

## **CBHPC 2023 Data Notebook**

1. **Please identify your County / Local Board or Commission.**
  - County of San Diego Behavioral Health Advisory Board (BHAB)
2. **For how many individuals did your county behavioral health department pay some or all of the costs to reside in a licensed Adult Residential Care Facility (ARF), during the last fiscal year?**
  - 382 Individuals (SSI pays the Board and Care portion)
3. **What is the total number of ARF bed-days paid for these individuals, during the last fiscal year? (Please note that this number should not exceed the number of individuals in Question 2 x 365 days)**
  - 124,583
4. **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?**
  - Data not available.
5. **Does your county have any 'Institutions for Mental Disease' (IMD)?**
  - Yes, four (4) mental health clinics and three (3) skilled nursing facilities/special treatment programs.
6. **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: 618 clients
  - Out of county: 22 clients
7. **What is the total number of IMD bed-days paid for these individuals by your county behavioral health department during the same time period?**
  - 142,166 (Data from Power BI)
8. **During fiscal year 2022-2023, what new programs were implemented, or existing programs were expanded, in your county to serve persons who are both homeless and have severe mental illness? Mark all that apply: a) Emergency Shelter,**

**b) Temporary Housing, c) Transitional Housing, d) Housing/Motel Vouchers, e) Supportive Housing, f) Safe Parking Lots, g) Rapid Re-Housing, h) Adult Residential Care Patch/Subsidy, i) Other (Please specify)**

- Other:
  - Contract 566533- CHIP ILA/RRA added 3 FTE for Care program Housing Locator Services
  - Contract 565101 - PATH San Diego Homeless Outreach Program (SD-HOP)—added 1 FTE Library Social Worker for the El Cajon Library—position is funded by the El Cajon Library through the BHS contract, serving anyone who visits the library
  - Contract 566355 - Vista Hill Foundation-added Rosecrans Shelter Care Coordination (150 bed tent for general homeless-team provides support services)

**9. Do you think your county is doing enough to serve the foster children and youth in group care? [BHAB Responses]**

- No. Wait times for appointments is too long. (staffing shortage)
- Yes.
- No. I said “No” because I fundamentally believe more can and should be done. BHS is doing better today than years ago, but there is always room for improvement.
- Yes.
- No. Include TAY with lived experience on our board

**10. Has your county received any children needing “group home” level of care from another county?**

- Yes, 97. In Fiscal Year (FY) 2022-23, local Short-Term Residential Treatment Program (STRTP) served 97 out of county youth under the STRTP contracts.

**11. Has your county placed any children needing “group home” level of care into another county?**

- Yes, 40. In FY 2022-23, the Child and Family Wellbeing Department placed 40 youth in out of county specialty mental health services facilities.

**12. For each of the following categories, please choose the option from the dropdown menu that best describes how often your county organizes stakeholder engagement meetings or events. Drop down menu options: Less than once a year, Annually, Every 6 months, Quarterly, Monthly, More than once a month.**

- **MHSA Community Planning Process (CPP):** Quarterly

- **MHSA 3-year plan updates:** Annually
- **EQRO focus groups:** Annually, two (2) EQRO reviews a year with two (2) to four (4) focus groups per review.
- **SAMHSA-funded programs:** Less than once a year
- **Mental/ behavioral Health Board/Commission Meetings:** Monthly
- **County Behavioral Health co-sponsoring /partnering with other departments or agencies:** Quarterly
- **Other (please specify):** Various health promotion events; Countywide Live Well San Diego Events: Quarterly

13. **Estimate the number of people who participated in your stakeholder processes in fiscal year 2022/2023. (Numerical response)**

- At least 1,800

14. **Approximately what percentage of stakeholder engagement events or efforts in your county were in-person only, virtual only, a combination of both in-person and virtual, or written communications (please answer with a whole number for each, such that the total of the four amounts to 100).**

- In-Person Only – 30%
- Virtual Only – 60 %
- Combination Both In-Person and Virtual – 5%
- Written Communications (such as online surveys or email questionnaires)- 5%

