



San Mateo County: Data Notebook 2023

Behavioral Health Commission

January 3, 2024



A large, gnarled tree with moss on its trunk and a dirt path leading through a wooded area. The tree is the central focus, with its thick, textured bark and sprawling branches. The path is a narrow dirt trail that winds through the trees, leading the eye into the background. The lighting is bright, suggesting a sunny day, with dappled sunlight filtering through the leaves. The overall scene is peaceful and natural.

What is the Data Notebook?

Local Behavioral Health Boards are required annually to review program data for local services and report their findings to the California Behavioral Health Planning Council (W&IC 5604.2).

The Data Notebook is the instrument by which the Planning Council collects the data from local commissions and is designed to:

- Assist local commissions with meeting the program review mandate
- To serve as an educational resource for local commissions
- To collect opinions and thoughts from local commissions
- To identify unmet needs and make recommendations

Commission's Review of Services

What are the services that the Commission should review? BHRS has two contracts with the State of California through the Department of Health Care Services that establish the required services, although the County may offer additional services that are optional:

- **The Mental Health Plan (MHP)** – Operationalizes Welfare & Institutions Code Sections 14680 – 14727 to provide Mental Health, Medication Support, Day Treatment, Crisis Intervention & Stabilization, Adult Residential, Crisis Residential, Acute Inpatient, Intensive Care Coordination (Youth), Intensive Home-Based (Youth) TBS (Youth), TFC (Youth), TCM, Peer Support, and specialty mental health services.



Commission's Review of Services

- **Drug Medi-Cal Organized Delivery System (DMC-ODS)** – Operationalizes Welfare & Institutions Code Sections 14021.51 – 14021.53, 14124.20 – 14124.25, and 14184.100 to provide Screening, Brief Intervention, Referral to Treatment and Early Intervention (Youth), Withdrawal Management, Intensive Outpatient Treatment, Outpatient Treatment, Narcotic Treatment, Recovery, Care Coordination, Medications and Residential Treatment Services.



Part 1: Standard Yearly Data & Questions for Counties



SAN MATEO COUNTY HEALTH
**BEHAVIORAL HEALTH
& RECOVERY SERVICES**

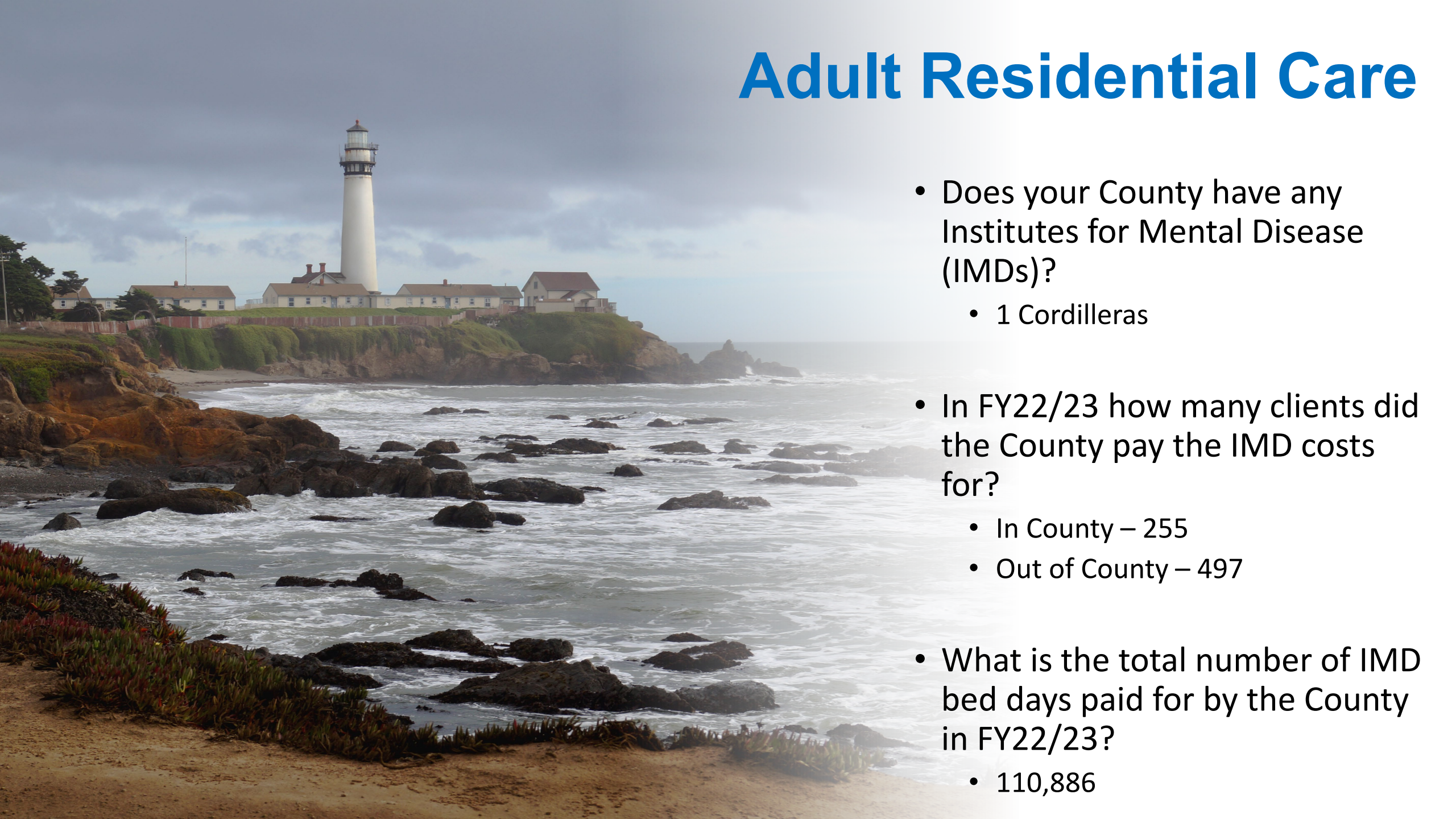
Adult Residential Care

The Planning Council would like County level data on ARFs and IMDs:

