

BEHAVIORAL HEALTH ADVISORY BOARD  
**ADULT SERVICES COMMITTEE**  
**MINUTES ▪ Thursday, January 5, 2017**

<p><b>Present</b>          Karyn Bates, Co-Chair          Nancy Borchard, Co-Chair          Gane Brooking, BHAB          Ratan Bhavnani, BHAB          Dan Schimmel, Anka Behavioral Health          Andrea Sallee, Anka Behavioral Health          Jasmine Collins, Anka Behavioral Health          Lilia Simakova, Anka Behavioral Health          Mark Stadler, CIT          Liz Warren, Client Network          Ron Mulvihic, Housing Innovations &amp; Solutions          David Deutsch, NAMI          Jennifer Goble, Pacific Clinics          Karin Findeis, Pacific Clinics          Shana Burns, Telecare          Larry Berent, Telecare          Kalie Matisek, Turning Point Foundation          Mark Schumacher, Turning Point Foundation          Dana Secor, Turning Point Foundation          Denise Noguera, VCAAA          Brenda Tungui, VCAAA          Deborah Schreiber, VSSTF</p>	<p><b>VCBH Managers/Staff Present</b>          John Schipper, Adult Division Chief          Pam Roach, Transformational Liaison          Edith Pham, BHAB Assistant</p> <p><b>NEXT MEETING:</b>  <b>Thursday, February 2, 2017, 10:00 a.m. – 12:00 pm</b></p> <p>Ventura County Behavioral Health          1911 Williams Drive, <u>Lake Tahoe Room (2<sup>nd</sup> floor)</u>, Oxnard</p>
<p>Note: The committee has not yet approved these minutes. There may be additions/deletions or corrections before the minutes are accepted in final form.</p>	

	DISCUSSION/CONCLUSIONS	RECOMMENDATIONS/ ACTIONS	RESPONSIBLE
I.	<b>Call to Order</b> Co-Chair Nancy Borchard called the meeting to order at 10:10.		
II.	<b>Approval of the Agenda</b> Ms. Borchard asked the Committee to review and approve today's agenda.	The agenda was approved as written. <b>M/S/C</b>	
III.	<b>Approval of the Minutes</b> Ms. Borchard asked the committee to review and approve the minutes of the November 3, 2016 meeting.	The minutes were approved as written. <b>M/S/C</b>	
IV.	<b>Welcome and Introductions</b> Ms. Borchard welcomed everyone and asked for introductions.		
V.	<b>Chair Announcements – Karyn Bates</b> A. On November 15, 2016 the Board of Supervisors recognized all volunteers who sit on advisory boards, including on the BHAB.  B. On November 17, 2016 the ribbon-cutting ceremony took place at the Horizon View Mental Health Rehabilitation Center (MHRC), located at the Camarillo airport. See attached fact sheet. David Deutsch noted that NAMI has received calls from people who would like to have their loved ones placed at Horizon View, when in fact the facility is only for the more seriously mentally ill clients. Dr. John Schipper clarified that referrals come through the weekly Continuum of Care (CoC) meetings. The typical referral source will be clients who are discharged from Hillmont Psychiatric Center (HPC). Sylmar will continue to be used as placement for clients whose competency has not been restored.	Information	

	<p>Dr. Schipper noted that 13 clients have already moved from Sylmar into Horizon View. Six clients remain at Sylmar.</p> <p>Jennifer Goble noted that a recovery coach is helping with the transition. She requested to have a presentation on Horizon View in a few months.</p> <p>C. Ms. Borchard noted that the BHAB board members will receive a training on the Brown Act on January 23 at noon. She invited all to attend.</p>		
<p><b>VI.</b></p>	<p><b>Public Comments</b> None.</p>		
<p><b>VII.</b></p>	<p><b>Presentation: Anka Ventura Crisis Residential Treatment Center (CRT) and Hillmont House – Andrea Sallee, Regional Director, and Dan Schimmel, Jasmine Collins, Lilia Simakova</b></p> <p>The CRT (Rancho de Arboles) is a short-term facility. Stays are up to 30 days, and average length of stay is ten to 14 days. Clients are admitted because they experience difficulty with psychiatric symptoms or behavioral crisis. It is an alternative to being admitted to Hillmont Psychiatric Center (HPC). It is also a step-down from HPC.</p> <p>The treatment focuses on transitioning to a lower level of care as appropriate. Some of the treatment and services include medication education, individual and group therapy, and once-a-week Wellness Recovery Action Plan (WRAP) classes. Some clients are taken off-campus to AA and NA meetings and to the Wellness Center.</p> <p>Clients fill out a survey upon admission and discharge to assess their satisfaction with the services they received.</p> <p>The intake process has been streamlined as much as possible while still complying with licensing requirements. The average census has been 14 to 16 for the past six months.</p> <p>Two clinicians work with the clients on their discharge planning. Also a Recovery Coach, Daisy Chavez, assists clients after discharge to transition successfully to VCBH outpatient services.</p> <p>A discussion took place regarding the referral sources. Currently, the CRT is used more as a step-down from HPC rather than as an alternative to hospitalization. Some members noted that this is different from the way the community had envisioned the CRT's use. Dr. Schipper noted that the CRT helps maximize the benefits of hospitalization and minimize re-hospitalization.</p> <p>Hillmont House (Casa de Salud) is the only unlocked Mental Health Rehabilitation Center in the state. It has 15 beds. It serves clients ages 18 to 59, and up to 65 in some cases. Clients can stay up to 18 months. The treatment goal is to discharge to a lower level of care, which happens in 75% of cases; most clients transition to Casa and enroll with VCBH clinics. Clinical, rehabilitation and medical staff provide services under the recovery model. Therapy includes CBT (Cognitive Behavioral Therapy) and DBT (Dialectical Behavioral Therapy). Hillmont House staff is augmented with a Peer Support Specialist and two Case Manager trainees. Family involvement is encouraged.</p> <p>Due to licensing regulations, Hillmont House and Casa cannot hold joint events. However, individual clients from both programs are welcome to socialize.</p> <p>See attached for more information on these two programs.</p>	<p>Information</p>	
<p><b>VIII.</b></p>	<p><b>Members Comments</b></p> <p>A. Ratan Bhavnani noted that at its December 6, 2016 meeting the Board of Supervisors voted to designate all county properties smoke-free starting later this year. This will include the Hillmont Psychiatric Center and Horizon</p>		

