

County of Santa Clara
Santa Clara Valley Health & Hospital System



79301 A

DATE: December 15, 2015

TO: Board of Supervisors

FROM: Maryann Barry, Director, Custody Health Services

SUBJECT: Augmentation of Behavioral Health Services to Inmates in County Jail

RECOMMENDED ACTION

Consider recommendations related to the provision of behavioral health services to the inmates incarcerated in the County Jails through the development of twelve (12) teams of behavioral health professionals. (Santa Clara Valley Health and Hospital System)

Possible action:

- a. Approve plan to augment the provision of behavioral health services to the inmates incarcerated in the County Jails through the development of twelve (12) teams of behavioral health professionals who will deliver a broad range of services to inmates who are housed throughout the County Jails.
- b. Approve request for Appropriation Modification No. 129 - \$1,834,586, transferring funds from the General Fund Contingency Reserve to Behavioral Health Services, increasing revenues and expenditures in the Custody Health Services budget, the Santa Clara Valley Medical Center budget, and the Behavioral Health Services budget related to Custody Behavioral Health Services staffing and contract services. (4/5 Roll Call Vote)

FISCAL IMPLICATIONS

The recommended action transfers \$5,777,236 from the General Fund Contingency Reserve to the Behavioral Health Services Department-Mental Health Services to allow the Department to reimburse Custody Health Services for the cost of providing expanded Mental Health and Substance Use Treatment Services to clients housed in the jail. Other budget modifications include increasing expenditures and reimbursements for those expenditures in the Santa Clara Valley Medical Center budget and the Behavioral Health Services Department-Substance Use Treatment Services budget. The salary expenditures assume a start date of April 2016 for all 59 positions. The recommended Salary Ordinance only includes 58 of the 59 positions. The Department will bring a Legislative File to the Board in January 2016 to add an Administrative Services Manager after further discussions with the

Employee Services Agency. Approximately \$2,946,625 of this allocation is for services and supplies.

The approximate FY 2017 cost of this action is approximately \$16,666,929 and will be included in the County Executive's FY 2017 Recommended Budget.

The Department of Correction will work with the Office of Budget and Analysis to see what level of overtime funding might be needed to support these teams for FY 2016 and will likely need to receive additional overtime funding to support this work. The Department of Correction will also need to add positions to work with these teams in FY 2017 and that is expected to happen as part of the FY 2017 Recommended Budget.

REASONS FOR RECOMMENDATION

For the past three years, the number of mentally ill inmates who are detained in the Santa Clara County Jails has increased on an annual basis from 12,308 in calendar year 2012 to 13,349 inmates in calendar year 2015; to the point of reaching approximately 50% of the incarcerated population. Substance use is also common amongst those who are booked into Jail.

Since 2011 with the inception of AB109, the Jail population increased; the census has ranged from 3,500 in 2011 to 4,100 in 2014. In addition, inmates are incarcerated for longer periods of time which requires a more extensive provision of services than had been provided historically to the inmate population who were only detained for a few months. The Jails have become more reflective of the prisons, rather than the short term facilities that they were prior to 2011.

Due to the significant increase in the mentally ill population in the Jails and their longer incarcerations, the Custody Health Services Department has had difficulty in expanding services to meet the needs of this population within its existing operations or approved budget.

A new staffing plan has been developed to meet the behavioral health care needs of the inmate population, particularly the Serious Mentally Ill (SMI) inmate population, SMI inmates with complex medical cases, as well as inmates with intellectual disabilities. It is anticipated that upon implementation of the proposed pilot plan, the SMI inmates and those intellectual disabilities or Substance Use disorders will be provided an array of behavioral health services throughout their period of incarceration, which will also assist this population of inmates in successfully re-integrating into the community upon their release. The intent of this pilot is to begin with five (5) teams in Fiscal Year 2015-16, increasing to 12 teams during FY 2017 as the Sheriff's Office is able to address space and security concerns. As a pilot program, progress would be evaluated and modifications made, as deemed necessary to best provide these behavioral health services. Additional staffing will be needed for the Department of Correction to support these teams, and that will be handled utilizing overtime in FY 2016 and potentially with new Correctional Deputy positions in FY 2017.

CHILD IMPACT

The recommended action will have no/neutral impact on children.

SENIOR IMPACT

The recommended action will have no/neutral impact on seniors.

SUSTAINABILITY IMPLICATIONS

The recommended action will have no/neutral sustainability implications.

BACKGROUND

Historically, the scope of Mental Health services provided in the Jails has ranged from Crisis Intervention, Medication Management, Support Counseling, and Acute Psychiatric Services. The scope of Substance Use Treatment (SUT) services provided in the Jails has been detoxification. This range of services was established and enhanced over the years to meet the needs of the existing mentally ill inmate population. Due to the dramatic increase in the inmate population over the past several years, compounded with extensive lengths of stay in the Jails, the existing service plan is no longer sufficient to meet the needs of the existing population, particularly those confined for long periods of time. The inmate population has additional needs that the Custody Health Services Department intends to address. Analysis has begun regarding what is required to address the needs of the most fragile inmates (those with SMI, SMI with complex medical cases and inmates with intellectual disabilities).

