

2023 Data Notebook



California
Behavioral Health
Planning Council

Advocacy • Evaluation • Inclusion

**Focus Topic:
Stakeholder
Engagement**

What is the Data Notebook?

- A structured format for reviewing information and reporting on behavioral health services in each California county.
- **Goals of the Data Notebook**
 - Assist local mental health boards to meet their legal mandates to review the local county mental health services on performance each year (California Welfare & Institution Code 5604.2)
 - Function as an educational resource about mental health data for local boards
 - Enable the California Behavioral Health Planning Council to fulfill its mandate to review and report on the public mental health system in California.

Data Notebook 2023

- Beginning in 2020, the CBHPC moved the Data Notebook survey to an online format utilizing the SurveyMonkey platform.
 - This year's focus topic is "**Stakeholder Engagement**"
- Information gathered will guide the California Behavioral Health Planning Council's advocacy in the coming year.
- The California Behavioral Health Planning Council's has resumed its practice of presenting county-specific data.



Standard Yearly Data and Questions

General

- 1) Please identify your County / Local Board or Commission:
Sacramento County Mental Health Board

Mental Health – Adults

- 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? **48 unduplicated individuals**
- 3) What is the total number of ARF bed-days paid for these individuals, during the last fiscal year? **10,638 bed days**
- 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? (*Text response*) **We do not currently track/collect this data.**

- 5) Does your county have any 'Institutions for Mental Disease' (IMD)?
- No
 - Yes. If Yes, how many IMDs? 6** (Sac Co. Mental Health Treatment Center, Heritage Oaks, Sierra Vista, Sutter and Sacramento Behavioral Health, Crestwood Sacramento)
- 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: 2,684 Out-of-county: 665**
- 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?
- 127,561**

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

Mental Health - Children and Youth

9) Do you think your county is doing enough to serve the foster children and youth in group care?

a. Yes

b. No. X In June, 2023 CPS reported that they received an average of 50 unduplicated 14 day notices, per month, for kids in care in the prior 3 months. Recommendation is to move services “upstream” by working with foster parents and family members early signs of when it is time to step up services to TBS. BHS Youth Mental Health Services recommended and the BOS approved increasing our TBS pool in late July. We are currently talking with FFA foster parents to get their input. BHS Youth Mental Health Services appointed a BHS liaison for CPS to consult when MH is a concern. This liaison is working with the FFAs.

Additionally, there is a staffing shortage in the STRTP continuum and kids in STRTPs are often aggressive toward those staff. We do not have enough beds in Sacramento. Additionally, the Sac STRTPs take kids from other counties. BHS Youth Mental Health Services recommended we increase their rates to increase salaries and provide incentives to prioritize Sacramento County CPS kids. BOS approved and we are amending contracts.

Question 9, Continued:

Also recommend FFAs become providers of SMHS because one of the areas challenged for keeping kids and not giving notice is the foster parent. The FFAs know the foster parent better than anyone in the FIT system. They can keep the services in house and are already a trusted provider to the foster parent.

Part of serving foster children and youth is also supporting their family toward reunification or visitation per CPS guidance. We have MH counselor positions we have not been able to fill on the CPS MH or Qualified Individual team responsible for doing MH assessments of youth, sitting in as MH voice in CFTs and offering to link parents to MH services. BHS Youth Mental Health Services recommend converting the MH Counselors to Peers to work with the parents/family toward their goals of reunification if appropriate.

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

c. No

d. Yes. If Yes, how many? As of 9/12/23, we had 37 youth from out of county placed in our STRTPs.

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

e. No

f. Yes. If Yes, how many? As if 9/5/23, CPS had 36 youth in out of county STRTPs and 4 non-minor dependents and Probation had 20.



Focus Topic: Stakeholder Engagement

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.

- **Dropdown menu options:**
 - Less than once a year
 - Annually (once a year)
 - Every 6 months
 - Quarterly (four times a year)
 - Monthly
 - More than once a month
- **Categories:**
 - MHSA Community Planning Process (CPP)
 - Answer: **More than once a month**
 - MHSA 3-year plan updates
 - Answer: **Annually**
 - EQRO focus groups
 - Answer: **Annually**
 - SAMHSA-funded programs
 - Answer: **Annually** (SAMHSA programs are variable, but budget community planning process occurs annually for all programs)
 - Mental/Behavioral Health Board/Commission Meetings
 - Answer: **Monthly**
 - County Behavioral Health co-sponsoring/partnering with other departments or agencies
 - Answer: **More than once a month**

Question 12, Continued:

- Other (please specify):
 - Behavioral Health Youth Advisory Board
 - Answer: **More than once a month**
 - Alcohol and Drug Advisory Board and Subcommittees
 - Answer: **Monthly**
 - Sacramento County Coalition for Youth
 - Answer: **Monthly**
 - Methamphetamine Coalition
 - Answer: **Quarterly**
 - Opioid Coalition
 - Answer: **Quarterly**
 - Opioid / Fentanyl Awareness Summit
 - Answer: **Annually**