	<p>View. Supervisor Linda Parks, Karyn Bates and Mr. Bhavnani spoke against this.</p> <p>B. David Deutsch noted that the NAMI General Meeting on January 10<sup>th</sup> will have a panel presentation on Laura's Law and the Assist program. He encouraged everyone to attend. Over 500 people attended the NAMI Holiday Party on December 13<sup>th</sup>.</p> <p>C. Jennifer Goble noted that the Link to Recovery program is going well, helping clients to re-establish services. Pacific Clinics is recruiting for recovery coaches in Ventura and TAY. Ms. Goble agreed to present on the coaches at the March meeting.</p> <p>D. Mark Schumacher noted that Turning Point Foundation has opened its fifth Quality of Life site: Castillo del Sol on E. Main Street in Ventura. WRAP classes are starting at the Wellness Centers in Ventura and Oxnard. A peer employment training will be offered in May. Dana Secor was introduced as the new program manager for New Visions and the Oxnard Clubhouse.</p> <p>E. Denise Noguera noted that VCAAA is offering free memory screenings every fourth Thursday of the month at their office in Ventura. See attached flyer.</p> <p>F. Larry Berent noted that Casa has two new Resident Program Managers: Suzanne Zimmerman, RN, at Casa D and Cameron Wordlaw, MFT, at Casa E.</p> <p>G. Gane Brooking requested to have presentations geared toward the older adult population.</p>	Present in March	J. Goble
IX.	<p><b>Update: Behavioral Health Adult Division – Dr. John Schipper</b></p> <p>A. The opening of Horizon View went smoothly for the most part. A couple of clients resisted coming into the building; the Camarillo police had to be called and was very accommodating.</p> <p>B. The External Quality Review Organization (EQRO) will conduct its yearly audit of VCBH in March. Shortly thereafter, the state will conduct its tri-annual review.</p> <p>C. The Assist program, which is being run by Telecare under a contract with VCBH, has hired a director: Crystal Eastburn.</p> <p>D. Dr. Brian Taylor is taking over as VCBH Medical Director. Dr. Celia Woods is the Director of Sterling, which is contracted with VCBH to provide psychiatrists in the clinics.</p>	Information	
X.	<p><b>Update: Behavioral Health Substance Use Disorders</b> None.</p>		
XI.	<p><b>Adjourn</b> The meeting adjourned at 12:05.</p>		

# Horizon View Mental Health Rehabilitation Center

## ***FACT SHEET***

- Horizon View is ~15,000 square feet; entirely new construction; 16 individual client rooms (each with their own half bath).
- Timeline:
  - Concept approved by BOS in June 2012
  - Plans approved by BOS April 2015
  - Construction contract awarded August 2015
  - Groundbreaking September 2015
  - Ribbon Cutting November 2016
  - First clients December 2016
- Expected project costs \$9.4M; expenditures to date \$6.8 (i.e., ~\$2M construction cost and \$400K furniture cost still pending).
- Estimated funding sources:
  - \$4.2M general fund (fixed asset acquisitions – reduced by the amount airports contributed)
  - \$3.3M Tax exempt commercial paper (TECP)
  - \$1.2M Behavioral Health (realignment)
  - \$0.4M from community development block grants
  - \$0.3M Airports
- Building designed and constructed under the supervision of Ventura County's Public Works and VCBH.
- Horizon View will be the 20th Mental Health Rehabilitation Center (MHRC) in California; it is the second in Ventura County, the other being Hillmont House which is unlocked.
- Telecare Corporation has been selected as the contracted provider of the clinical services in the 24/7 setting:
  - Telecare has been collaborating on its development since May 2016
  - Horizon View will become the 7<sup>th</sup> MHRC operated by Telecare in California

- The 16 locked psychiatric beds developed to replace VCBH's 30-year reliance on out-of-county placements:
  - 13 clients preparing to transfer to Horizon View starting 12/13/16 from Sylmar Health and Rehabilitation Center, which by comparison hosts 208 clients from multiple counties
  - Average length of stay at Horizon View is intended to be 18 months
  - Court-ordered clients (i.e., criminal matters pending) will not be admitted to Horizon View
  
- Services at the level of the mental health rehabilitation center (MHRC) are reserved for less than 1% of VCBH's clients:
  - Clients struggling with the most serious mental illnesses and significant functional impairment
  - Clients on LPS conservatorship
  - High utilizers of acute services (i.e., inpatient psychiatric services, medical/ER admits, and incarcerations)
  
- Locked psychiatric placement is a last resort in VCBH's client-centered approach to recovery and it always follows clear and convincing evidence of the need with an obvious pattern of multiple psychiatric hospitalizations and often many ER visits, medical hospitalizations and even incarcerations.
  