An augmented plan of service delivery has been developed which will be phased into place over a course of time to insure its success and sustainability, taking into consideration the safety of staff and inmates, as well as the level of services warranted by the inmates' condition and confinement. The intent of the proposed service delivery plan is to have 12 teams provide an array of behavioral health services to inmates with SMI, substance use needs or with intellectual disabilities. The team would be comprised of psychiatrists, psychologists, therapists or psychiatric social workers, a psychiatric nurse, and substance use counselors. The teams would be supported by a pharmacist, pharmacy specialist and pharmacy technician. As the team members interact with inmates or as other Custody Health staff identify emerging needs, referrals for additional screenings would be made.

Inmates identified as having SMI, substance use issues or intellectual disabilities would have treatment/service plans developed for their personal needs and the teams would then provide those services. In addition to providing the treatment/services, attention would be paid to release dates. For those inmates with a known release date, transition plans to providers in the community would be developed. The substance use team members would conduct a warm hand-off to providers in the community. The work underway through the Mentally Ill Officer Crime Reduction grant would dovetail with the expansion of services by providing a mechanism and process through which inmates with a Serious Mental Illness will receive a discharge plan before release and have a warm hand-off to a community provider.

The primary goals for the 12 teams would be:

- To address critical gaps in care for seriously mentally ill in custody settings
- To stabilize the condition of seriously mentally ill inmates
- To address substance abuse needs of inmates

- To improve access to interdisciplinary care for the mentally ill and dually diagnosed
- To move from acute crisis-oriented care to on-going clinical care.

The major process improvements that the 12 teams would focus on:

- To provide timely assessments during booking process by psychiatric team
- To enhance needs assessment of inmates with intellectual disabilities and/or co-occurring conditions
- To improve adherence to prescribed treatment
- To improve discharge planning and transitions of care into community
- To strengthen linkages to community-based providers.

The expected outcomes for the 12 teams would be:

- Timely care by reducing wait times for assessments and necessary appointments
- Decreasing the average length of stay and number of admissions to the Acute Psychiatric Unit (8A) in the Main Jail
- Reducing the number of adverse events, including reduction of cell extractions, solitary confinement and crisis calls
- Decreasing inmate assaults on staff and other inmates
- Decreasing suicide attempts
- Stabilize addiction signs and symptoms and initiate or restore a recovery process
- Reducing overall recidivism of mentally ill and dual diagnosis inmates.

This will require a high degree of coordination between Corrections and Custody Health staff. The Sheriff's Office determines the classification and clustering of inmates, and is responsible for addressing space and security issues.

Custody Health staff conduct the screening of inmates to identify behavioral health and medical needs, then develop and implement treatment plans for those inmates. Space and grouping issues are addressed with the Corrections staff.

To ensure the implementation of the 12 teams is moving forward and the goals, process improvements and outcomes are progressing, an Oversight Coordinating Committee is being developed. The Committee will meet on a weekly basis to review progress and address any issues or barriers to success.

As additional research is completed (such as identification of persons with intellectual disabilities and appropriate services within the Custody setting), a more robust implementation plan will be prepared and presented to the Board of Supervisors.

As described above, this plan would be phased in over time, as space and security issues are addressed. It should be noted that work has already begun to improve behavioral health services in the Jails.

Work Already Underway

The first phase of the augmented service delivery plan has been the expansion of the number of Psychiatrists assigned to the Jail. In October of 2015, the Board of Supervisors approved a contract with Transitions Behavioral Health (TBH) for the augmentation of Psychiatrists to the Jail, which when fully implemented, will ultimately provide for additional Psychiatric physician coverage in the Jails seven (7) days a week, inclusive of Psychiatric physician services at Intake.

In October of 2015, the County provided for a 25% differential for County Psychiatrists who work in the Jails. This differential served as the impetus to filling two Psychiatrist codes which had remained vacant for long periods of time. Additionally, Dr. Tiffany Ho has been appointed as the Medical Director for Behavioral Health Services.

Proposed Augmentation

The second phase of the augmented service delivery plan would be the development of 12 teams of mental health professionals who will be assigned throughout the Jails to provide a full array of Behavioral Health services to the inmates, particularly to the SMI and Developmentally Delayed inmates. Each of the 12 teams would consist of: one (1) Psychiatrist, one (1) Attending Psychologist, and one (1) Marriage, Family Therapist. The team would be supported clinically by Psychiatric Nurses, Behavioral Health (both mental health and substance use) staff and Pharmacy staff.

Additionally, appropriate level of the teams' Management staff would be assigned to administer the overall operations as well as provide clinical supervision for team members. The Sheriff's Office, Custody Bureau will be assigning Custody Officers to the teams to insure safety and security within the Jail for both staff and patients.

The teams would also need several positions to provide the infrastructure support for their work which would consist of Quality oversight, Training/Education, data and financial analysis, clerical support, IT support, and recruitment activities. The Senior Health Care Program Manager position would oversee all 12 teams and work with the infrastructure and support staff to monitor progress. (A chart showing all the positions is attached.)

Behavioral Health & Services for the Intellectually Disabled

The multidisciplinary behavioral health teams consisting of psychiatrists, psychologists, clinical social workers/marriage family therapists, psychiatric nurses, and substance use counselors would provide comprehensive behavioral health evaluations and treatment services to inmates with serious mental illness and other mental health and substance use disorders.