15. **Which of the following languages did your county use to conduct stakeholder meetings or outreach during fiscal year 2022/2023, with or without the use of interpreters? (Check all that apply) This list of languages reflects the threshold and concentration languages for all counties as of July 2021 from the following DHCS document: [Threshold and Concentration Languages \(ca.gov\)](#)**

- English
- Farsi
- Spanish
- Tagalog

- American Sign Language (ASL)
- **Other languages:** Vietnamese, Dari, Pashto

**16. Which of the following stakeholder groups have you collected and implemented input from within the last year? (Check all that apply)**

- Adults with severe mental illness (SMI)
- Older adults/Seniors with SMI
- Families of children, adults, and seniors with SMI
- Individuals with developmental disabilities and/or their representatives
- Providers of mental health and/or related services
- Representatives of managed care plans
- Law enforcement agencies
- Educators and/or representative of education
- Social services agencies
- Veterans
- Representatives from veteran's organizations
- Providers of alcohol and drug services
- Health care organizations
- LGBTQ+ individuals
- Youth

**17. Please describe how stakeholder input is communicated to the behavioral health director, the mental/behavioral health board/commission, and any other agencies or groups for informing policy.**

- A centralized Communication & Engagement Team within the County Behavioral Health Services (BHS) department was established in November 2022 and functions in a lead role for coordinating, curating, and reviewing stakeholder input. Several members of this team interact directly with the BHS Director on a continuous basis and provide rolling, as well as ad-hoc, updates on a variety of priority efforts. The Chief of this team provides quarterly updates to San Diego County's Behavioral Health Advisory Board (BHAB), as well as monthly and ad-hoc updates at BHAB Subcommittee meetings. Representatives from this team, or other representatives from the department, also make

themselves available to respond to presentation requests as appropriate. Requests are routed internally, as well as received via an online-based form (<https://app.smartsheet.com/b/form/7e7b445a0deb41abbbf8237a3aadf7f2>) which is linked on County webpages for accessibility and promoted with non-BHS staff, partners, and community members. Additionally, customer satisfaction surveys for direct services rendered by the department are collected on a rolling basis (including contracted providers), and that information is provided to executive leadership members for BHS Programs & Services who also brief the BHS Director during regular weekly and monthly meetings

**18. Please describe how your county implements collected stakeholder input to actively inform policy and programs. Include how the county decides what ideas to implement or actions to take.**

- Stakeholder input is collected year-round through various mechanisms and relayed to the most applicable teams within the department to review and address. This input is paired with available data whenever possible to ensure data-driven decision-making by department leadership. With respect to program development and design, the department's Programs & Services Unit maintains a robust process for evaluating existing and upcoming programs. The process includes scope of work review, cost analyses, and stakeholder input received through engagement activities (e.g., focus groups, third-party evaluations and program analyses, Request for Information sessions). Based upon these, recommendations on program design or revision are made. Stakeholder input is also elevated through letters, memos, and presentations provided by the department to the county's Board of Supervisors and may inform policy. Additionally, stakeholder input specific to health promotion activities and how community engagement is conducted is received by the department's Communication & Engagement Team and changes to implementation are initiated on a rolling basis as needed.

**19. Does your county have a Community Program Planning (CPP) plan in place?**

- Yes: A Community Engagement (CE) Subcommittee of the county's Behavioral Health Advisory Board (BHAB) was formed in 2022-2023 and meetings of that Subcommittee and other BHAB Subcommittees have served as primary settings to involve stakeholders in the development and implementation of strategies for community programming. Most recently, for example the CE Subcommittee, was presented with proposed strategies to be implemented for 2023-2024, and the group discussed what they would like to see, particularly in relation to the MHSA Community

Program Planning Process; in effect, this group is building pieces of the plan slowly, but as a collective group. Outside of these convenings, members of the department's Communication & Engagement Team meet with stakeholders to learn what they would like to see from the department.

**20. Is your county supporting the CPP process in any of the following ways? (Please select all that apply)**

- Providing refreshments or food for stakeholder participants
- Dedicated staff assistance to facilitate stakeholder meetings and events.
- Providing information and training for stakeholders on MHPA programs, regulations, and procedures.
- Holding meetings in physically/geographically accessible locations around the county.
- Utilizing language interpreting services.
- Holding meetings at times convenient to community stakeholders' schedules.
- Providing technical assistance for stakeholders participating in webinars or teleconferences.