- VCBH has demonstrated that with its oversight and monitoring, locked psychiatric treatment is both clinically effective and cost efficient for those in need of this specialized treatment:
  - Basis found in the data pertaining to the VCBH clients placed and subsequently discharged from Sylmar Health and Rehabilitation Center between 2011 and 2015
  - 85% were found to be successful in that they were able to moved lower levels of care
  - 80% reduction in the number of days they spent in our psychiatric hospital when comparing the years before locked placement to those that followed.
  - This decrease in acute hospital days represents a reduction of cost in excess of \$2M

## MISSION

*"To eliminate the impact of behavioral health problems for all people."*

## THE ANKA WAY

### CARING

- \* We focus on providing integrated care and person-centered planning
- \* We use home-like facilities
- \* We promote recovery and resiliency in a positive environment

### DEPENDABLE

- \* We have been in business for over 40 years
- \* We serve nearly 16,000 individuals and their families annually
- \* We use evidence based best practices
- \* Our programs are financially self-sustaining

### PROFESSIONAL

- \* We are CARF accredited
- \* We offer cutting-edge employee training programs
- \* We provide award-winning programs and services
- \* We utilize innovative technology and practices; including Certified Electronic Health Record, Telehealth, and Quality Assurance systems.

CRISIS STABILIZATION

# ANKA VENTURA CRT

## VENTURA CRT

Phone: 805.233.7750

Fax: 805.653.5974

Anka Behavioral Health, Inc.  
1850 Gateway Blvd., Suite 900  
Concord, CA 94520

Phone: 925.825.4700 | Fax: 925.825.2610

Email: [info@ankabhi.org](mailto:info@ankabhi.org)

Visit us on the web:

[www.ankabhi.org](http://www.ankabhi.org)

## Crisis Residential Treatment (CRT) Program for Adults

VENTURA, CALIFORNIA

Licensed by the State of California Department of  
Social Services as a Social Rehabilitation Facility

Facility Number: 565801881

Ventura CRT is provided in partnership by:



**Anka Behavioral Health, Inc.**



**Anka Behavioral Health, Inc.**

Anka Ventura CRT is a Crisis Residential Treatment (CRT) Program for adults, ages 18-59 years old, that are experiencing psychiatric symptoms or a behavioral health crisis. As an alternative to hospitalization, the Ventura CRT provides intensive mental health and behavioral supports in a safe and supportive home-like environment.

Our goal is to engage individuals in the treatment necessary to alleviate behavioral and emotional challenges and prepare for community re-integration.

To be eligible for services, an individual must meet the following criteria:

- Ventura County Department of Behavioral Health client, or willing to be referred.
- Must be at least 18 years of age.
- Experiencing difficulties with psychiatric symptoms or behavioral crises.
- May also have dually diagnosed substance use disorders.
- Be a willing and active participant in a wellness and recovery plan.
- Abstain from drug and/or alcohol use.

At the Anka Ventura CRT individuals are supported in reducing their symptoms and understanding their behavioral or emotional challenges through a structured program. Services focus on transitioning people to lower levels of care and working with family and community supports to develop a strong support system upon discharge.

Treatment and services include:

- Short-term treatment: length of stay is typically 10-30 days.
- Three meals per day, including working with any dietary restrictions.
- Psychiatric evaluation and medication management.
- Individual and group therapy.
- Daily group activities using art and psycho educational groups in seven core areas:

- Self-esteem
- Anger Management
- Thinking and Feeling
- Family Dynamics
- Coping Skills
- Addictions
- Communication

- Relapse prevention and coping skills training.
- Exercise and recreational activities.
- Discharge planning, including engagement in outpatient treatment and other supports.

To make a referral or find out more information, contact us at: **805.233.7750**

***“I really do feel safe here, and I want to say thank you very much.”***

***- Ventura CRT Client***





Anka Behavioral Health, Inc.

# Ventura CRT

Crisis Residential Treatment Center  
at Ventura County Medical Center

Lilia Simakova, LVN, Program Administrator  
Andrea Sallee, LMFT, Regional Director


Ventura County Behavioral Health  
BHAB Presentation

January 5, 2017

## Anka Ventura CRT

### Philosophy:

- Recovery Model Philosophy:
  - Team treatment approach which help clients achieve their goals through the recovery model paradigm where client choice is paramount
- Key Value:
  - Adults with mental illness have strengths/resiliency and personal goals that are central to their recovery.
- Client-centered, therapeutic, integrated, wellness focused and result oriented, embracing the principles of recovery and resilience.



## Mission and Evidence Based Practices

The CRT is a short-term in-patient program for adults experiencing difficulty with psychiatric symptoms or behavioral crisis. As an alternative to hospitalization, the CRT model provides intensive mental health and behavioral supports.