The Custody Mental Health teams would be multidisciplinary in nature, consisting of a Psychiatrist, Clinical Psychologist, Marriage, Family Therapist/Licensed Clinical Social Worker, Psychiatric Nurse, Substance Use Therapist, and Custody Officers. The teams

would assume the responsibility for the development of a individualized treatment plan for each inmate assigned to their teams.

The overall oversight for the development of, and implementation of the teams would be the responsibility of the Sr. Health Care Program Manager.

The physician on each team would serve as the Team Captain and assume responsibility for the coordination of care delivered by the team members, as well as the responsibility for the development of the individualized treatment plans for the inmates assigned to their respective teams.

The teams would provide an array of psychotherapeutic treatment, inclusive of group therapy, individual therapy, trauma recovery services, medication management, health education, re-entry transition services, family support, and case management services.

As it is well documented that inmates with serious mental illness tend to have triple diagnoses: complex mental health and substance use disorders as well as significant physical health disorders, the team members would carry out the following functions.

Psychiatrists would serve as clinical leaders of the behavioral health teams, providing clinical direction and training of other clinical staff. They would perform psychiatric examination and diagnosis, assess for medical or substance use conditions which may impact the mental health conditions of the inmate, and provide psychiatric treatment which may include one or more psychiatric medications. Upon their evaluations, psychiatrists may refer patients to other team members for more in depth evaluations such as neuropsychological testing, supportive and cognitive behavioral therapy, and/or substance use counseling. They may also refer inmates for more in depth medical evaluations by primary care doctors.

Under the direction of the psychiatrist, the psychiatric nurses would perform a variety of specific essential duties, including taking vital signs including weight, blood pressure, and pulse. They would verify medications reported to be taken prior to jail admission. They would obtain oral and long acting injectable medications from pharmacy and administer medications under the order of a psychiatrist. They would coordinate closely with the psychiatrists and other team members to inform them of lack of adherence with medications, as well as any side effects.

Psychologists would conduct psychological and neuropsychological assessments to further elucidate complex neuropsychiatric conditions such as an intellectual disability, traumatic brain injury, autism spectrum disorders, and personality disorders. They would provide

individual and group therapy covering key areas including life skills, illness management and recovery, trauma, anger management, social skills, reading, and literacy skills.

Clinical social workers and/or marriage and family therapists would perform case management functions and other duties. They would obtain collateral from community treatment providers, and in consultation with other team members, provide linkages to services in the community. They would also work together with the psychologists to develop individualized treatment plans for inmates with serious mental illness and other ongoing mental health conditions such as depression, anxiety disorders and post-traumatic stress disorders.

Certified/licensed drug and alcohol rehabilitation counselors would provide substance use assessment and treatment, through individual and group counseling, as well as psycho-educational classes. They would utilize the American Society of Addiction Medicine (ASAM) criteria to assess the immediate and ongoing needs of inmates, based on the severity of their signs and symptoms and stage of change. They would use evidence-based practices, such as Motivational Interviewing, 12 Step Facilitation, Relapse Prevention, Getting It Right, and Living in Balance, with living skills training, and the matrix model for criminal justice in their work with inmates. As inmates prepare for their return to the community, the rehabilitation counselors would determine their substance use treatment needs and arrange for transition to residential or outpatient community services.

The services that the teams would provide include psychiatric diagnoses, pharmaceutical management, individual therapy, group therapy, case management, development of individualized treatment plans and re-entry services.

Services for Intellectually Disabled inmates will be developed, along with implementation of a more robust identification process. Tools will be acquired to better identify inmates with developmental delays and services to support them would be developed.

Substance Use Services and Post-Release Transition

Substance use treatment services would be provided to inmates identified as needing services. In-Custody Substance Use Treatment (SUT) services in the Jail would be provided through Community-based organizations which would facilitate transitioning inmates post-release into continued treatment. The SUT services would be provided by four-and-a-half (4.5) certified/licensed drug and alcohol counselors and a part time program manager and support staff (contracted staff).

When the clients, identified above, are close to release (two weeks prior to scheduled release) the team would connect with the inmates (and their counselors) and prepare a discharge plan to help them transition from in-custody back into the community. This discharge plan would include offering treatment services, in the community, through the Behavioral Health Services Department (BHSD). The team would be mobile and have the ability to work in the field. Where appropriate, the team would transport the inmates to their initial treatment appointment. The team would provide other case management linkages that are critical to the inmate's return to the community.

BHSD/SUTS would also provide an additional 24 beds in Transitional Housing Units for the inmates who are released and admitted to Outpatient Substance Use Treatment Programs. These transitional housing units are for those who have no safe, clean and sober place in the community to live. These beds would be exclusive to those inmates not associated with other funding sources.

The work underway through the Mentally Ill Offender Crime Reduction (MIOCR) grant would dovetail with the expansion of services by providing a mechanism and process through which inmates with a Serious Mental Illness will receive a discharge plan before release and have a warm hand-off to a community provider.

