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

Q1 **Amador**

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?

6

Q3

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

2096

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?

1-2

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	6

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?

1108

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

Q8

Respondent skipped this question

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)

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

Q9

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

No (If No, what is your recommendation? Please list or describe briefly):

There are no group homes or Short Term Residential Treatment Programs (STRTPs) in Amador County. Currently no foster youth are in this level of care with Behavioral Health involvement. If there is a need for this level of service, ACBH will contract with facilities outside of the county to ensure treatment for the youth.

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 **Increased availability of telehealth services,**
Expansion of the kinds of services provided via telehealth
 Which of the following changes to your services were made? (Please select all that apply)

,

Telehealth training for staff and providers,
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 **Yes (If Yes, what is the name of the provider organization?):**
 We maintain a contract with Locum Tenens in case it is needed and we need additional providers, but currently we do not have any active providers under this contract.
 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,**
On mobile devices such as a cell phone or tablet,
On a landline phone
 How are consumers able to receive behavioral health telehealth services in your county? (please select all that apply)

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,

Other (please specify):

Difficulty navigating the modality. Some consumers do not have an email account to connect to Zoom and to receive the link information.

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

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,

Scheduling and coordinating telehealth services,

Getting provider buy-in,

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,

Other (please specify):

Medical Records Staff and Reception Staff

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)

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)

Rural or distant communities,

Other (please specify):

Clients with severe anxiety that would miss appointments prior to the pandemic, when services were face to face.

Q26

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

Other (please specify):

1) Clients who may be resistant to face to face services have reportedly been more engaged with telephone services. 2) Clients with lack of transportation that impact access have benefited 3) If clients do not meet medical necessity or need a lower level of care they can access telehealth providers out of county and not have to drive out of county.

Q27

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

Yes (if yes, please explain):

Medicare does not pay for telephone services. Needed to add indications in the electronic health record for telehealth/telephone and had to train staff to change the indicators from face to face to telehealth or telephone based on how the services was provided, to avoid billing errors.

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

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

Q36

Respondent skipped this question

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