- Services are provided in a home-like environment and are aimed at the stabilization of psychiatric symptoms and community reintegration.
- Individuals are assisted in reducing their symptoms and increasing their functional living skills through a structured intensive program.
- Services focus on transitioning individuals into lower levels of care and independence in the community. Respectful attitude, behaviors and practices that maintain a healthy facility and culture for both staff and residents, respecting the demographics, social circumstance and culture of the individual and family.



## Ventura CRT Treatment Goal

To discover the underlying causes of crisis related behaviors and to assist consumers in identifying their best choices toward relapse prevention. Although the decision to work an intensely structured program can be difficult, it can also mark the beginning of the road to recovery.



## CRT Treatment and Services

Our staff assist consumers in reducing their symptoms and increasing their functional living skills through a structured intensive program.

- Short-term Treatment – Average Length of Stay 10-14 Days
- Structured Programming / Life Skills Support
- Medication Stabilization and Management
- Relapse Prevention Skills Training and Coping Skills Training
- Peer Support and Community Reintegration
- Discharge Planning Support
- Group and Individual Psychotherapy
- Psycho-educational, and Art Group Activities
- Substance Abuse Prevention Services / Community Resource connection
- Support System Identification and Engagement
- Choice Driven Treatment
- Opportunities to learn and practice life skills
- Structure based lifestyle



## CRT Treatment & Services

### Therapy Groups & Activities

- Cognitive Behavioral Therapy
- Cognitive Multi-Therapy
- Co-Occurring Disorders
- Dialectical Behavior Therapy \*  
EBP
- Medication Education
- Life Skills
- Positive Psychology
- Psycho Education
- Wellness Recovery Action Plan (WRAP)
- Social and Relaxation Skills
- Socialization and Outings
- Therapeutic Games







# VCOS Adult Self Report by Point of Administration 8945 ANKA Crisis Residential 24HR 7/1/2015 to 6/3/2016 Data Date: 1/4/2017

## Sec 1. Unduplicated Consumer Count

	INTAKE	DISCHARGE	Total
<b>Measures</b>	218	211	429
<b>Unduplicated Clients</b>	195	187	207

## Sec 2. Scale Scores: Overview

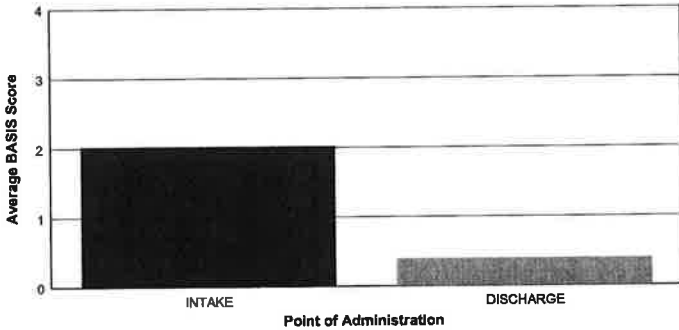
**Basis 24 -** Asks how the consumer is feeling and doing in different areas of their life in the past week. Score ranges from 0 - 4; lower scores indicate fewer problems / decreased severity.

**Hopefulness Scale -** Score ranges from 4 - 24; lower scores indicate a generally more hopeful outlook.

**Rating of Care -** Overall rating of 1 to 10 on the care received; 1 = worst possible care, 10 = best possible care

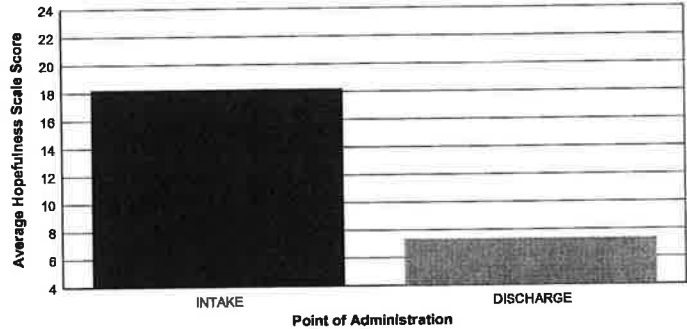
### BASIS 24

Range 0 - 4, lower score indicates fewer problems / decreased severity



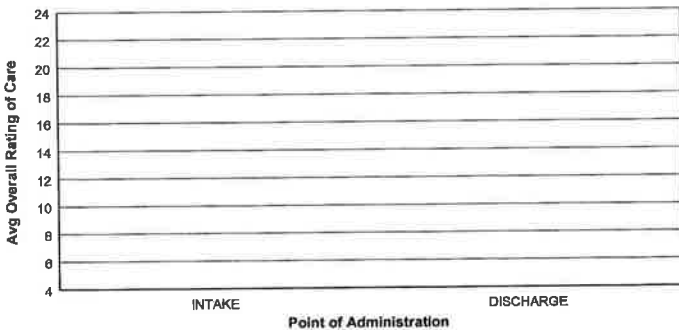
### Hopefulness Scale

Range 4 - 24, lower score indicates generally more hopeful outlook



### Overall Rating of Care

Range 1 - 10, Higher score indicates better care



**Note on Scale Scores:**

*BASIS - Validated;  
Hopefulness - Validated*



# VCOS Adult Self Report by Point of Administration 8945 ANKA Crisis Residential 24HR

7/1/2015 to 6/3/2016

Data Date: 1/4/2017

**Sec 3. Behavior & Symptom Identification Scale, Individual items - Shows in the past week, how much difficulty the consumer had with the following tasks. Scores range from 0 - 4. Lower score indicates fewer problems/decreased severity.**