Ramping Up

Planning for implementation of the teams is underway, with special consideration being given to those hard-to-recruit positions. Upon acquisition of adequate numbers of Custody personnel to secure a safer environment for team implementation, and adequate space for service provision, the teams will be implemented over a period of time to insure success of each of the teams. It is anticipated that five (5) teams will be implemented by the end of FY 2016. The five (5) teams will focus on the Seriously Mentally Ill inmates who are housed at both the Main Jail and the Elmwood Facility. Two teams will be deployed to the Main Jail, two teams to the Elmwood Men's Facility and one team to the Women's Facility at Elmwood. Substance use treatment service needs would be identified through both the intake process and subsequent interactions with the inmates; inmates would be screened for SUT needs post-release and a warm hand-off to community providers made.

As additional staff can be hired and matched with Custody Officers, additional teams will be launched. These teams would address inmates with Intellectual Disabilities, mental illness and complex medical cases.

In order to insure that the teams are functional as soon as possible, contract services may be used for some positions, but the goal would be to ultimately fill all positions with County employees.

CONSEQUENCES OF NEGATIVE ACTION

The augmented behavioral health services would not be provided.

STEPS FOLLOWING APPROVAL

Clerk of the Board is requested to send notification to Maryann Barry (maryann.barry@hhs.sccgov.org), Amy Carta (amy.carta@hhs.sccgov.org) and Melissa Erickson (melissa.erickson@hhs.sccgov.org).

LINKS:

- Linked To: 79246 : Adoption of Salary Ordinance No. NS-5.16.80 amending Santa Clara County Salary Ordinance No. NS-5.16 relating to compensation of employees, adding twelve Attending Psychologist, one Executive Assistant II or Executive Assistant I, three Health Care Program Manager II, one Office Management Coordinator, three Office Specialist III, six Psychiatric Nurse II or Psychiatric Nurse I, 12 Psychiatric Social Worker II or Marriage & Family Therapist II or Marriage &

Family Therapist I or Psychiatric Social Worker I, one Quality Improvement Manager - Acute Psychiatric Services, one Senior Management Analyst, one Senior Health Care Program Manager and one Senior Mental Health Program Specialist positions in Custody Health Services and adding one Pharmacist, one Pharmacist Specialist or Pharmacist, one Pharmacy Technician, twelve Psychiatrist and one Senior Health Care Financial Analyst positions in Valley Medical Center. (Santa Clara Valley Health and Hospital System)

ATTACHMENTS:

- Staffing for 12 Teams Plus Roles 120815 (PDF)
- F85-129 REV (PDF)

Staffing for 12 Teams				
Title	Classification	Job Code	FTE	Services Provided
Psychiatrist	Psychiatrist	P55	12.0	Provides psychiatric services in a multidisciplinary team settings with nurses, psychologists, therapists, and other behavioral health professionals; Completes intake assessments and formulates diagnoses; Prescribes psychiatric medications and adheres to medication practice guidelines
Clinical Psychologist	Attending Psychologist	P95	12.0	Provides individual and group psychotherapy; Conducts neuropsychological and psychological assessments; Works closely with a multi-disciplinary team, including psychiatrists, clinical nurses, social workers, clinicians and other behavioral health team members
Marriage Family Therapist (MFT)/Psychiatric Social Worker (PSW)	Marriage Family Therapist (MFT)/Psychiatric Social Worker (PSW)	P96/Y 41	12.0	Performs intensive counseling, psychotherapy, case management and treatment services; Cooperates with other providers and community agencies to carry out treatment plans
Psychiatric Nurse	Psychiatric Nurse	S57	6.0	Provides nursing care to psychiatric patients and assists in the administration of psychiatric treatments; administers psychiatric medications; educates patient and family on how to follow psychiatric treatments after discharge/release
SUPPORT STAFF INFRASTRUCTURE (for all twelve teams):				
Pharmacist	Pharmacist	R27	1.0	Transcribes provider orders to patient medication profiles in Correctional Institution Pharmacy Software (CIPS); Reviews all medication orders prior to being dispensed, Monitors the safety and efficiency of drug therapy through the maintenance of medication profiles in CIPS
Quality Improvement Clinical Pharmacist	Pharmacist Specialist	P40	1.0	Monitors all areas of Custody Health Pharmacy Services to ensure compliance with federal, State, TJC medication management standards; Provides professional guidance/consultation to pharmacy/medical staff
Pharmacy Technician	Pharmacy Technician	R29	1.0	Prepares and fill medication orders; Maintains inventory and stock, including ordering, distribution, receiving, unpacking, marking, controlling, and record keeping; Operates and maintains Talyst dispensing system at both jails.
Quality Director	Quality Improvement Manager - Acute Psychiatric Services	S72	1.0	Assesses QI/RM needs and trends for the Acute Psychiatric Services; Evaluates and formulates annual program reviews; Collaborates with clinical and administrative staff to develop monitoring methods and forms to facilitate patient management, safety evaluation, performance appraisal, and tracking of data necessary for quality improvement and reporting
Pilot Program Director/clinical	Senior Health Care Program Manager	C82	1.0	Manages health care program activities including planning, coordinating, prioritizing, monitoring, and participating in the agency-wide program meetings; Oversees and/or participates in the development, implementation and maintenance of the program goals, objectives, policies and procedures to ensure program goals are achieved
Mental Health Shift Supervisors	Health Care Program Manager II	C83	3.0	Plans and reviews work plan for services -responsibilities program design and program site maintenance; Coordinates the selection and training of personnel; assumes responsibility for evaluating assigned personnel
Mental Health Staff Educator	Senior Mental Health Program Specialist	P13	1.0	Develops comprehensive plans for mental health programs; Plans, organizes and directs periodic indepth program evaluation of community health centers

