned that some detention mental health workers are fearful of communicating with supervisors and/or managers about urgent work-related issues for fear of retaliation. Testimony also revealed that a number of Juvenile DMH clinicians have had onsite visits by their supervisors as few as three times a year.

### **Response:**

**Respondent disagrees partially with the finding.**

RCDMH staff are required to take Harassment Prevention training every three years. They are trained in BOS Policy C-25 in which they are encouraged to communicate relevant issues, including the option to report these directly to Human Resources. They also receive oral briefing and the county Harassment Prevention pamphlet on their rights annually by their supervisor. In this training, staff are empowered to report negative behavior outside of the chain of command. So, there has been a mechanism in place for staff to be trained on and report fears of retaliation.

The Department acknowledges that the flow of information to and from the Probation staff and RCDMH staff could be better.

Respondent agrees with the statement "*a number of Juvenile DMH clinicians have had onsite visits by their supervisors as few as three times a year.*" Supervisors have

been instructed to meet with staff from the juvenile facilities at least monthly and have at least one meeting with them at the detention site quarterly.

**Temporary Replacement of Mental Health Workers:**

4. There is an insufficient number of qualified RCDMH personnel to fill vacancies that may arise in DMH. The requirement for level-one security in the jails makes a temporary assignment impossible when the appropriate level-one background investigation required is not completed. (Currently, juvenile facilities do not require a level-one security background check.) The requirements for a background check are the responsibility of the employing departments (i.e., RCDMH, Riverside County Regional Medical Center, and Riverside County Office of Education.) The background check consists of a fingerprint check for possible criminal background, physical exam, drug/alcohol screening, and education and licensure verification. Probation has the authority, through Title 15, Section 1400, to deny any person permission to work with juveniles; however, Probation is not provided with any background or security information obtained in the investigation.

**Response:**

**Respondent disagrees wholly with the finding.**

Human Resources is carefully monitoring the recruitment of Detention Services staff and the current level is 91%. Since February 2012 Mental Health Detention Services has added staffing support such as the use of Per Diem Clinical Therapists and has provided overtime for current Department of Mental Health employees, all of which have received the appropriate security clearances. This proactive measure has afforded us the opportunity to provide quality mental health services and to respond to request for services in a timely fashion.

**Juvenile Detention Administration Consolidation:**

5. Current organizational charts of RCDMH show that the administration of the five juvenile detention facilities in Riverside County are under three administrators based on their geographical location. The staffing of DMH workers under these three administrators represents approximately two to five percent of their staffing, as they are also responsible for over 100 other employees. This situation does not allow effective personnel management among facilities as needed or free communication with Probation or within DMH.

**Response:**

**Respondent agrees with the finding.**

Effective August 1, 2012, the Department of Mental Health has consolidated the management and supervision of the mental health services in the juvenile facilities. Organizationally, the management of these programs and staff will be under the

Western Children's Mental Health Services Administrator whose scope of authority will now include Indio Juvenile Hall, Southwest Juvenile Hall, Riverside Juvenile Hall, the Youthful Offenders Program and Twin Pines Ranch (Van Horn Youth Center has closed). The Department is in the process of hiring a Supervisor to oversee the staff at these programs.

**Memorandum of Agreement for Juvenile Facilities:**

6. Sworn testimony from various sources in the RCDMH, DMH and Probation revealed mental-health-care services for in-custody juveniles lacks an adequate number of therapists and clerical assistants. This prevents provide mental-health services from being effective, as required by Title 15. The Probation director is responsible for the security of everyone in a juvenile facility per Title 15, but is not authorized access to the results of the findings of pre-employment investigation conducted by another agency for their employees.

Pre-employment background checks for RCDMH, Riverside County Regional Medical Center, and Riverside County Department of Education employees that work in juvenile custody areas are being conducted by the person's employing department without the Probation's involvement.

In addition, it was brought to the attention of the Grand Jury, through sworn testimony, that in some juvenile facilities mental-health records are not being completed in a timely manner as directed by Title 15, Section 1406, which states that the examination and paper work must be completed in 96 hours.

**Response:**

**Respondent disagrees partially with the finding.**

When fully staffed, all Juvenile Detention facilities have 50 juveniles per 1 clinician ratio. This staffing ratio has been agreed upon by RCDMH and the Department of Probation and more recently signed into Memorandum of Agreement. Clerical staff in each facility has been adequate to meet the needs of the programs.

Mental Health follows uniform procedures for hiring per requirements of our Human Resources department and Ordinance 440. If a Mental Health candidate for work at a Juvenile Facility passes the HR process then the recommendation is to move on to the Probation background check. Sharing the results of this process with another department would be considered a breach of confidential personnel information and outside of the policies/procedures of the department. The Probation Department will conduct its own background check of potential Mental Health Department candidates to work in juvenile detention.

