



Behavioral Health Urgent Care Center

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Mr. Scott Kinsey, Planner V
411 W. Ocean Blvd., 3rd Floor
Long Beach, CA 90802

August 28, 2019

Dear Mr. Kinsey,

As a follow-up to the Behavioral Health Urgent Care Center (BHUCC) Conditional Use Permit, I am pleased to present this summary of our first year of operations below.

1. List of Nuisance Call during the preceding year.

Zero. At no time throughout the first year of operation did anyone call to complain about our operation in the community.

2. Calls for Service from Police

From August to June there were a total of 23 service calls to 911 which have been classified into four categories:*

- | | |
|---|----|
| • Client medical emergency | 12 |
| • An electrical malfunction in an air conditioner causing smoke | 1 |
| • Excessive client dangerous behavior activity | 5 |
| • Client initiated calls | 5 |

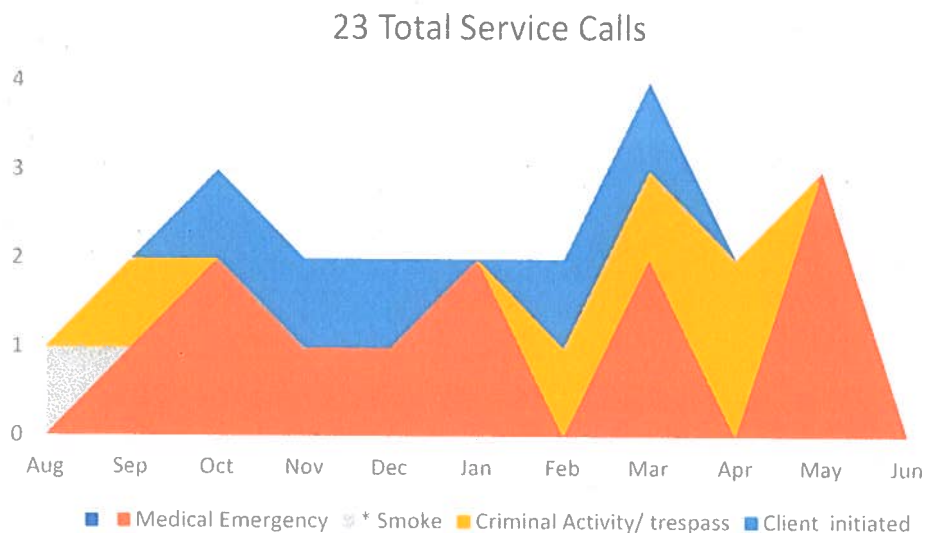
*(*Note 23 calls for 3,497 admissions.)*

*The most frequent reasons for calls were **medical emergencies**. These were for clients whose medical conditions were worse than initially presented. Examples are a client who reported taking a life threatening overdose after being assessed and admitted and a client with an unreported history of seizures who had a seizure.*

***Excessive client dangerous behavior activity** included 1) an intoxicated person entering the Crisis Walk in Center (CWIC) and began throwing furniture, 2) a client on client physical assault, 3) a client who refused to leave the facility upon completion of treatment, 4) the mother of an adult client came to the facility threatening staff because she did not want her treated, 5) a client that was refused at another hospital came in irate and started to threaten to kill staff. He was unable to be redirected and did not meet MH criteria to be admitted at the BHUCC.*

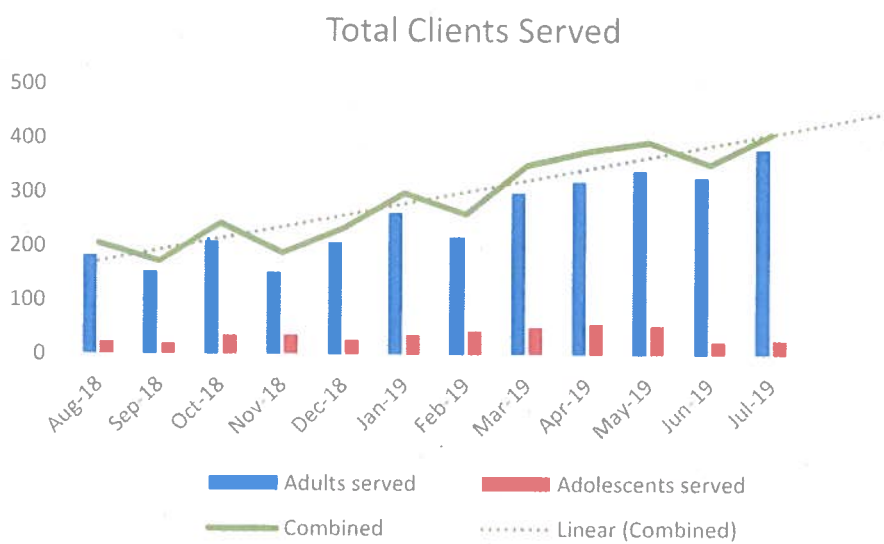
In all instances, BHUCC staff responded and utilized Pro-ACT dangerous behavior de-escalation intervention. Calls for assistance were made only when initial efforts to address the incident were unsuccessful and a dangerous situation persisted.