Pilot Program Director/administrative	Administrative Services Manager II/III	B2J	1.0	Plans, organizes, directs and coordinates central administrative activities such as clerical services; Liaison to other County Departments; Consults with the executive head of the department in the formulation of policies and inter-departmental relationships
Finance Analyst	Senior Healthcare Financial Analyst	B9F	1.0	Conducts or participates in a variety of health and hospital related financial, systems and analytical studies; performs cost studies; and conducts feasibility studies
Analyst	Senior Management Analyst	B1N	1.0	Conducts complex and diverse organization, policy, systems, methods and procedures, studies and other staff analysis activities in the field of management
Clerical Supervisor	Office Manager Coordinator	C76	1.0	Interviews and recommends clerical staff for hire; Confers with administration on office policies and procedures; Implements new or revised office policies and procedures
Clerical Support	Office Specialist III	D09	6.0	Performs variety of clerical duties; Provides support by searching for and abstracting technical data and composing routine letters;
Executive Assistant to Behavioral Health Medical Director	Executive Assistant II - Confidential clerical	X15	1.0	Relieves the director of routine as well as significant administrative details; Assists in conducting research and gathers data requiring judgement and discretion; Maintains office files and records, including those of confidential nature
SUTS Contractors				
In-Custody & Jail Transitions Team Certified/Licensed Rehabilitation (Drug and Alcohol) Counselors	These Substance Use Treatment Services (SUTS) will be contracted out to a community-based treatment provider via a procurement process. Of note: the majority of SUTS services are contracted out.		4.5	Conduct substance use treatment assessments using a standardized assessment tool based on the ASAM criteria to determine clients' level of severity and risk; work with the treatment team to integrate substance use treatment plan focused on client need and stage of change; utilize evidence-based practices; conduct recovery groups and work with transition team to ensure successful discharge to community. Meet with in-custody clients/inmates, identify clients' community-based service needs and residential or outpatient provider, connect provider to inmate prior to release, ensure all necessary discharge components are in place.
In-Custody & Jail Transitions Team Manager	The management of the SUTS team would be provided through the contract cited above.		1	Provide oversight, management and coordination of SUTS team members and services.
Staff support	Support would be provided through the contractor.		0.5	Support staff for SUTS members

COUNTY OF SANTA CLARA
REQUEST FOR APPROPRIATION MODIFICATION
FISCAL YEAR = 2016

Agency/Department Name: Santa Clara Valley Health and Hospital System	Fiscal Year 2016
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Line #	Description	Fund	Superior Fund Center	Cost Center	General Ledger Account	Job Class	Funded Program	Revenue	Expenditure	
1	Advertising	0001	0414	4541	5255150				200,000	
2	Budget Salary Reduction	0001	0414	4541	5107100				(1,637,024)	
3	Budget Salary Reduction	0060	0921	6715	5107100				(131,664)	
4	Budget Salary Reduction	0060	0921	6844	5107100				(34,767)	
5	Budget Salary Reduction	0060	0921	6919	5107100				(1,027,154)	
6	Contract Services	0001	0414	4541	5255500				50,000	
7	Contract Services	0001	0417	4600	5255500				1,512,625	
8	Contract Services	0060	0921	6919	5255500				500,000	
9	FICA - Employer Share	0001	0414	4541	5110400	B1N			2,824	
10	FICA - Employer Share	0001	0414	4541	5110400	C76			2,139	
11	FICA - Employer Share	0001	0414	4541	5110400	C82			3,352	
12	FICA - Employer Share	0001	0414	4541	5110400	C83			9,030	
13	FICA - Employer Share	0001	0414	4541	5110400	D09			3,957	
14	FICA - Employer Share	0001	0414	4541	5110400	P13			3,255	
15	FICA - Employer Share	0001	0414	4541	5110400	P95			34,356	
16	FICA - Employer Share	0001	0414	4541	5110400	S57			21,876	
17	FICA - Employer Share	0001	0414	4541	5110400	S72			5,404	
18	FICA - Employer Share	0001	0414	4541	5110400	X15			1,937	
19	FICA - Employer Share	0001	0414	4541	5110400	Y41			27,624	
20	FICA - Employer Share	0060	0921	6715	5110400	P40			4,071	
21	FICA - Employer Share	0060	0921	6715	5110400	R27			3,881	
22	FICA - Employer Share	0060	0921	6715	5110400	R29			1,563	
23	FICA - Employer Share	0060	0921	6844	5110400	B9F			2,824	
24	FICA - Employer Share	0060	0921	6919	5110400	P55			67,056	
25	Health Insurance	0001	0414	4541	5110200	B1N			9,160	
26	Health Insurance	0001	0414	4541	5110200	C76			9,160	
27	Total forwarded from other pages (Page 2 to 5)								1,834,586	2,189,101
TOTAL								1,834,586	1,834,586	

REASON FOR REQUEST: (Require to check one and indicate brief description)
 Re-appropriate prior year unspent expenditures (one-time)
 Others

Brief Description: To augment the provision of behavioral health services to the inmates incarcerated in the County Jails.