<b>1. Managing your day-to-day life</b>	<b>INTAKE</b>	<b>DISCHARGE</b>	<b>Total</b>
<b>0-No difficulty</b>	7	71	78
<b>1-A little difficulty</b>	7	40	47
<b>2-Moderate difficulty</b>	57	4	61
<b>3-Quite a bit of difficulty</b>	43	1	44
<b>4-Extreme difficulty</b>	19	1	20
<b>Blank</b>	85	94	179
<b>Total Responses</b>	<b>218</b>	<b>211</b>	<b>429</b>

<b>2. Coping with problems in life</b>	<b>INTAKE</b>	<b>DISCHARGE</b>	<b>Total</b>
<b>0-No difficulty</b>	4	78	82
<b>1-A little difficulty</b>	7	33	40
<b>2-Moderate difficulty</b>	36	4	40
<b>3-Quite a bit of difficulty</b>	51	0	51
<b>4-Extreme difficulty</b>	35	2	37
<b>Blank</b>	85	94	179
<b>Total Responses</b>	<b>218</b>	<b>211</b>	<b>429</b>

<b>6. Get along well in social situations</b>	<b>INTAKE</b>	<b>DISCHARGE</b>	<b>Total</b>
<b>0-None of the time</b>	48	1	49
<b>1-A little of the time</b>	57	1	58
<b>2-Half of the time</b>	13	12	25
<b>3-Most of the time</b>	6	59	65
<b>4-All of the time</b>	9	44	53
<b>Blank</b>	85	94	179
<b>Total Responses</b>	<b>218</b>	<b>211</b>	<b>429</b>



**VCOS Adult Self Report  
by Point of Administration  
8945 ANKA Crisis Residential 24HR  
7/1/2015 to 6/3/2016  
Data Date: 1/4/2017**

**Sec 3. Behavior & Symptom Identification Scale, individual items, continued** - Shows in the past week, how much difficulty the consumer had with the following tasks. Scores range from 0 - 4. Lower score indicates fewer problems/decreased severity.

<b>10. Feel sad or depressed</b>	<b>INTAKE</b>	<b>DISCHARGE</b>	<b>Total</b>
0-None of the time	4	103	107
1-A little of the time	12	9	21
2-Half of the time	43	2	45
3-Most of the time	65	0	65
4-All of the time	9	3	12
Blank	85	94	179
<b>Total Responses</b>	<b>218</b>	<b>211</b>	<b>429</b>

<b>12. Feel nervous</b>	<b>INTAKE</b>	<b>DISCHARGE</b>	<b>Total</b>
0-None of the time	11	104	115
1-A little of the time	13	7	20
2-Half of the time	44	3	47
3-Most of the time	52	2	54
4-All of the time	13	1	14
Blank	85	94	179
<b>Total Responses</b>	<b>218</b>	<b>211</b>	<b>429</b>

<b>21. Have the urge to drink or take street drugs</b>	<b>INTAKE</b>	<b>DISCHARGE</b>	<b>Total</b>
0-Never	24	68	92
1-Rarely	17	14	31
2-Sometimes	31	28	59
3-Often	53	7	60
4-Always	8	0	8
Blank	85	94	179
<b>Total Responses</b>	<b>218</b>	<b>211</b>	<b>429</b>



# VCOS Adult Self Report by Point of Administration 8945 ANKA Crisis Residential 24HR

7/1/2015 to 6/3/2016

Data Date: 1/4/2017

**Sec 4. Hopefulness Section, individual items - Scores range from 1 - 6. Lower score indicates generally more hopeful outlook.**

**1. How satisfied are you with your life right now?**

	INTAKE	DISCHARGE	Total
1- Extremely Satisfied	4	27	31
2- Moderately Satisfied	5	72	77
3- Somewhat Satisfied	4	14	18
4- Somewhat Dissatisfied	27	0	27
5- Moderately Dissatisfied	69	1	70
6- Extremely Dissatisfied	24	3	27
Blank	85	94	179
<b>Total Responses</b>	<b>218</b>	<b>211</b>	<b>429</b>

**Sec 5. Service Satisfaction - Scores range from 1 - 5. Higher score indicates generally higher satisfaction.**

**4. The clinician treats me with respect and dignity**

	INTAKE	DISCHARGE	Total
Blank	218	211	429
<b>Total Responses</b>	<b>218</b>	<b>211</b>	<b>429</b>

**6. I was taught to deal with my problems myself**

	INTAKE	DISCHARGE	Total
Blank	218	211	429
<b>Total Responses</b>	<b>218</b>	<b>211</b>	<b>429</b>

**7. I am involved in decisions about my treatment**

	INTAKE	DISCHARGE	Total
Blank	218	211	429
<b>Total Responses</b>	<b>218</b>	<b>211</b>	<b>429</b>

**9. The location of services is convenient**

	INTAKE	DISCHARGE	Total
Blank	218	211	429
<b>Total Responses</b>	<b>218</b>	<b>211</b>	<b>429</b>



**VCOS Adult Self Report  
by Point of Administration  
8945 ANKA Crisis Residential 24HR**

7/1/2015 to 6/3/2016

Data Date: 1/4/2017

**Sec 5. Service Satisfaction, continued - Scores range from 1 - 5. Higher score indicates generally higher satisfaction.**