Examination of the children referred to mental health occurs within 48 hours or less of the mental health staff receiving the referral. If there is an urgent or emergent psychiatric issue, then the child can be assessed more quickly. Specifically, the minor can be assessed by the RCDMH Emergency Treatment Services in

Riverside/Southwest and the Oasis Center in the Desert 24 hours per day for 7 days per week, if he or she displays acute psychiatric symptoms. The current standard for documentation of all services for the Department is same-day as service, and not later than one day in critical circumstances. The Department's electronic health record system provides supervisors with reports on paperwork completion.

### **Referral Process in Adult Detention:**

7. Sworn testimony by mental health workers and correctional staff indicate procedures for generating and tracking mental health referrals in the adult detention facilities as being insufficient in their compliance with Title 15, Division 1, Chapter 1, Subchapter 4. Current problems are:
- delays in notifying DMH of problems, concerns and requests for service,
  - significant backlogs of adult referrals, particularly with the new AB109 transfers,
  - no visual tracking or status reporting of referrals, and
  - collected data does not separate critical requests from routine, thereby making the severity of a problem difficult to ascertain

### **Response:**

#### **Respondent disagrees wholly with the finding.**

Pursuant to the requirements in the Sheriff Detention Services Memo of Agreement, which was signed December of 2011, there is a reporting process and tracking system to determine the following information:

- Number of mental health cases open on the last day of the month
- Number of new mental health cases open for the month
- Number of inmates receiving psychotropic medications
- Average response time to inmate mental health requests
- Number of mental health Safety Cell evaluations/Assessments completed
- Number of Psychiatrist encounters
- Number of mental health clinical encounters
- Average number of inmates requiring housing
- Assignment to mental health shelter housing beds

In addition, with the successful hiring, recruitment and use of both Per Diem and current Departmental staff, the backlog of requests for mental health services from inmates and the average wait time for services has been significantly reduced.

**Gaps in Coverage:**

8. The Grand Jury learned, through sworn testimony, that mental-health Crisis management has been reported by DMH to have gaps in its mental-health coverage. Outlying juvenile detention facilities often do not have mental-health coverage in the after-hours. Transportation of an individual requires by law, at least two officers. This takes the officers away from the facility for up to six hours. This may require outside assistance such as, but not limited to, fire department paramedics and ambulance services.

**Response:**

**Respondent disagrees partially with the finding.**

Every child in juvenile detention facilities experiencing an acute psychiatric episode has 24 hour 7 days per week access to mental health services through Emergency Treatment Services or the Oasis Crisis Services. There are no gaps in coverage due to this access provided transportation services are available. Mental Health staff are available to provide crisis services at the juvenile detention facilities Monday through Friday during regular department business hours.

**Recommendations:**

1. RCDMH must maintain required staffing levels in detention facilities by ensuring existing mental health staff, outside of detention facilities, can be transferred temporarily into detention facilities until full-time replacements can be secured. RCDMH must perform a comparative salary survey of other agencies and adjust salary structures accordingly.

**Response:**

**The recommendation has been implemented.**

Since February 2012, recruitment for Mental Health Adult Detention Services has been ongoing and to date, over 91% of Detention positions have been filled. Additionally, supplemental support such as the use of Per Diem Clinical Therapists and overtime offered for current Department of Mental Health employees, have greatly improved staffing levels. This has not yet been utilized in Juvenile Detention services but is available and will be utilized as needed.

At this time the Department is filling open positions and therefore do not agree that there is a need for a comparative salary survey at this time. Further, the Department does not have the authority to conduct such a study nor adjust salary structures.

2. RCDMH must ensure that DMH workers have annual performance evaluations as directed by Riverside County Policy C-21.

**Response:**

**The recommendation has been implemented.**

Mental Health Detention Services strives to complete its employee's annual performance evaluations in a timely manner, per Riverside County Policy C-21. Department supervisors currently receive email notifications 30 days in advance of an employee annual evaluation being due. Additionally, Department Supervisors and Management are provided with reports from Human Resources throughout the year addressing compliance with Policy C-21.

3. DMH supervisors and managers must be given appropriate training as dictated by Riverside County Policy C-23 to ensure they are afforded access to information regarding the requirements and responsibilities of their positions. RCDMH and DMH department heads, managers, and supervisors must receive mandatory follow-up training by the Center for Government Excellence, focusing on the areas provided in the "Better Riverside County Supervisor Competency Clusters":
  - Communicating Effectively,
  - Inspiring Others,
  - Managing Diverse Relationships, and
  - Being Open and Receptive.

The County Human Resources Department will not only document, but must ensure there is frequent and ongoing training of supervisors and managers, provided by the Center for Government Excellence in its Management and Supervisory Excellence Academies.