Client initiated calls occurred as clients are entitled to utilize a phone while in the program.



3. Total Clients Served

During the preceding 12 months since the opening of the BHUCC, we have served 3497 clients; 3057 aged 18 and older and 440 adolescents age 13-17. The graph below demonstrates the growing volume of clients treated on a monthly basis. It also shows the projected volume increases. In the month of July, we averaged 13 clients daily who either walked in or were brought by services from hospitals or law enforcement.



4. Clients Diverted from hospital ER's

422 clients were referred from hospitals, including: Long Beach Memorial Medical Center, St. Mary's Medical Center, Providence Medical Center at San Pedro, Catalina Island Medical Center, College Medical Center, College Hospital of Cerritos, Miller Children's Hospital, Providence Holy Cross Medical Center, Providence St. Joseph Medical Center, and Torrance Memorial Hospital. On average 35 clients per month were diverted from area hospitals.

	18-Aug	18-Sep	18-Oct	18-Nov	18-Dec	19-Jan	19-Feb	19-Mar	19-Apr	19-May	19-Jun	19-Jul	Total
Hospitals	26	34	34	34	29	47	38	37	43	37	20	43	422

5. Clients referred to BHUCC by Law Enforcement

689 were referred from Law Enforcement agencies. Including: Long Beach Police Department, Long Beach MET, Signal Hill PD, Eagle Rock PD, Los Angeles Police Department, SMART, San Pedro PD, Lakewood Sheriff Department, Pasadena Police Department, and LBUSD PD. On average over 57 clients per month were referred by law enforcement.

Law	18-Aug	18-Sep	18-Oct	18-Nov	18-Dec	19-Jan	19-Feb	19-Mar	19-Apr	19-May	19-Jun	19-Jul	Total
Enforcement	50	42	46	24	56	60	46	65	68	78	77	77	689

6. Clients Requiring a Higher Level of Care

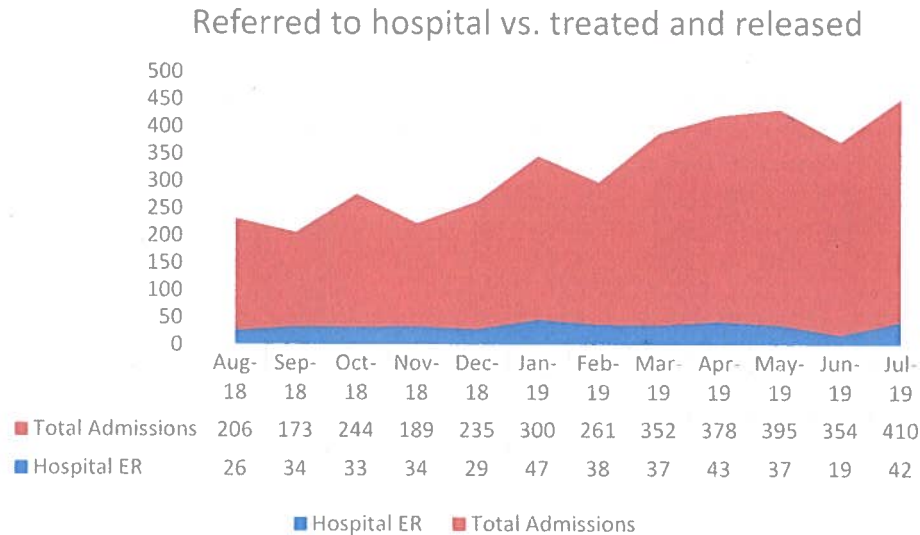
As demonstrated in the graph below, on average 87% of the clients were treated and discharged without needing a higher level of care in an in-patient psychiatric facility. During the first 12 months of operation only 13% could not have their mental health crisis stabilized within the required 23 hours and 59 minutes. This graph also demonstrates that as the census continues to climb, the actual percentage of those requiring further treatment has actually decreased (the grey line.)