- How many clients did our County pay for all or some of the costs for ARFs in FY22/23?
 - 189 Clients
- Total number of bed-days the County paid for these individuals?
 - 65,176 Bed-Days
- How many clients need to be in an ARF, but are not currently living in one?
 - 26 Clients



Adult Residential Care



- Does your County have any Institutes for Mental Disease (IMDs)?
 - 1 Cordilleras
- In FY22/23 how many clients did the County pay the IMD costs for?
 - In County – 255
 - Out of County – 497
- What is the total number of IMD bed days paid for by the County in FY22/23?
 - 110,886

Homelessness

The Planning Council would like County level data on homelessness:

- In FY22/23 what new programs or programs that expanded to serve Homeless with Severe Mental Illness?
 - Temporary Housing
 - Housing/Motel Vouchers
 - Supportive Housing
 - Safe Parking Lots
 - Navigation Center Development
 - Permanent Housing



Foster Youth

The Planning Council would like County level data on Foster Youth:

- Do you think your County is doing enough for Foster Youth in group care?

Yes, San Mateo County operates two Short Term Residential Treatment Programs – Canyon Oaks Youth Center and Elysian. The latter serves Foster Youth exclusively.

- Does your County receive youth from outside the county for group home settings?

- 53

- Did your County place foster youth in other counties?

- 15





Part 2: Stakeholder Engagement



SAN MATEO COUNTY HEALTH
**BEHAVIORAL HEALTH
& RECOVERY SERVICES**

Stakeholder Engagement

The Planning Council would like County level data on:

- What categories and how often best describes how your county organizes stakeholder engagement?
 - Monthly
 - MHSA Community Planning Process
 - MHSA 3-Year Plan Updates
 - EQRO Focus Groups
 - Commission Meetings
 - Community Events and Events with other Departments
 - Health Equity Initiatives Meetings
 - Surveys



Stakeholder Engagement

The Planning Council would like County level data on:

- Estimate the number of people who participated in your stakeholder processes in FY22/23?

545



Stakeholder Engagement

The Planning Council would like County level data on:

- Approximately what percentage of stakeholder engagement events or efforts were in-person, virtual, a combination of virtual and in-person, or written?
 - In-Person Only 10%
 - Virtual Only 80%
 - Combination 7%
 - Written 3%



Stakeholder Engagement

The Planning Council would like County level data on:

- Which languages did your county use to conduct meetings and outreach during FY22/23?
 - Chinese
 - English
 - Russian
 - Spanish
 - Tagalog



Stakeholder Engagement

The Planning Council would like County level data on:

- Which of the following stakeholder groups have you collected and implemented input from within the last year?
 - 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
 - Educators
 - Social Service Agencies
 - Veterans
 - Youth
 - LGBTQIA+
 - Health Equity Initiatives
 - SUD Providers



Stakeholder Engagement

The Planning Council would like County level data on:

- Please describe how stakeholder input is communicated and implemented?

Stakeholder input is typically communicated as priorities, as client stories in reports, as recommended funding levels, and as feedback on customer service and programs. The MHSA 3 -Year CPP produces an in-depth report with details of stakeholder input. Client input is also used to establish the list from which priorities are selected. Client stories are used to humanize the policy choices that need to be made. Client outcomes and feedback inform program evaluation and review.



Stakeholder Engagement

- Does your County have a Community Program Planning Plan in place?
 - Yes
- In which of the following ways is the CPP supported?
 - Meetings at convenient times
 - Stipends for participants
 - Refreshments
 - Dedicated staff assistance
 - Provide information and training
 - Hold meetings in different locations
 - Use language interpreter services



Stakeholder Engagement

The Planning Council would like County level data on:

- Does your County provide training for staff on cultural awareness, outreach, and engagement?
 - Yes - Staff have mandated training in Cultural Humility, SOGI, and Interpreter Use. Staff directly involved in the process receive training in community engagement and planning.
- Which of the following barriers does your county face regarding engagement of stakeholders?
 - Difficulty reaching stakeholders with disabilities.



Stakeholder Engagement

The Planning Council would like County level data on:

- Is the Commission involved in your County's stakeholder engagement and/or CPP processes?
 - Yes - Primarily through their role in the MHSA Steering Committee, other MHSA committees, public hearings, and by participating in various engagement events.
- Has the pandemic increased or decreased the level of engagement and input in your County?
 - Increased
- What is one change or improvement regarding engagement that your County would like to make in the coming year?
 - Improve Hybrid Meeting Technology



Data Notebook Process

How did the Commission engage in the data notebook?

- Reviewed role of Commission.
- The data notebook was placed on the Commission's agenda and presented at a regular meeting.





Thank You

Questions?

Scott Gruendl, MPA, CPCO

Assistant Director

sgruendl@smcgov.org