



BOARD AND CARE SUPPORTS

Behavioral Health and Recovery Services

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Housing Continuum - example

Pre- Housing Engagement: Drop-In Centers / Shelters / Field Services / Post- Psychiatric Emergency Services, Hospitalization, Incarceration



Housing Continuum for Individuals with Mental Illness

** Based on Luke-Dorf Inc and Washington County, Oregon*

REHABILITATION CENTERS

- Locked
- 24/7 Staffing
- Most restrictive
- Ideal for highly symptomatic individuals

RESIDENTIAL TREATMENT

- Unlocked
- 24/7 Staffing
- Stabilization and skills building
- Ideal for individuals out of higher level of care

RESIDENTIAL BOARD & CARE

- Unlocked; eligibility requirements
- 24/7 Staffing
- Skill building and long-term stability
- Ideal for support with basic needs

TRANSITIONAL

- Independent units
- Staffing on-site
- Intensive support services on-site
- Ideal for stable individuals needing support

SUPPORTIVE HOUSING

- Independent integrated housing
- Support service staffing on-site
- Ideal for individuals who are able to manage their needs with some support

INDEPENDENT LIVING

- Independent housing
- Some support
- Ideal for individuals who need minimal to no support



MORE STRUCTURED INTENSIVE CARE

LESS STRUCTURED SUPPORTS

LICENSED B&C'S WITHIN SAN MATEO COUNTY

Community Care Licensing website:

- 240 licensed Residential Care Facilities and 4 pending
- 107 licensed Adult Residential Facilities

BHRS CONTRACTED BOARD AND CARES

- All BHRS in county contracted Board and Cares are under FUM Team
- B&C's maintain licensure through CCL
- B&C's provide meals, medication management, and support clients with scheduling appointments, and attending to their activities of daily living.
- All clients have a treatment team that provides case management, medication support (i.e. Regional, FSP, or OASIS)

B&C Adult Residential Facility (ARF) 18-60

- 13 facilities
- 117 beds

**One board and care specializes in providing care for clients that are SMI and have substance use issues.*

B&C Residential Care Facility for the Elderly (RCFE) 60+

- 5 facilities
- 74 beds

ADDITIONAL CONTRACTED BEDS

Cordilleras Suites (Telecare)

- Enhanced b&c licensed as an ARF-49 beds
- The facility provides 24/7, non-medical care, meals, medication management, and groups.
- Shuttle services are provided to support getting to treatment appointments and going on community outings.
- The Suites goal is support clients transitioned from locked placements to community level placement.
- provides community based transitional services that enable clients to further develop their community living and social skills before community placement.

ADDITIONAL CONTRACTED BEDS CONT.

Cassia House (Mateo Lodge)

- 14 bed Adult Residential facility
- Provides 24-hour supervision, support and case management services.
- Food is provided and residents are responsible for preparing their own breakfast and lunch; dinner is provided.
- Residents are expected to maintain their living area, do their laundry weekly, and participate in one house chore daily.
- Recreational classes and social gatherings are provided weekly.

ADDITIONAL CONTRACTED BEDS CONT.

Humboldt House (Mateo Lodge)

- 3 shared bedrooms within the licensed part of the home (6 beds)
- 7 independent living apartments with two shared bedrooms in each apartment.
- The licensed portion of the home provides 24-hour supervision, support, case management and all meals are provided.
- Residents residing in the apartments are expected to cook for themselves.

BOARD AND CARE ELIGIBILITY

Clients must meet the following criteria:

- San Mateo Health Client
- SMI, or co occurring (SMI and substance use issues)
- Functional impairment in attending to Activities of Daily Living (ADL's)
- Ambulatory

**Hillcrest and Milbrae Manor able to take clients with assistive devices (canes, walkers, wheelchairs).*

- Does not require a skilled nursing level of care
- Must have a source of income (SSI/SSP)

BOARD AND CARE REFERRAL PROCESS

All referrals for any of the contracted board and cares are sent by treatment teams to the BHRS FUM Board and Care Coordinator.

- The board and care coordinator reviews all referrals to ensure they are appropriate for a community level placement.
- If appropriate, the board and care coordinator proceeds with setting up a meeting with the client to further assess needs, and ensure appropriateness for a community level setting.
- If determined an appropriate referral, board and care coordinator forwards the referral to the board and care operator.
- Board and Care Operator reviews the referral and schedules interview with the client
- Once accepted into placement the Board and Care Coordinator will support the board and care operator by gathering the admission paper work needed before a client can be placed.
- Admission Date is set after board and care operator receives a completed admission packet.