OBA Log		Prepared By :
F 85 Number: 129		Name (print): Martha Paine
		Telephone: (408) 885-6860
		Clerk of the Board
PBF Form Instance(s) ID		Approved by the Board of Supervisors
CMB Form ID#: 8957, 8958, 8990, 9064		
IC Form ID#: 9029, 9030, 9031, 9028, 9063		
		Clerk of the Board
		By: _____ Date: _____

Attachment: F85-129 REV (79301 : Augmentation of Behavioral Health Services to Inmates in County Jail)

COUNTY OF SANTA CLARA
REQUEST FOR APPROPRIATION MODIFICATION
FISCAL YEAR = 2016

F - 85
Page 2 of 5

19.b

Agency/Department Name: Santa Clara Valley Health and Hospital System								Fiscal Year 2016		
Line #	Description	Fund	Superior Fund Center	Cost Center	General Ledger Account	Job Class	Funded Program	Revenue	Expenditure	
28	Health Insurance	0001	0414	4541	5110200	C82			9,160	
29	Health Insurance	0001	0414	4541	5110200	C83			27,480	
30	Health Insurance	0001	0414	4541	5110200	D09			27,480	
31	Health Insurance	0001	0414	4541	5110200	P13			7,985	
32	Health Insurance	0001	0414	4541	5110200	P95			115,776	
33	Health Insurance	0001	0414	4541	5110200	S57			57,888	
34	Health Insurance	0001	0414	4541	5110200	S72			8,415	
35	Health Insurance	0001	0414	4541	5110200	X15			9,160	
36	Health Insurance	0001	0414	4541	5110200	Y41			95,820	
37	Health Insurance	0060	0921	6715	5110200	P40			9,648	
38	Health Insurance	0060	0921	6715	5110200	R27			9,648	
39	Health Insurance	0060	0921	6715	5110200	R29			9,648	
40	Health Insurance	0060	0921	6844	5110200	B9F			9,648	
41	Health Insurance	0060	0921	6919	5110200	P55			115,776	
42	IC-Professional Services - Internal	0001	0412	4540	5258200				5,777,236	
43	IC-Professional Services - Internal	0001	0414	4541	5258200				1,512,625	
44	IC - Professional Services - Interna	0001	0414	4541	5258250				1,834,586	
45	IC - Reimb - Professional & Specia	0001	0414	4541	5440200				(5,777,236)	
46	IC - Reimb - Professional & Specia	0001	0417	4600	5440200				(1,512,625)	
47	IC - VMC Svcs to Jail and JPD	0060	0921	6715	4723650			259,664		
48	IC - VMC Svcs to Jail and JPD	0060	0921	6844	4723650			35,767		
49	IC - VMC Svcs to Jail and JPD	0060	0921	6919	4723650			1,539,155		
50	Medical Dental and Laboratory Sup	0060	0921	6715	5240100				125,000	
51	Medicare Tax - Employer Share	0001	0414	4541	5110500	B1N			661	
52	Medicare Tax - Employer Share	0001	0414	4541	5110500	C76			500	
53	Medicare Tax - Employer Share	0001	0414	4541	5110500	C82			784	
54	Medicare Tax - Employer Share	0001	0414	4541	5110500	C83			2,112	
55	Medicare Tax - Employer Share	0001	0414	4541	5110500	D09			924	
56	Medicare Tax - Employer Share	0001	0414	4541	5110500	P13			761	
57	Medicare Tax - Employer Share	0001	0414	4541	5110500	P95			8,040	
58	Medicare Tax - Employer Share	0001	0414	4541	5110500	S57			5,118	
59	Medicare Tax - Employer Share	0001	0414	4541	5110500	S72			1,264	
60	Medicare Tax - Employer Share	0001	0414	4541	5110500	X15			453	
61	Medicare Tax - Employer Share	0001	0414	4541	5110500	Y41			6,456	
62	Medicare Tax - Employer Share	0060	0921	6715	5110500	P40			952	
63	Medicare Tax - Employer Share	0060	0921	6715	5110500	R27			908	
64	Medicare Tax - Employer Share	0060	0921	6715	5110500	R29			366	
65	Medicare Tax - Employer Share	0060	0921	6844	5110500	B9F			661	
66	Medicare Tax - Employer Share	0060	0921	6919	5110500	P55			15,684	
67	PC Hardware	0001	0414	4541	5275200				500,000	
68	Page Total - Enter here and on Page 1, Line 20								1,834,586.00	3,018,762.00

Attachment: F85-129 REV (79301 : Augmentation of Behavioral Health Services to Inmates in County Jail)

