

San Diego County Behavioral Health Services (BHS) Research and Community Collaboration

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LIVE WELL SAN DIEGO

Building Better Health

Living Safely

Thriving

RESEARCH COLLABORATION AT BHS





- Work collaboratively with community researchers
 - Community-engaged Implementation
 - Practice Improvement Research
- Continuous learning about best practices and strategies for working effectively with BHS consumer populations



BHS HISTORY WITH RESEARCH PARTNERS





1

In the late 1990's, MHS established a partnership with the Child and Adolescent Services Research Center (CASRC)





2

In 2003, the University of California, San Diego (UCSD) and MHS Adult/Older Adult Services formed a clinical research partnership

CURRENT RESEARCH STUDIES







BHS currently has 38 active research studies

Research partners include:

- Local universities
- National multi-site studies
- External agencies
- ☐ Graduate and doctoral students

BHS RESEARCH COMMITTEE





- Multidisciplinary team formed in 1994 that meets monthly to review proposals
- Monitor studies implemented within BHS
- Work to ensure safety and privacy of BHS clients and their information
- Review proposals of topics and methods to be applied at BHS

BENEFITS OF RESEARCH ON BHS SYSTEM





□ Enhanced collaboration between local & national partners
 □ Enhanced assessment, monitoring and treatment of behavioral health clients
 □ Future programs focused on BHS client recovery and resilience
 □ Advanced knowledge of evidence-based behavioral health models and practice.

FIDELITY MODELS IN BHS





- □ Assertive Community Treatment (ACT)
- Wraparound Model of Care
- □ PEARLS (Program to Encourage Active, Rewarding Lives)



SUCCESS OF COLLABORATION: ENCOURAGING SAFER USE OF PRESCRIPTION MEDICINE





- □ Prescription Drug Abuse Task Force Subcommittee
- □ Informs patients about prescription medication safety
- Dual-sided handout in English and Spanish
- □ Adopted by all 19 emergency departments in the region and other jurisdictions, including the State of California (CDPH)

PRESCRIBING IN EMERGENCY DEPARTMENTS

We care about you. We are committed to treating you safely and in the right way.

Pain relief treatment can be complicated. Mistakes or abuse of pain medicine can cause serious health problems and death.

Our emergency department will only provide pain relief options that are safe and correct



For your SAFETY, we follow these rules when helping you with your pain.

- We look for and treat emergencies. We use our best judgment when treating pain. These recommendations follow legal and ethical advice.
- You should have only ONE provider and ONE pharmacy helping you with pain. We do not usually prescribe pain medication if you already receive pain medicine from another health care provider.
- If pain prescriptions are needed for pain, we can only give you a small amount.
- We do not refill stolen prescriptions. We do not refill lost prescriptions. If your prescription is stolen, please contact the police.
- 5. We do not prescribe long acting pain medicines: OxyContin, MSContin, Dilaudid, Fentanyl (Duragesic), Methadone, Opana ER, Exalgo, and others.
- We do not provide missing doses of Subutex, Suboxone, or Methadone.
- 7. We do not usually give shots for flare—ups of chronic pain. Medicines taken by mouth may be offered instead.
- 8. Health care laws, including HIPAA, allow us to ask for your medical records. These laws allow us to share information with other health providers who are treating you.
- We may ask you to show a photo ID when you receive a prescription for pain medicines.
- We use the California Prescription Drug Monitoring Program called CURES. This statewide computer system tracts narcotic and other controlled substance prescriptions.

If you need help with substance abuse or addiction, please call

1-888-724-7240

All the emergency departments in San Diego & Imperial Counties have agreed to participate in this important program.











HOSPITAL ASSOCIATION of San Diego and Imperial Counties



IMPACT OF INNOVATIONS PROGRAMS





- □ Care Giver Connection to Treatment
- ☐ Family Therapy Participation Engagement
- ☐ Faith-Based Initiative
- ☐ Innovative Mobile Hoarding Intervention Program
- □ Urban Beats
- ☐ Ramp Up 2 Work
- Peer Assisted Transitions





QUESTIONS?





For questions or other inquiries, contact:

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