<b>10. The times of services are convenient</b>	<b>INTAKE</b>	<b>DISCHARGE</b>	<b>Total</b>
Blank	218	211	429
<b>Total Responses</b>	<b>218</b>	<b>211</b>	<b>429</b>

<b>14. Staff believe I can grow and recover</b>	<b>INTAKE</b>	<b>DISCHARGE</b>	<b>Total</b>
Blank	218	211	429
<b>Total Responses</b>	<b>218</b>	<b>211</b>	<b>429</b>

<b>13. I am connected to services that are appropriate</b>	<b>INTAKE</b>	<b>DISCHARGE</b>	<b>Total</b>
Blank	218	211	429
<b>Total Responses</b>	<b>218</b>	<b>211</b>	<b>429</b>

<b>24. How much helped by the care recieved</b>	<b>INTAKE</b>	<b>DISCHARGE</b>	<b>Total</b>
Blank	218	211	429
<b>Total Responses</b>	<b>218</b>	<b>211</b>	<b>429</b>



# VCOS Adult Self Report by Point of Administration Aggregate for all Programs Selected

7/1/2015 to 6/3/2016

Data Date: 1/4/2017

## Sec 1. Unduplicated Consumer Count

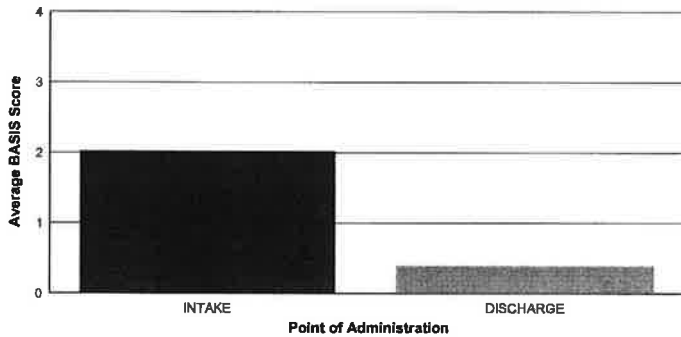
	INTAKE	DISCHARGE	Total
<b>Measures</b>	218	211	429
<b>Unduplicated Clients</b>	195	187	207

## Sec 2. Scale Scores: Overview

- Basis 24 -** Asks how the consumer is feeling and doing in different areas of their life in the past week. Score ranges from 0 - 4; lower scores indicate fewer problems / decreased severity.
- Hopefulness Scale -** Score ranges from 4 - 24; lower scores indicate a generally more hopeful outlook.
- Rating of Care -** Overall rating of 1 to 10 on the care received; 1 = worst possible care, 10 = best possible care

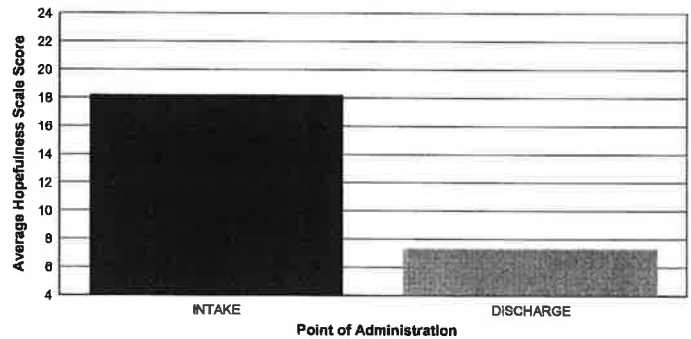
### BASIS 24

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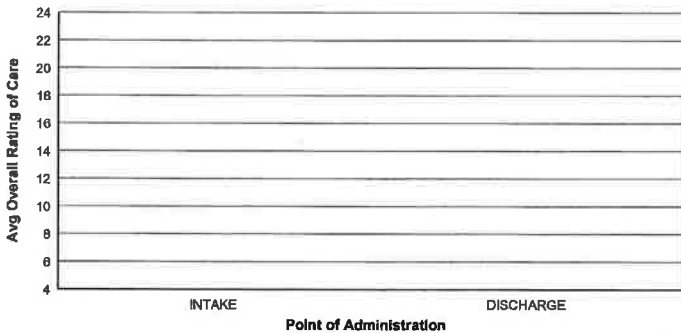
### Hopefulness Scale

Range 4 - 24, lower score indicates generally more hopeful outlook



### Overall Rating of Care

Range 1 - 10, Higher score indicates better care





# VCOS Adult Self Report by Point of Administration Aggregate for all Programs Selected

7/1/2015 to 6/3/2016

Data Date: 1/4/2017

**Sec 3. Behavior & Symptom Identification Scale, individual items** - Shows in the past week, how much difficulty the consumer had with the following tasks. Scores range from 0 - 4. Lower score indicates fewer problems/decreased severity.

