#18

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Collector: Live Survey Link (Web Link)

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

Q1 Tulare

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?

322

Q3

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

20736

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?

18

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 0

Out-of-County 242

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

23507

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

Q8

Q12

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) Transitional Housing,

Supportive Housing,

Adult Residential Care Patch/Subsidy

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 Yes (If Yes, how many?):

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

Q11 Yes (If Yes, how many?):

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

Page 6: Part II: Telehealth Technology for Behavioral Health

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 for psychiatric services throughout the Mental Health Plan in Tulare County. Most initial expenses for equipment were paid with MHSA funds or covered by program revenues generated through medical billing.

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

15

Q13	Respondent skipped this question
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	Increased availability of telehealth services,
Which of the following changes to your services were made? (Please select all that apply)	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	On personal home computers,
How are consumers able to receive behavioral health telehealth services in your county? (please select all that apply)	On mobile devices such as a cell phone or tablet, On a landline phone, At community clinics or wellness centers

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

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):

Additionally, our clinic sites have set up telehealth stations for those consumers that do not require or request face-to-face interaction but do need assistance with technology.

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)

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

Other (please specify):

Our office assistants also schedule telehealth sessions.

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)

Transition-age youth (16-21)

Adults (22-64)

Older adults (65+)

Decrease in no-shows/cancellations

Decrease in no-shows/cancellations

No change

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

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,

Increased appointment attendance,

Improved clinical workflow and overall practice efficiency

,

Providers can serve more patients,

Increased staff morale/decreased burnout,

Other (please specify):

Psychiatry services specifically have a drastically reduced no-show rate.

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? Very confident

Q29

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?

Yes

Please explain why or why not.

For those consumers who are able to use available technology, access to services is significantly improved with telehealth.

Q31

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

None at this time.

Page 9: Post-Survey Questionnaire

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

MH board partnered with county staff or director

Yesenia Lemus, Administrative Specialist

Q33

Q32

No

Does your board have designated staff to support your activities?

Q34

Name

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

County Tulare

Email Address

Phone Number

Q35

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

Name Bruce Nicotero

County Tulare

Email Address

Phone Number

Q36

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

The Survey Monkey method was much more efficient considering the conditions we are currently working under with Covid-19.