COUNTY OF SANTA CLARA
REQUEST FOR APPROPRIATION MODIFICATION
FISCAL YEAR = 2016

Agency/Department Name: Santa Clara Valley Health and Hospital System							Fiscal Year 2016		
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Line #	Description	Fund	Superior Fund Center	Cost Center	General Ledger Account	Job Class	Funded Program	Revenue	Expenditure
69	Permanent Employees	0001	0414	4541	5101000	B1N			45,554
70	Permanent Employees	0001	0414	4541	5101000	C76			34,496
71	Permanent Employees	0001	0414	4541	5101000	C82			54,058
72	Permanent Employees	0001	0414	4541	5101000	C83			145,626
73	Permanent Employees	0001	0414	4541	5101000	D09			63,813
74	Permanent Employees	0001	0414	4541	5101000	P13			52,501
75	Permanent Employees	0001	0414	4541	5101000	P95			554,220
76	Permanent Employees	0001	0414	4541	5101000	S57			352,836
77	Permanent Employees	0001	0414	4541	5101000	S72			87,168
78	Permanent Employees	0001	0414	4541	5101000	X15			31,247
79	Permanent Employees	0001	0414	4541	5101000	Y41			445,500
80	Permanent Employees	0060	0921	6715	5101000	P40			65,668
81	Permanent Employees	0060	0921	6715	5101000	R27			62,601
82	Permanent Employees	0060	0921	6715	5101000	R29			25,213
83	Permanent Employees	0060	0921	6844	5101000	B9F			45,554
84	Permanent Employees	0060	0921	6919	5101000	P55			1,081,596
85	PERS-Employer Paid Employee C	0001	0414	4541	5110601	D09			4,602
86	PERS-Employer Paid Employee C	0001	0414	4541	5110601	P95			40,800
87	PERS-Employer Paid Employee C	0001	0414	4541	5110601	X15			2,281
88	PERS-Employer Paid Employee C	0001	0414	4541	5110601	Y41			32,652
89	PERS-Employer Paid Employee C	0060	0921	6715	5110601	P40			4,859
90	PERS-Employer Paid Employee C	0060	0921	6715	5110601	R27			4,629
91	PERS-Employer Paid Employee C	0060	0921	6715	5110601	R29			1,829
92	PERS-Employer Paid Employer C	0001	0414	4541	5110600	B1N			5,188
93	PERS-Employer Paid Employer C	0001	0414	4541	5110600	C76			3,929
94	PERS-Employer Paid Employer C	0001	0414	4541	5110600	C82			6,157
95	PERS-Employer Paid Employer C	0001	0414	4541	5110600	C83			16,584
96	PERS-Employer Paid Employer C	0001	0414	4541	5110600	D09			10,509
97	PERS-Employer Paid Employer C	0001	0414	4541	5110600	P13			5,979
98	PERS-Employer Paid Employer C	0001	0414	4541	5110600	P95			91,272
99	PERS-Employer Paid Employer C	0001	0414	4541	5110600	S57			58,710
100	PERS-Employer Paid Employer C	0001	0414	4541	5110600	S72			9,927
101	PERS-Employer Paid Employer C	0001	0414	4541	5110600	X15			5,146
102	PERS-Employer Paid Employer C	0001	0414	4541	5110600	Y41			73,368
103	PERS-Employer Paid Employer C	0060	0921	6715	5110600	P40			10,815
104	PERS-Employer Paid Employer C	0060	0921	6715	5110600	R27			10,310
105	PERS-Employer Paid Employer C	0060	0921	6715	5110600	R29			4,152
106	PERS-Employer Paid Employer C	0060	0921	6844	5110600	B9F			5,188
107	PERS-Employer Paid Employer C	0060	0921	6919	5110600	P55			178,128
108	PERS - UAAL Contrib - Misc	0001	0414	4541	5110610	B1N			632
109	Page Total - Enter here and on Page 1, Line 20							0.00	3,735,297.00

Attachment: F85-129 REV (79301 : Augmentation of Behavioral Health Services to Inmates in County Jail)