RCDMH must implement a suggestion program to encourage open communication between administrators and DMH workers. When DMH supervisors are not located in the same geographical area as the clinicians, the supervisors must make frequent visits to the worksite to assist, direct and oversee the operation of DMH workers at the detention facility.

**Response:**

**The recommendation has not been implemented but will be implemented in the future.**

All of the Mental Health Detention Supervisors have either attended the Supervisory Excellence Academy training offered through RCMHD, are currently enrolled in the courses previously mentioned or will be enrolled at the next available session. Expected date that all current management and supervisory staff will complete this is July 2013.

The Mental Health Services Supervisors at the detention facilities where supervisors are off-site will meet with detention staff at the facility once per month



Additionally, the Mental Health Detention Services Manager will continue to meet with line staff once per quarter at each jail and attend at least one staff meeting monthly to foster open communication with staff, ensure accessibility, and to oversee the details of the daily operations.

The Human Resources Department's Center for Government Excellence (CGE) provides frequent training as well as Management, Supervisory and Leadership Academies to comply with all Riverside County policy requirements and assist departments in meeting their training goals. Class scheduling and attendance records are maintained by CGE, and CGE encourages class participation on a regular basis.

4. RCDMH must provide qualified backup mental-health staff for temporary assignment to detention facilities. These individuals must have the appropriate security clearance and be compensated appropriately if and when they are transferred to detention facilities.

**Response:**

**The Recommendation has been implemented.**

Currently, Mental Health Adult Detention Services utilize Per Diem Clinical Therapists in the jail setting. Additionally, overtime is offered for full time Department of Mental Health employees. The Per Diem and overtime staff are also available for Juvenile facilities when needed.

All Adult Mental Health Detention Services employees, including Per Diems and Department staff assisting through over-time, have received the appropriate security clearance and are compensated according to contracts set forth by the Human Resources Department.

5. RCDMH must consolidate juvenile DMH personnel positions under one administration.

**Response:**

**The recommendation has been implemented.**

Effective August 1, 2012, the Department of Mental Health has consolidated the management and supervision of the mental health services in the juvenile facilities. Organizationally, the management of these programs and staff will be under the Western Children's Mental Health Services Administrator whose scope of authority will now include Indio Juvenile Hall, Southwest Juvenile Hall, Riverside Juvenile Hall, the Youthful Offenders Program and Twin Pines Ranch (Van Horn Youth Center has closed). The Department is in the process of hiring a Supervisor to oversee the staff at these programs.

6. DMH and Probation must develop a Memorandum of Agreement that addresses the staffing, security level, and scope of work issues required to address the needs of the juvenile population meeting the requirements of Title 15. Probation and RCDMH shall initiate an independent study possibly through the Institute of Medical Quality, a subsidiary of the California Medical Association, that completed a similar study for the Riverside County Jails.

**Response:**

**The recommendation has not yet been implemented, but will be implemented in the future.**

A Memorandum of Agreement has been developed between the Department of Probation and the Department of Mental Health. The MOA addresses staffing, security level, and scope of work among other issues. It is currently at County Counsel for review.

The recommendation for an independent study by the Institute of Medical Quality or a similar entity is solely at the discretion of the Probation Department. The Probation Department has indicated that it is in the process of initiating an inspection by the Institute of Medical Quality or a similar entity. The inspection will be used to ensure that the proper level of medical and mental health care is being provided to minors in custody or in probation treatment facilities. RCDMH will participate in the process.

7. The Sheriff's Department and DMH must establish a committee to revamp the current referral and reporting process to separate the urgent requests from the routine.

**Response:**

**The recommendation has been implemented.**

Mental Health Detention Services employees adhere to its Program's Policy and Procedure 300: Triage - when addressing referrals. This policy allows for a very methodical process for which to review and separate routine request from urgent request, on a daily basis. Crisis situations/requests are addressed immediately in all jail settings.

8. RCDMH must establish a backup plan to move DMH clinicians rather than moving the patient. It must further utilize an existing video system or install a video conferencing system at these outlying facilities connecting them to a location where services can be provided.

**Response:**

**Recommendation will not be implemented because it is not warranted or is not reasonable.**

Mental Health staff are available to provide crisis services at the juvenile detention facilities Monday through Friday during regular department business hours as agreed to in the pending MOA with Probation. During these hours Mental Health staff responded to routine and crisis mental health situations as they arise, and attend to the previous working days' routing service needs. Every child in juvenile detention facilities experiencing an acute psychiatric episode has 24 hour 7 days per week access to mental health services through Emergency Treatment Services or the Oasis Crisis Services. As such, emergency crisis evaluation services that arise after hours must be provided off-site. Current demand for this does not warrant assigning additional staff resources. If demand for this service increases then the Department will reconsider increasing coverage.

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