BOARD AND CARE COORDINATOR ROLE

- Weekly-bi weekly check ins with b&c operators
- Provide clinical support and assist with triaging issues
- Share covid-19 resources and identify any gaps in needs
- Admission and discharge planning
- Assist with developing client behavioral plans
- Check in's with clients to monitor their progress; support with addressing any concerns
- Assist with coordinating with treatment providers
- Participate in case conferences to support clients placement stabilization
- Facilitate monthly b&c operator meeting
- Set up board and care operator trainings (10 trainings per year)

BOARD AND CARE WAITLIST

FACILITY PLACEMENT STATUS (Week of: 2/1/21)			
Referrals on Waitlist	Referrals		Relevant issues/concerns
ARF	13		
Bruce Badilla	1		
RCFE/Ambulatory	12		
RCFE/Non-Ambulatory	3		
Board & Cares	Open Beds	Referrals	Relevant issues/concerns
A&E Home Care Serv (RCFE/2/male)			
Rice Residential (ARF/5/male)	1		on HOLD due to COVID
Blanca's Place (ARF/6/male)			COVID Lockdown
Care Plus (ARF/6/male)	1		
Perpetual Help Home (ARF/6/M)			
University Guest Home (ARF/6/M)	2	2	Referrals sent, pending interviews
Hillcrest Manor (RCFE/12/M/F)	1		2 referrals
Ismaela's Homecare (RCFE/6/F)			Ruth is on 30 day notice-continuing case conference scheduled
Mariah's Garden Homecare (RCFE/6/3F3M)			
Portobello Care Home (ARF/19/M)	1		1 ct. accepted and pending COVID test
Simple Living (ARF/6/F)			
Bruce-Badilla (ARF/12/M)	1		1 ct. served notice/1 ct referred.
Millbrae Assisted Living (RCFE 48)	2F		2 isolation rooms for COVID and 1 bed hold for. 1 ct pending interview

MHSA FUNDED BOARD AND CARE ACTIVITIES

Care Packages

Adult Coloring books

Fidget Toys

Fuzzy Posters

Markers/coloring pencils

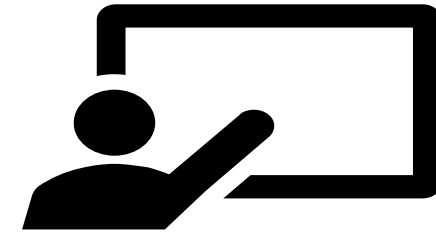
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MHSA FUNDED BOARD AND CARE GROUPS

1. Illness Management and Recovery
2. Seeking Safety
3. Wellness Recovery and Action Plan (Wrap)
4. Co-occurring/Harm Reduction



**Covid-19 pandemic-Health Officer shelter orders shift from in person to virtual groups*

MHSA funding to Support Virtual Groups

- 30 chrome pads/data plans, covers, earphones, sanitizing machine
- Chrome pads set up to enable easy use, font size, auto-saving log in info, basic user instructions, staff assistance for logging into first virtual group.
- Group supplies needed to facilitate the groups

BENEFITS OF THE GROUPS

- ❖ Board and Care Operators appreciative of the groups being offered, and that they are facilitated by BHRS staff.
- ❖ All clients are allowed to participate in the group if they chose (screen in vs out)
- ❖ Building coping skills
- ❖ Support with managing symptoms

PAYMENT/FUNDING

Non-Medical Out-of-Home Care (NMOHC)
Payment Standard for Individuals-Licensed Facility or
Without In-Kind Room and Board
Effective January 1, 2021

Source	Amount
Supplemental Security Income (SSI)	\$ 794.00
State Supplementary Payment (SSP)	\$ 423.37
Total NMOHC Payment Standard	\$1,217.37*

The NMOHC Payment Standard includes the following components:

Component	Amount
Room and Board	\$ 525.37
Care and Supervision (maximum)	\$ 554.00
Amount Payable for Basic Services	\$1,079.37 ¹
Personal and Incidental Needs Allowance (minimum) (Must be provided to the recipient)	\$ 138.00
Total NMOHC Payment Standard	\$1,217.37*

*This total NMOHC payment standard is doubled for SSI/SSP couples.

