

#19

COMPLETE

Collector: Live Survey Link (Web Link)
Started: Thursday, November 19, 2020 1:24:09 PM
Last Modified: Monday, November 30, 2020 1:10:36 PM
Time Spent: Over a week
IP Address: 172.251.19.226

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

Q1**Tri-City**

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?

0

Q3

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

0

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?

Not applicable- see question 2 response

Q5**No**

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

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

Tri-City is the Joint Powers Mental Health Authority and is responsible for the outpatient specialty mental health services for Pomona, La Verne and Claremont.

Q7

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

Not applicable- see question 6 response

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,

Temporary Houseing,

Transitional Housing,

Housing/Motel Vouchers,

Other (please specify):

Tri-City MHS paid for emergency COVID related housing in the form of hotel stays and increased shelter placements

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

No

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

Page 6: Part II: Telehealth Technology for Behavioral Health

Q12

No

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

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

Q13**Yes**

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

Q14**Yes**

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

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 staffing to facilitate telehealth coordination,
Changes to technology/software to facilitate telehealth,
Community outreach to promote telehealth services

Q16**Both**

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

Q17**Yes**

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

Q18**No**

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

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
,
Difficulty filling/receiving prescriptions that are prescribed via telehealth services

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,
Text-based services for consumers who are deaf or hard of hearing
,
Clinic, wellness center, or community-based telehealth access sites
,
Assistance in securing a mobile device or internet connection, including equipment loans
,
Other (please specify):
Full Service Partnership clients received phones if they needed them

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)

Telehealth training for staff and providers,
Encouraging consumer/community adoption and utilization

Q23

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

Dedicated telehealth coordinator,
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)	No change
Transition-age youth (16-21)	Increase in no-shows/cancellations
Adults (22-64)	Increase in no-shows/cancellations
Older adults (65+)	Increase in no-shows/cancellations

Q25

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

Low-income communities

Q26

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

Increased consumer outreach and engagement,
Improved case-management for consumers with high needs
,
Providers can serve more patients,
Other (please specify):
Additional benefits of telehealth is currently under review

Q27

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

No

Q28

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

Somewhat confident

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?

Q30

Please explain why or why not.

Providing as many options as possible to our community allows for the flexibility to more deeply and more quickly engage clients. This aspect is especially true during the intake process. Telehealth has provided greater access to services, convenience and flexibility, while also minimizing the daily stressors of transportation, gas expenses and exposure risks to COVID-19. Telehealth also allows for staff to have some flexibility in their work which serves to reduce burnout and may improve staff retention.

Q31

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

Providing telehealth services requires a shift in mindset and skill set, to some degree, with regards to clinical training, staff supervision and all-around leadership on part of management team. All of which requires adjustments and adaptation to onboarding, clinical oversight, training and performance review of clinical staff.

Page 9: Post-Survey Questionnaire

Q32

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

MH Board reviewed W.I.C. 5604.2 regarding the reporting roles of mental health boards and commissions

,

Data Notebook placed on Agenda and discussed at Board meeting

,

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

,

MH board partnered with county staff or director,

MH board submitted a copy of the Data Notebook to the County Board of Supervisors or other designated body as part of their reporting function

Q33

Does your board have designated staff to support your activities?

Yes (if Yes, please provide their job classification):

Tri-City Mental Health Best Practices Division

Q34

Respondent skipped this question

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

Q35

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

Name	Anne Henderson, Vice Chair
County	Tri-City Mental Health
Email Address	
Phone Number	

Q36

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

Having the ability to explain more detail in some of the questions wanted only a numerical answer (i.e questions 2-6).
As a joint powers mental health authority some questions could be explained more if there was a comment section.