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<b>1-A little difficulty</b>	7	40	47
<b>2-Moderate difficulty</b>	57	4	61
<b>3-Quite a bit of difficulty</b>	43	1	44
<b>4-Extreme difficulty</b>	19	1	20
<b>Blank</b>	85	94	179
<b>Total Responses</b>	<b>218</b>	<b>211</b>	<b>429</b>

<b>2. Coping with problems in life</b>	<b>INTAKE</b>	<b>DISCHARGE</b>	<b>Total</b>
<b>0-No difficulty</b>	4	78	82
<b>1-A little difficulty</b>	7	33	40
<b>2-Moderate difficulty</b>	36	4	40
<b>3-Quite a bit of difficulty</b>	51	0	51
<b>4-Extreme difficulty</b>	35	2	37
<b>Blank</b>	85	94	179
<b>Total Responses</b>	<b>218</b>	<b>211</b>	<b>429</b>

<b>6. Get along well in social situations</b>	<b>INTAKE</b>	<b>DISCHARGE</b>	<b>Total</b>
<b>0-None of the time</b>	48	1	49
<b>1-A little of the time</b>	57	1	58
<b>2-Half of the time</b>	13	12	25
<b>3-Most of the time</b>	6	59	65
<b>4-All of the time</b>	9	44	53
<b>Blank</b>	85	94	179
<b>Total Responses</b>	<b>218</b>	<b>211</b>	<b>429</b>



# VCOS Adult Self Report by Point of Administration Aggregate for all Programs Selected

7/1/2015 to 6/3/2016

Data Date: 1/4/2017

**Sec 3. Behavior & Symptom Identification Scale, individual items - Shows in the past week, how much time the consumer spent in the following activities. Sub-Scale Range: 0-4: Lower score indicates fewer problems/decreased severity.**

<b>10. Feel sad or depressed</b>	<b>INTAKE</b>	<b>DISCHARGE</b>	<b>Total</b>
0-None of the time	4	103	107
1-A little of the time	12	9	21
2-Half of the time	43	2	45
3-Most of the time	65	0	65
4-All of the time	9	3	12
Blank	85	94	179
<b>Total Responses</b>	<b>218</b>	<b>211</b>	<b>429</b>

<b>12. Feel nervous</b>	<b>INTAKE</b>	<b>DISCHARGE</b>	<b>Total</b>
0-None of the time	11	104	115
1-A little of the time	13	7	20
2-Half of the time	44	3	47
3-Most of the time	52	2	54
4-All of the time	13	1	14
Blank	85	94	179
<b>Total Responses</b>	<b>218</b>	<b>211</b>	<b>429</b>

<b>21. Have the urge to drink or take street drugs</b>	<b>INTAKE</b>	<b>DISCHARGE</b>	<b>Total</b>
0-Never	24	68	92
1-Rarely	17	14	31
2-Sometimes	31	28	59
3-Often	53	7	60
4-Always	8	0	8
Blank	85	94	179
<b>Total Responses</b>	<b>218</b>	<b>211</b>	<b>429</b>



# VCOS Adult Self Report by Point of Administration Aggregate for all Programs Selected

7/1/2015 to 6/3/2016

Data Date: 1/4/2017

**Sec 4. Hopefulness Section** - Lower score indicates generally more hopeful outlook. 1=Extremely positive, 2=Moderately positive, 3=Somewhat positive, 4=Somewhat negative, 5=Moderately negative, 6=Extremely negative. Scores presented are

1. How satisfied are you with your life right now?	INTAKE	DISCHARGE	Total
1- Extremely Satisfied	4	27	31
2- Moderately Satisfied	5	72	77
3- Somewhat Satisfied	4	14	18
4- Somewhat Dissatisfied	27	0	27
5- Moderately Dissatisfied	69	1	70
6- Extremely Dissatisfied	24	3	27
Blank	85	94	179
<b>Total Responses</b>	<b>218</b>	<b>211</b>	<b>429</b>

**Sec 5. Service Satisfaction** - Scores range from 1 - 5. Higher score indicates generally higher satisfaction.

4. The clinician treats me with respect and dignity	INTAKE	DISCHARGE	Total
Blank	218	211	429
<b>Total Responses</b>	<b>218</b>	<b>211</b>	<b>429</b>

6. I was taught to deal with my problems myself	INTAKE	DISCHARGE	Total
Blank	218	211	429
<b>Total Responses</b>	<b>218</b>	<b>211</b>	<b>429</b>

7. I am involved in decisions about my treatment	INTAKE	DISCHARGE	Total
Blank	218	211	429
<b>Total Responses</b>	<b>218</b>	<b>211</b>	<b>429</b>

9. The location of services is convenient	INTAKE	DISCHARGE	Total
Blank	218	211	429
<b>Total Responses</b>	<b>218</b>	<b>211</b>	<b>429</b>



# VCOS Adult Self Report by Point of Administration Aggregate for all Programs Selected

7/1/2015 to 6/3/2016

Data Date: 1/4/2017

**Sec 5. Service Satisfaction - Scores range from 1 - 5. Higher score indicates generally higher satisfaction.**

**10. The times of services are convenient**

	<b>INTAKE</b>	<b>DISCHARGE</b>	<b>Total</b>
<b>Blank</b>	218	211	429
<b>Total Responses</b>	218	211	429

**14. Staff believe I can grow and recover**

	<b>INTAKE</b>	<b>DISCHARGE</b>	<b>Total</b>
<b>Blank</b>	218	211	429
<b>Total Responses</b>	218	211	429

**13. I am connected to services that are appropriate**

	<b>INTAKE</b>	<b>DISCHARGE</b>	<b>Total</b>
<b>Blank</b>	218	211	429
<b>Total Responses</b>	218	211	429

**24. How much helped by the care recieved**

	<b>INTAKE</b>	<b>DISCHARGE</b>	<b>Total</b>
<b>Blank</b>	218	211	429
<b>Total Responses</b>	218	211	429



Anka Behavioral Health, Inc.

