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Page 3: Part I: Standard Annual Questions for Counties and Local Advisory Boards

Q1

Napa

Please identify your County / Local Board or Commission.

Q2

For how many individuals did your county behavioral health department pay some or all of the costs to reside in a licensed Adult Residential Facility (ARF) during the last fiscal year?

42

Q3

What is the total number of ARF bed-days paid for these individuals, during the last fiscal year?

12881

Q4

Unmet needs: How many individuals served by your county behavioral health department need this type of housing but currently are not living in an ARF?

At least 3-5 individuals This at-least estimate reflects that Napa's unmet ARF needs also include community-based ARF facilities for Napa individuals with serious mental illness ("I-SMI"). There are currently no such facilities; all ARF placements must be in large ARF facilities in other counties, often quite far away. There are ARF appropriate I-SMI who decline ARF support remote from home and family support. Community-based board & care facilities in or adjacent to Napa's continuum of care would likely result in improved outcomes and could yield significant cost savings over time.

Q5

Does your county have any "Institutions for Mental Disease" (IMDs)?

Yes (If Yes, how many IMDs?):

One: Crestwood-Angwin

**Q6**

For how many individual clients did your county behavioral health department pay the costs for an IMD stay (either in or out of your county), during the last fiscal year?

In-County	8
Out-of-County	25

**Q7**

Respondent skipped this question

What is the total number of IMD bed-days paid for these individuals by your county behavioral health department during the same time period?

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Page 4: Part I: Standard Annual Questions for Counties and Local Advisory Boards (Continued)

**Q8**

During the most recent fiscal year (2019-2020), what new programs were implemented, or existing programs were expanded, in your county behavioral health department to serve persons who are both homeless and have severe mental illness? (Mark all that apply)

**Emergency Shelter,**  
**Transitional Housing,**  
**Supportive Housing,**  
**Rapid re-housing,**

Other (please specify):

Emergency: Fire shelters and COVID shelters for homeless people in the County, all included those with SMI.;  
 Transitional: No new programs, but working on turning transitional housing into permanent housing. Supportive: Providing case management for permanent supportive housing via the nonprofit Abode Services. There is a new 6 unit apartment complex called Red House, consisting of 3 units supplemented by Abode and 3 units supplemented by Buckelew (for people who are homeless and SMI). Also, Mentis added a refurbished room (Single Room Occupancy) to its supported housing. Rapid: This past year is the first time SMI clients have received help from Abode Services.

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Page 5: Part I: Standard Annual Questions for Counties and Local Advisory Boards (Continued)

**Q9**

**Yes**

Do you think your county is doing enough to serve the children/youth in group care?

**Q10**

**No**

Has your county received any children needing "group home" level of care from another county?

**Q11**

Has your county placed any children needing "group home" level of care into another county?

Yes (If Yes, how many?):

From CWS: 5 in January 2020. This number declined to 4 in March, 3 in May, 2 in June, and 1 in August. The current number remains at 1. From Probation: 6 in January 2020, declined to only 2 in November.

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Page 6: Part II: Telehealth Technology for Behavioral Health

**Q12**

Was your County using telehealth to provide behavioral health services prior to the Covid-19 public health emergency?

Yes (If yes, how were telehealth services funded prior to the Covid-19 public health emergency?:

Telehealth was used in the Crisis Stabilization Unit and was paid as a billable service.

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Page 7: Part II: Telehealth Technology for Behavioral Health (Continued)

**Q13**

Did your county decide to offer telehealth services after the Covid-19 public health emergency began?

**Respondent skipped this question**

**Q14**

Did the Covid-19 public health emergency cause your county to modify or adapt your service in any way?

**Yes**

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Page 8: Part II: Telehealth Technology for Behavioral Health (Continued)

**Q15**

Which of the following changes to your services were made? (Please select all that apply)

**Increased availability of telehealth services,**

**Expansion of the kinds of services provided via telehealth**

,

**Telehealth training for staff and providers,**

**Changes to technology/software to facilitate telehealth,**

**Community outreach to promote telehealth services,**

Other (please specify):

1. One-on-one outreach, person-centered consultation regarding use of telehealth 2. Developed a tool for clinicians, a telehealth checklist to help promote best telehealth practices and compliance with regulations.

**Q16**

Is your county able to serve both adults and children with behavioral health telehealth services?

**Both**

**Q17**

Are telehealth services in your county provided by an "in house" provider that is either on contract or an employee of Behavioral Health Services?

