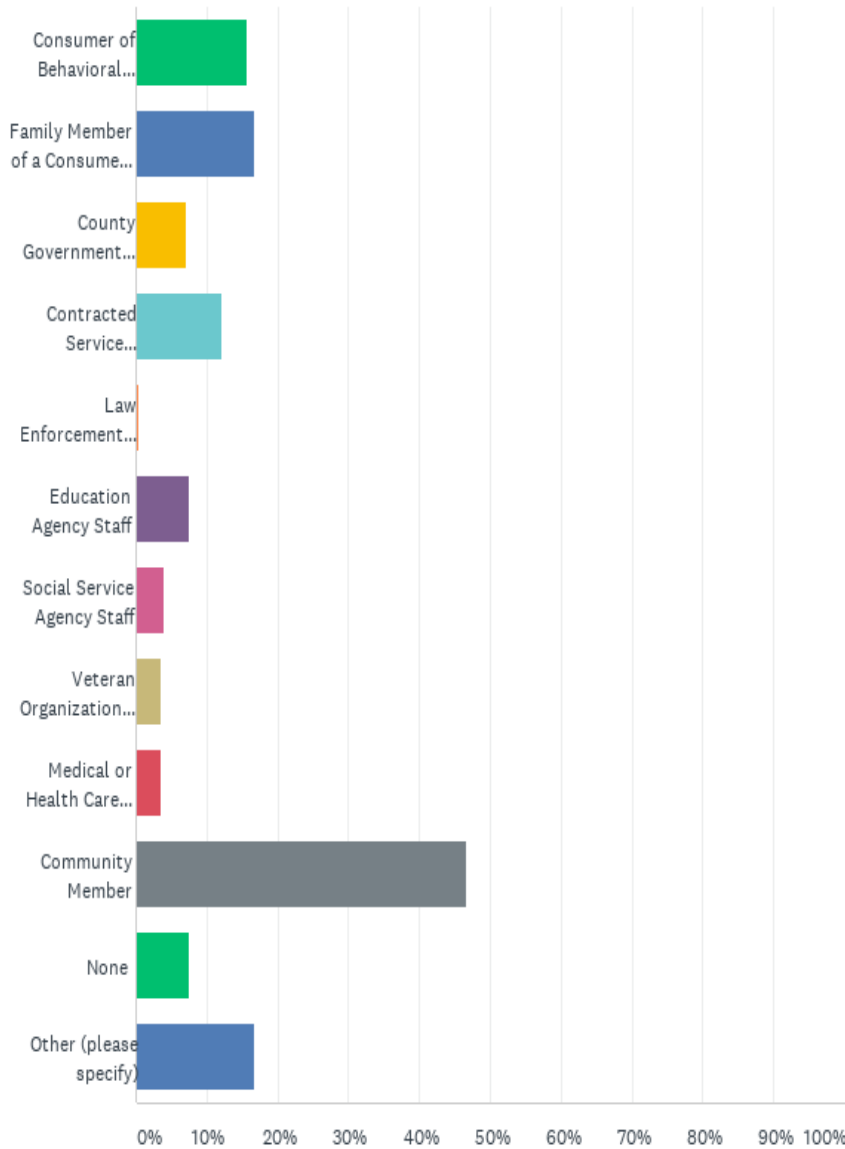


## Mental Health Services Act (MHSA) Community Survey 2020 Responses (MHSA Three-Year Plan FY 20/21 – 22/23)

A 7-page MHSA Three-Year Plan Community Survey for FY 20/21 through FY 22/23 was widely distributed to all stakeholders, along with many others. The purpose of this survey was to determine who is actively participating in the Stakeholder process, what target populations and programs the community feels MHSA funding should be focusing more on, how effective the department is in meeting the essential elements of the Act, and what additional programming is needed, funding permitted. The following represents the 197 responses received from March 12 through May 29, 2020.