# Hillmont House

## Mental Health Rehabilitation Center (MHRC)

Dan Schimmel, ASW, CADCI, Program Administrator  
Andrea Sallee, LMFT, Regional Director

Ventura County Behavioral Health,  
BHAB Presentation

January 5, 2017

# Hillmont House



## Hillmont House: The Basics

- Mental Health Rehabilitation Center (MHRC) providing safe, intensive, therapeutic, rehabilitative services
- 15 bed, 18 month, long term, 24 hour program
- Contracted by Ventura County Behavioral Health
- Licensed by the Department of Health Care Services



## Program foundation

Hillmont House provides highly focused and intensive services to address the specific needs of each client. The goal is to return into the community, in a lower level of care, with the supports needed to maintain and enhance treatment gains.

The key to success is individual programming, evidence-based interventions, and engagement/involvement of families, where possible.



## Who we serve

- Mentally Ill adults ages 18–64
- Ethnically diverse males and females
- Clients deemed eligible for MHRC level of care in collaboration with the Ventura County Continuum of Care



## Philosophy

- Recovery Model Philosophy:
  - Team treatment approach which helps clients achieve their goals through the recovery model where client choice is paramount
- Key Value:
  - Adults with mental illness have strengths/resiliency and personal goals that are central to their recovery.
- Client-centered, therapeutic, integrated, comprehensive, wellness focused and result oriented, embracing the principles of recovery and resilience.



## Goals and Services

- Community re-integration, healthy living skills, independent living skills, self-advocacy, relapse prevention skills, assertiveness skills, self-reliance toward medication management, vocational rehabilitation and leisure skills.
- Services provided meet all Department of Health Care Services regulations under Title 9 for an MHRC. Our program emphasizes:
  - Safe home-like setting, which preserves the normal routines of daily living. Providing clients with appropriate care, supervision, and support in an environment conducive to their overall protection and safety.
  - Psychiatric, mental health and substance use intervention needs by treating, monitoring, educating and offering other related support.
  - Respectful attitude, behaviors and practices that maintain a healthy facility and culture for both staff and residents, respecting the demographics, social circumstance and culture of the individual and family.

## Program components

- Clinical:
  - Staff—Licensed therapists and PsyD and MFT trainees who are practicum students from local Universities (California Lutheran, Antioch and others), case manager
  - Provide individual, group and family therapy, substance use intervention, case management and advocacy for each client
- Rehabilitation:
  - Staff—Mental Health Rehabilitation Specialist/Team Lead, Mental Health Rehabilitation Workers, Activity Director, Activity Assistant, Kitchen Manager, Dietician, Peer Support Specialist
  - Provide rehabilitation services including: skill building groups and outings—Activities of Daily Living, meals, shopping, money management, nutrition, medication education, schedules and planning, recreational/educational outings and activities, pre-vocational/vocational and educational support and overall supervision of everyday activity
- Medical:
  - Staff: Psychiatrist, Director of Nursing, Lead LVN, LVN's and LPT's
  - Provide psychiatric and medical services including admission and discharge, prescribing medication and monitoring, medication administration, medication education, primary care physician and lab coordination, overall mental and physical health monitoring

## Hillmont House Successes (and challenges)

- ❖ Successfully operating under Title 9 for 10 years using the recovery model.
- ❖ Treats Ventura County's most acute chronically mentally ill clients in a long term setting.
- ❖ Most recent outcomes show a success rate of discharging **75% of clients to a lower level of care last fiscal year.**
- ❖ Member of the Continuum Of Care collaborating with other providers in Ventura county to provide excellent transitions through levels of care on the road to recovery.



Anka Behavioral Health, Inc.

"Eliminating the impact of behavioral health problems for all people."

# Thank You!

1<sup>ST</sup> COME – 1<sup>ST</sup> SERVED

# Memory screening @ VCAAA

(Free & Confidential)

**FREE**  
**15 Minute**  
**Memory**  
**Screenings**  
**are available**  
**on the 4<sup>th</sup>**  
**Thursday**  
**of every**  
**month,**  
**10 am – 1 pm**

## Who should be screened?

- Those whose family and friends have noticed changes in them
- Those who believe they are at risk due to a family history of Alzheimer's disease or a related illness
- Memory screenings make sense for anyone concerned about memory loss or experiencing warning signs of dementia
- Screenings also are appropriate for anyone who does not have a concern right now, but who wants to see how their memory is now and for future comparisons

## If you answer "yes" to any of the following questions, you might benefit from a memory screening.

- Am I becoming more forgetful?
- Do I have difficulty performing familiar tasks?
- Do I have trouble recalling words or names in conversation?
- Have family or friends told me that I am repeating questions or saying the same thing over and over again?
- Am I misplacing things more often?
- Have I become lost when walking or driving?

*NOTE: A memory screening is not used to diagnose any particular illness and does not replace consultation with a qualified physician or other healthcare professional.*

CALL 805-477-7300  
FOR MORE INFORMATION

  
ALZHEIMER'S FOUNDATION OF AMERICA

\* PLEASE ALLOW EXTRA TIME FOR PARKING \*

VENTURA COUNTY



**AREA AGENCY ON AGING**

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