Clients needing higher level of care
by number and percent



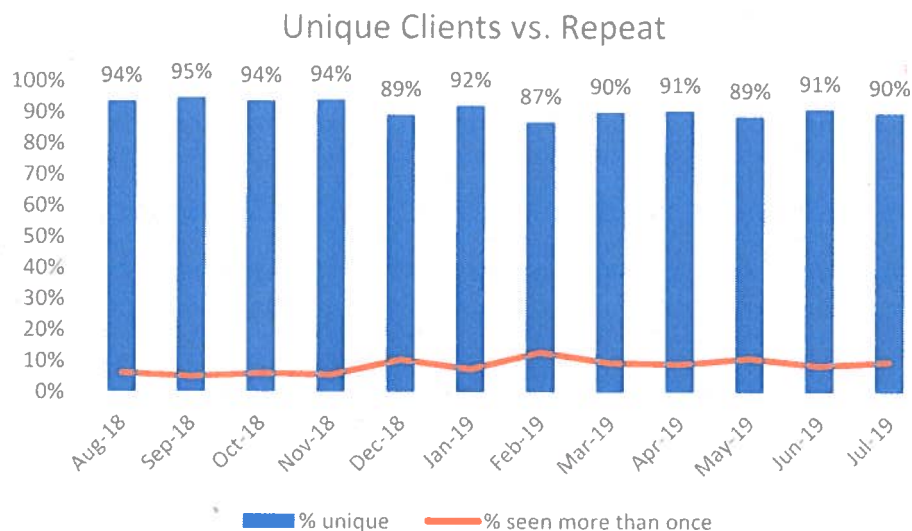
7. Further Hospitalization vs. Treated and Released

This graph demonstrates the success of creating a program where people experiencing a mental health crisis can be successfully treated outside of a hospital emergency room. 87% (in red) of the clients seen at the BHUCC did not require further in-patient treatment.



8. Successfully Treated and Reconnected to the Community

*After one visit at the BHUCC, 91% of the clients have their needs met and do not return; 9% of the clients return more than once. In 2019/20 we are pleased to report that the Department of Mental Health has provided additional contract dollars to continue to follow those clients who are seen more than one time at the BHUCC. A new **Community Transition Team** will provide community-based therapy and case management services for an additional 90-days to enhance the “warm hand-off” for those struggling with recidivism. Many of these will be homeless individuals. We have experienced a gradual increase in the volume of clients who are homeless. It has been over 20% of clients in recent months.*



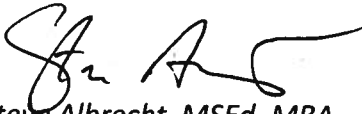
9. Additional Benefits of the BHUCC in Long Beach

In addition to providing much needed services to nearly 3500 clients from the Greater Long Beach Area in a mental health crisis, we have:

- *Partnered with Cal State LA to provide in-depth proctoring and on-the-job training for four psychiatric nurse practitioner students. These future Psychiatric Nurse Practitioners/ physician extenders, once fully trained, will be able to assist with the Counties' growing mental health needs,*
- *Partnered with countless Mental Health and Law Enforcement agencies as well as shelters, sober living facilities and other social service agencies to strengthen the safety net for our communities most vulnerable population,*
- *Sponsored three series of NAMI's **Family to Family** classes for families with a family member living with a mental illness,*
- *Create over 60 jobs in Long Beach, and*
- *Been designated as one of Long Beach's Father Friendly Businesses.*

In closing I would again like to thank the Planning Department, the Planning Commission, the City Council, NAMI, and the LA Department of Mental Health for all the support we receive, to help do all this good in the City of Long Beach.

Sincerely,



Steve Albrecht, MEd, MBA
Regional Administrator