**21. Does your county provide training for staff on cultural awareness, community outreach, and stakeholder engagement? If yes, how? If no, why not?**

- Yes, this is done through the County's enterprise-wide Learning Management System (LMS) platform, in-service trainings, and in-person trainings with external subject matter experts enlisted by the department, group, or enterprise. For example, staff receiving training on engagement from the International Association of Public Participation (iaP2).

**22. Which of the following barriers does your county face regarding achieving meaningful and impactful engagement of stakeholders (specifically, mental health consumers and family members)? (Check all that apply)**

- General difficulty with reaching stakeholders.
- Difficulty conducting community outreach to racial/ethnic communities or other specific communities of interest.
- Difficulty reaching stakeholders with disabilities.
- Lack of funding or resources for stakeholder engagement efforts.
- Shortage of properly trained staff to support and facilitate stakeholder engagement.
- Difficulty adapting to virtual meetings/communications.

- Difficulty providing accommodations to stakeholders.
- Difficulty incorporating stakeholder input in the early stages of programming.
- Lack of “buy-in” from decision makers when it comes to implementing stakeholder input.
- **Other (please specify): 1)** Minimal or aggressive timelines for projects, which are often not set by us but by which we must abide by for one reason or another. **2)** Lack of understanding of community engagement best practices and project timelines from County leadership and elected officials. **3)** Lack of bilingual and bicultural staff in-house that could support with engagement activities.

#### [BHAB Responses]

- Received five (5) BHAB member responses. Responses addressed all the above except “Difficulty adapting to virtual meetings/communications.”

**23. Are your behavioral health board/commission members involved in your county’s stakeholder engagement and/or CPP processes? If yes, describe how. Note:** *California WIC 5892 allocates Mental Health Services Funds for county mental health programs to pay for the expenses of mental health board members to perform their duties, and to pay for the costs of consumers, family members, and other stakeholders to participate in the planning process. This includes 5% of total CSS funds to support a robust CPP process with community stakeholders.*

- Yes, the BHS Communication & Engagement Team and their Engagement Services contractor connect on a monthly basis with the Behavioral Health Advisory Board (BHAB) Subcommittee to co-develop engagement approaches.

**24. Has the COVID-19 pandemic increased or decreased the level of stakeholder engagement and input in your county?**

- Decreased

**25. Is there a fear or perception in your county that spending time, money, or other resources on stakeholder engagement conflicts with the need to provide direct services?** [BHAB Responses]

- 2 No’s
- 3 Yes’s

**26. What is one change or improvement regarding stakeholder engagement that your county would like to make within the next fiscal year?**

- Our county has updated our General Management System within the last year and now has community engagement as its central focus. Because of this, investments and new resources to aid in the performance of stakeholder engagement activities are becoming available. Our department would like to leverage these more in the coming fiscal

year and would also like to establish more continuous mechanisms outside of its BHAB (non- Brown Act meetings) to host more active planning between the Communication & Engagement Team and community members and organizations.

27. Do you have any other thoughts or comments regarding stakeholder engagement in your county or statewide? [BHAB Responses]

- Family members have privacy concerns. Thus, hesitant to speak up publicly. Many families care for the loved ones with behavioral health needs in their home. These families/parents fear 'what happens when I die'. They've heard of horrific conditions in ILCs. NAMI support groups have many parents in attendance that live with their adult son/daughter and are supporting them without county services.
- I believe starting in 2020 the County improved their focus and efforts on community engagement and stakeholders are seeing the benefits during 2023. With County plans and continuing growth in the improvement of community engagement of San Diego stakeholders' overall services - (*unclear statement*).
- Stakeholder Engagement has always been a challenge, although BHS is doing much better in the last years than previously.
- No
- Work and Co-facilitate with Community Based Organizations and provide stipends for those community facilitators and participants. Provide healthy snacks or meals and welcoming environment in the community of concern. Include more Indigenous communities and meet them where there are at in placing value in their vast historical knowledge.