COUNTY OF SANTA CLARA
REQUEST FOR APPROPRIATION MODIFICATION
FISCAL YEAR = 2016

Agency/Department Name: Santa Clara Valley Health and Hospital System							Fiscal Year 2016		
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Line #	Description	Fund	Superior Fund Center	Cost Center	General Ledger Account	Job Class	Funded Program	Revenue	Expenditure
110	PERS - UAAL Contrib - Misc	0001	0414	4541	5110610	C76			479
111	PERS - UAAL Contrib - Misc	0001	0414	4541	5110610	C82			750
112	PERS - UAAL Contrib - Misc	0001	0414	4541	5110610	C83			2,022
113	PERS - UAAL Contrib - Misc	0001	0414	4541	5110610	D09			885
114	PERS - UAAL Contrib - Misc	0001	0414	4541	5110610	P13			729
115	PERS - UAAL Contrib - Misc	0001	0414	4541	5110610	P95			7,692
116	PERS - UAAL Contrib - Misc	0001	0414	4541	5110610	S57			4,896
117	PERS - UAAL Contrib - Misc	0001	0414	4541	5110610	S72			1,210
118	PERS - UAAL Contrib - Misc	0001	0414	4541	5110610	X15			434
119	PERS - UAAL Contrib - Misc	0001	0414	4541	5110610	Y41			6,180
120	PERS - UAAL Contrib - Misc	0060	0921	6715	5110610	P40			911
121	PERS - UAAL Contrib - Misc	0060	0921	6715	5110610	R27			869
122	PERS - UAAL Contrib - Misc	0060	0921	6715	5110610	R29			350
123	PERS - UAAL Contrib - Misc	0060	0921	6844	5110610	B9F			632
124	PERS - UAAL Contrib - Misc	0060	0921	6919	5110610	P55			15,012
125	Premium Pay	0001	0414	4541	5104000				185,371
126	Premium Pay	0060	0921	6715	5104000				14,905
127	Premium Pay	0060	0921	6919	5104000				506,429
128	Reserves	0001	0910	1010	5701000				(5,777,236)
129	Retiree Medical Insurance	0001	0414	4541	5110100	B1N			3,809
130	Retiree Medical Insurance	0001	0414	4541	5110100	C76			3,809
131	Retiree Medical Insurance	0001	0414	4541	5110100	C82			3,809
132	Retiree Medical Insurance	0001	0414	4541	5110100	C83			11,427
133	Retiree Medical Insurance	0001	0414	4541	5110100	D09			11,427
134	Retiree Medical Insurance	0001	0414	4541	5110100	P13			3,809
135	Retiree Medical Insurance	0001	0414	4541	5110100	P95			45,708
136	Retiree Medical Insurance	0001	0414	4541	5110100	S57			22,854
137	Retiree Medical Insurance	0001	0414	4541	5110100	S72			3,809
138	Retiree Medical Insurance	0001	0414	4541	5110100	X15			3,809
139	Retiree Medical Insurance	0001	0414	4541	5110100	Y41			45,708
140	Retiree Medical Insurance	0060	0921	6715	5110100	P40			3,809
141	Retiree Medical Insurance	0060	0921	6715	5110100	R27			3,809
142	Retiree Medical Insurance	0060	0921	6715	5110100	R29			3,809
143	Retiree Medical Insurance	0060	0921	6844	5110100	B9F			3,809
144	Retiree Medical Insurance	0060	0921	6919	5110100	P55			45,708
145	Salaries Without Benefits	0001	0414	4541	5102000				98,701
146	SVS and Supplies - Other	0001	0414	4541	5350400				43,000
147	SVS and Supplies - Other	0060	0921	6715	5350400				3,000
148	SVS and Supplies - Other	0060	0921	6844	5350400				1,000
149	SVS and Supplies - Other	0060	0921	6919	5350400				12,000
150	Page Total - Enter here and on Page 1, Line 20							0.00	(4,648,857.00)

Attachment: F85-129 REV (79301 : Augmentation of Behavioral Health Services to Inmates in County Jail)

COUNTY OF SANTA CLARA
REQUEST FOR APPROPRIATION MODIFICATION
FISCAL YEAR = 2016

Agency/Department Name: Santa Clara Valley Health and Hospital System							Fiscal Year	2016	
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Line #	Description	Fund	Superior Fund Center	Cost Center	General Ledger Account	Job Class	Funded Program	Revenue	Expenditure
151	Unemployment Insurance	0001	0414	4541	5110300	B1N			29
152	Unemployment Insurance	0001	0414	4541	5110300	C76			22
153	Unemployment Insurance	0001	0414	4541	5110300	C82			35
154	Unemployment Insurance	0001	0414	4541	5110300	C83			93
155	Unemployment Insurance	0001	0414	4541	5110300	D09			42
156	Unemployment Insurance	0001	0414	4541	5110300	P13			38
157	Unemployment Insurance	0001	0414	4541	5110300	P95			276
158	Unemployment Insurance	0001	0414	4541	5110300	S57			174
159	Unemployment Insurance	0001	0414	4541	5110300	S72			46
160	Unemployment Insurance	0001	0414	4541	5110300	X15			20
161	Unemployment Insurance	0001	0414	4541	5110300	Y41			324
162	Unemployment Insurance	0060	0921	6715	5110300	P40			33
163	Unemployment Insurance	0060	0921	6715	5110300	R27			31
164	Unemployment Insurance	0060	0921	6715	5110300	R29			13
165	Unemployment Insurance	0060	0921	6844	5110300	B9F			23
166	Unemployment Insurance	0060	0921	6919	5110300	P55			540
167	Workers' Compensation	0001	0414	4541	5110700	B1N			1,409
168	Workers' Compensation	0001	0414	4541	5110700	C76			1,067
169	Workers' Compensation	0001	0414	4541	5110700	C82			1,672
170	Workers' Compensation	0001	0414	4541	5110700	C83			4,503
171	Workers' Compensation	0001	0414	4541	5110700	D09			1,974
172	Workers' Compensation	0001	0414	4541	5110700	P13			1,140
173	Workers' Compensation	0001	0414	4541	5110700	P95			14,544
174	Workers' Compensation	0001	0414	4541	5110700	S57			9,258
175	Workers' Compensation	0001	0414	4541	5110700	S72			2,352
176	Workers' Compensation	0001	0414	4541	5110700	X15			966
177	Workers' Compensation	0001	0414	4541	5110700	Y41			9,672
178	Workers' Compensation	0060	0921	6715	5110700	P40			1,723
179	Workers' Compensation	0060	0921	6715	5110700	R27			1,643
180	Workers' Compensation	0060	0921	6715	5110700	R29			662
181	Workers' Compensation	0060	0921	6844	5110700	B9F			1,195
182	Workers' Compensation	0060	0921	6919	5110700	P55			28,380
183									
184									
185									
186									
187									
188									
189									
190									
191	Page Total - Enter here and on Page 1, Line 20							0.00	83,899.00

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