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

Estimated Total for BHS = 5000

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: 15%
- Virtual only: 50%
- Combination of both in-person and virtual: 5%
- Written communications (e.g., online surveys, email questionnaires): 30%

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)*

- **Arabic**
- Armenian
- Cambodian
- **Chinese**
- **English**
- **Farsi**
- Hindi
- **Hmong**
- Japanese
- Korean
- Laotian
- **Mien**
- Punjabi
- **Russian**
- **Spanish**
- Tagalog
- Thai
- **American Sign Language (ASL)**
- **Other languages** (please specify) - **Vietnamese**

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 representatives of education
- Social services agencies
- Veterans
- Representative from veterans' organizations
- Providers of alcohol and drug services
- Health care organizations
- Hearing impaired individuals
- LGBTQ+ individuals
- Youth
- Other important interests (please specify)
- Specific racial/Ethnic groups (please specify): African American/Black/African Descent; Latino; Native American; Arabic speaking communities; Hmong, Chinese, Vietnamese, Lu Mien; Former Soviet

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. *(Text response)*

Verbal and written

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. *(Text response)*

Meetings, surveys, data

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

- **Yes** (If yes, describe how you directly involve stakeholders in the development and implementation of this plan) – **We ask for their input through meetings and surveys if applicable.**
- No

20. Is your county supporting the CPP process in any of the following ways?

(Please select all that apply)

- a) Reimbursement of travel costs for stakeholders participating in in-person meetings or events.
- b) Providing refreshments or food for stakeholder participants**
- c) Dedicated staff assistance to facilitate stakeholder meetings and events.**
- d) Providing information and training for stakeholders on MHSa programs, regulations, and procedures.
- e) Holding meetings in physically/geographically accessible locations around the county.
- f) Utilizing language interpreting services.
- g) Holding meetings at times convenient to community stakeholders' schedules.**
- h) Providing technical assistance for stakeholders participating in webinars or teleconferences.
- i) Other (please specify)
- j) None of the above

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

- **Yes (with comment) – County training**
- No (with comment)

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)*
- a. General difficulty with reaching stakeholders.
 - b. Difficulty conducting community outreach to racial/ethnic communities or other specific communities of interest.**
 - c. Difficulty reaching stakeholders with disabilities.**
 - d. Lack of funding or resources for stakeholder engagement efforts.**
 - e. Shortage of properly trained staff to support and facilitate stakeholder engagement.**
 - f. Difficulty adapting to virtual meetings/communications.
 - g. Difficulty providing accommodations to stakeholders.
 - h. Difficulty incorporating stakeholder input in the early stages of programming.
 - i. Lack of “buy-in” from decision makers when it comes to implementing stakeholder input.
 - j. Other (please specify)

23. Are your behavioral health board/commission members involved in your county's stakeholder engagement and/or CPP processes? If yes, describe how.

- a. **Yes** (with text comment) – **Through public comment and public hearings for feedback and approval of behavioral health initiatives, as well as recommendations to the department and the Board of Supervisors. Additionally, our mental health board members identify a board member and alternate to sit on the MHSA Steering Committee (our highest recommending body within BHS).**
- b. No

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

- a. **Increased**
- b. Decreased
- c. No change

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? (Yes/No) **No.**
26. What is one change or improvement regarding stakeholder engagement that your county would like to make within the next fiscal year?
Work more collaboratively across units and divisions, such as Public Health, who may be duplicating similar efforts or may benefit from participation.
27. Do you have any other thoughts or comments regarding stakeholder engagement in your county or statewide? (Written response)
Overall, stakeholder engagement in Sacramento County is exceptional. There are quite a few very committed and passionate community members that consistently participate in stakeholder feedback opportunities.

Miscellaneous Questions

Miscellaneous Questions

28. What process was used to complete this Data Notebook? (Please select all that apply)
- a. **MH board reviewed WIC 5604.2 regarding the reporting roles of mental health boards and commissions.**
 - b. MH board completed majority of the Data Notebook.
 - c. **Data Notebook placed on agenda and discussed at board meeting.**
 - d. MH board work group or temporary ad hoc committee worked on it.
 - e. **MH board partnered with county staff or director.**
 - f. 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.
 - g. Other (please specify)
29. Does your board have designated staff to support your activities?
- a. **Yes** (if yes, please provide their job classification): **Human Services Program Planner**
 - b. No

Miscellaneous Questions

30. Please provide contact information for this staff member or board liaison.
Jason Richards, Human Services Program Planner
RichardsJa@saccounty.gov
(916) 639-0580
31. Please provide contact information for your board's presiding officer (chair, etc.)
Chair's contact information will be entered upon submission
32. Do you have any feedback or recommendations to improve the Data Notebook for next year?
Mental Health Board Response:

MHB members recommended that questions be added regarding co-occurring disorders, outreach to rural areas, hybrid/remote versus in-person meetings, and additional outreach demographics.