¹ NOTE: Recipients who have income in addition to their SSI/SSP check (for example, a pension, Social Security retirement, or disability benefits) can be charged the \$1,079.37 amount for basic services plus an additional \$20. Because federal rules do not count the first \$20 of a recipient's income against his/her SSI/SSP grant, an SSI/SSP recipient with other income has an extra \$20 that people who receive only an SSI/SSP check do not have. Neither federal nor state law restricts the recipient in how this additional \$20 amount is spent. Thus, if the recipient agrees in the admission agreement to pay the additional \$20 for basic services, the facility may charge the additional amount.

In addition to the SSI payment, BHRS pays:

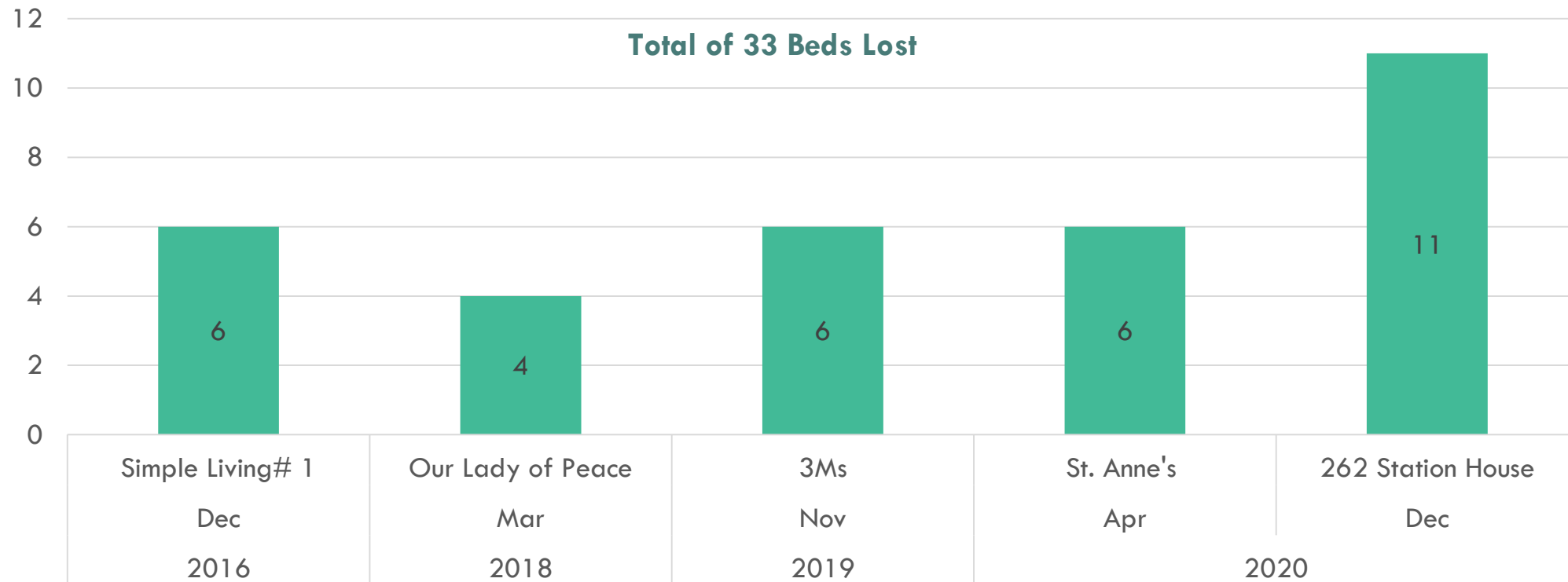
Daily Patch (net county costs/MHSA)

➤ \$36.76

*only 1 b&c paid \$44.05 Bruce B. co-occurring specialty provider.

BOARD AND CARE CLOSURES

Board and Care # of Beds Lost by Year



CURRENT CHALLENGES

COVID-19 pandemic

- Some clients not consistently following shelter in place orders, or wearing PPE.
- B&C Operators concern for their own health and wellbeing and the potential of the virus being brought into their facility.
- Rise in notices being given to clients

NEEDS AND OPPORTUNITIES

- Demand for RCFE beds continue to rise
- Transition from ARF to RCFE as clients age, and require more support to maintain a community level placement.

B&C Operators are retiring

- Need targeted recruitment to recruit new board and care operators
- B&C Informational sessions
- Explore board and care sign on bonus and/or monies for start up costs

QUESTIONS

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