Yes

**Q18**

Does your county have a contract with an organizational provider out of your area to provide behavioral health telehealth services?

Yes (If Yes, what is the name of the provider organization?):  
Kings View provides psychiatry via telehealth

**Q19**

How are consumers able to receive behavioral health telehealth services in your county? (please select all that apply)

**On personal home computers,**  
**On mobile devices such as a cell phone or tablet,**  
**On a landline phone,**  
**At community clinics or wellness centers**

**Q20**

What challenges do consumers in your county have regarding accessing and utilizing telehealth services? (please select all that apply)

**Lack of computer or mobile devices to access telehealth services**  
,  
**Lack of availability of internet services in the area,**  
**Inadequate internet connection/bandwidth to use telehealth services**  
,  
**Cannot afford internet service or mobile data plan,**  
**Lack of privacy in the home,**  
**Distrust of telehealth services,**  
**Lack of knowledge regarding the availability of telehealth services**  
,  
Other (please specify):  
Language can be an issue if there are not instructions regarding how to use technology in the client's language.

**Q21**

Does your county provide any of the following accommodations to assist consumers who have barriers to accessing telehealth services? (please select all that apply)

**Language interpretation for telehealth services,**  
**Clinic, wellness center, or community-based telehealth access sites**

**Q22**

Which of the following does your county have difficulty with when it comes to providing behavioral health telehealth services to consumers? (please select all that apply)

Technology/software,  
Network bandwidth to support secure and quality connection  
,  
Encouraging consumer/community adoption and utilization

**Q23**

Who normally schedules and coordinates telehealth services in your county? (please select all that apply)

Case manager,  
Social worker, counselor, or other licensed mental health professional  
,  
Nurse,  
Individual medical providers

**Q24**

While your county has been using telehealth to provide behavioral health services, have you noticed any changes in your no-show/cancellation rates for the following age groups?

Children (age 15 or below)

Increase in no-shows/cancellations

Transition-age youth (16-21)

Decrease in no-shows/cancellations

Adults (22-64)

Decrease in no-shows/cancellations

Older adults (65+)

No change

**Q25**

Has the use of telehealth increased access to behavioral health services for any of the following groups? (please select all that apply)

Rural or distant communities,  
Low-income communities,  
Racial/ethnic minorities,  
Older adults,  
Other (please specify):  
Telehealth increases access across all populations.  
Telehealth eliminates transportation challenges.

**Q26**

Has your county experienced any of the following benefits of using telehealth to provide behavioral health services? (please select all that apply)

Increased appointment attendance,  
Improved case-management for consumers with high needs  
,  
Improved clinical workflow and overall practice efficiency  
,  
Easier to connect with families with small children

**Q27****No**

Is your county having any billing/reimbursement issues regarding behavioral health telehealth services?

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**Q28****Somewhat confident**

How confident is your county that behavioral health services provided via telehealth are being billed in an appropriate and accountable manner?

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**Q29****Yes**

When the Covid-19 public health emergency is over, do you expect your county will want to continue with telehealth to deliver behavioral health services?

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**Q30**

Please explain why or why not.

Telehealth has proven to be a successful way to provide services to clients. It provides advantages with some client populations. However, regulations must continue to allow telehealth for reimbursement.

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**Q31**

Does your county have any additional input concerning the use of telehealth to deliver behavioral health services?

Staff and clients have adapted well to telehealth.

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## Page 9: Post-Survey Questionnaire

**Q32**

What process was used to complete this Data Notebook? (please select all that apply)

**MH board work group or temporary ad hoc committee worked on it**

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**MH board partnered with county staff or director**

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**Q33**

Does your board have designated staff to support your activities?

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Yes (if Yes, please provide their job classification):  
Sr. Office Assistant

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**Q34**

Please provide contact information for this staff member or board liaison.

Name	<b>LuAnn Pufford</b>
County	<b>Napa</b>
Email Address	
Phone Number	

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**Q35**

Please provide contact information for your Board's presiding officer (Chair, etc).

Name	<b>Kristyn Miles</b>
County	<b>Napa</b>
Email Address	
Phone Number	

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**Q36**

Do you have any feedback or recommendations to improve the Data Notebook for next year?

There should be an option to add specific information to explain responses. This would provide you with a much better understanding about problems and how the counties are dealing with issues, rather than just check boxes. I understand that this may be more difficult to process, but the data would be richer.

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