### QUESTION 1: WHAT IS YOUR CONNECTION TO BEHAVIORAL HEALTH?



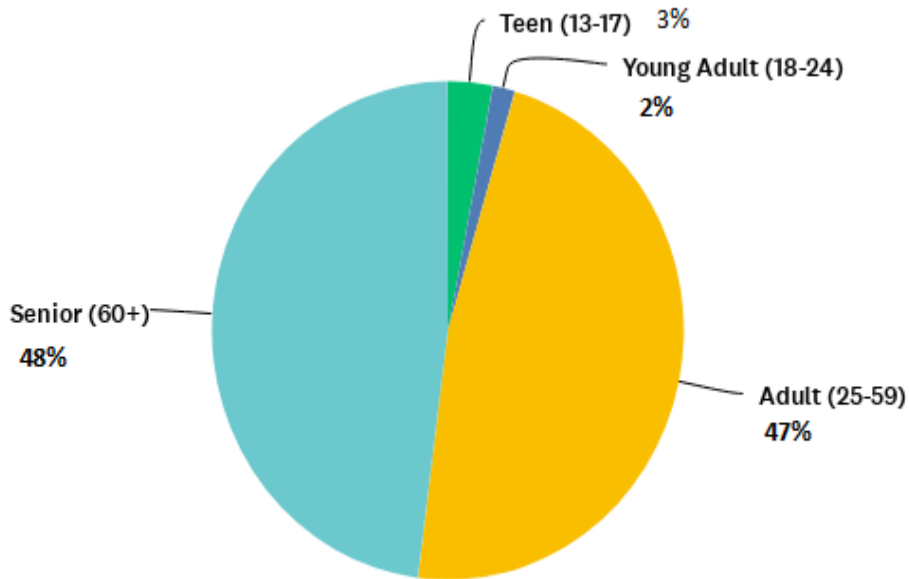
*197 respondents answered this question with the majority of respondents stating that their connection to Behavioral Health was a Community Member.*

*Other respondents stated that they were family members, consumers and 'Other'. The 'Other' responses are listed on the following page.*

### 33 'Other' Responses were received:

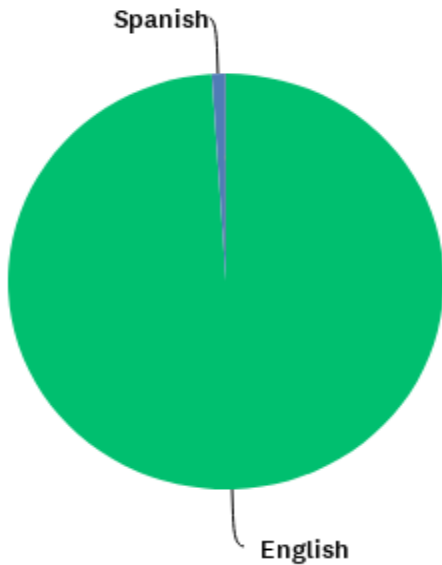
- Sierra Wind NAMI Nexus
- Sierra Wind-NAMI & Nexus - Op-Care
- MHSA student
- Board Member on Amador Community College Foundation
- Foster parent
- Child Care
- Saint Vincent de Paul Society
- S.P.E.A.K.S
- Family member goes the ARC
- Church
- Marriage & Family Therapist
- Senior visitor, Registered Nurse,FNP.
- School district employee
- I am the principal of Pioneer Elementary School.
- Retired from Child Abuse Prevention Center
- Volunteer with Senior Visitors
- clergy
- member of County Behavioral Health Advisory Committee
- Someone who tried to get help in Amador but was denied
- Work with Intellectually Disabled Adults
- Elected education trustee
- Former Legal services advocate for people with psychiatric disabilities
- As a Nurse Case Manager in private practice
- City Council member, Vice Mayor of Amador City
- Faith Based Community Member
- Private Practice Marriage and Family Therapist
- MFT
- Church
- St. Vincent de Paul representative
- Community Action
- mft, retired co. Behavioral Health Therapist II
- Person with history of depression, anxiety, ADHD, trauma, homelessness, and learning disabilities
- Foster parent

**QUESTION 2: WHICH AGE GROUP ARE YOU IN?**



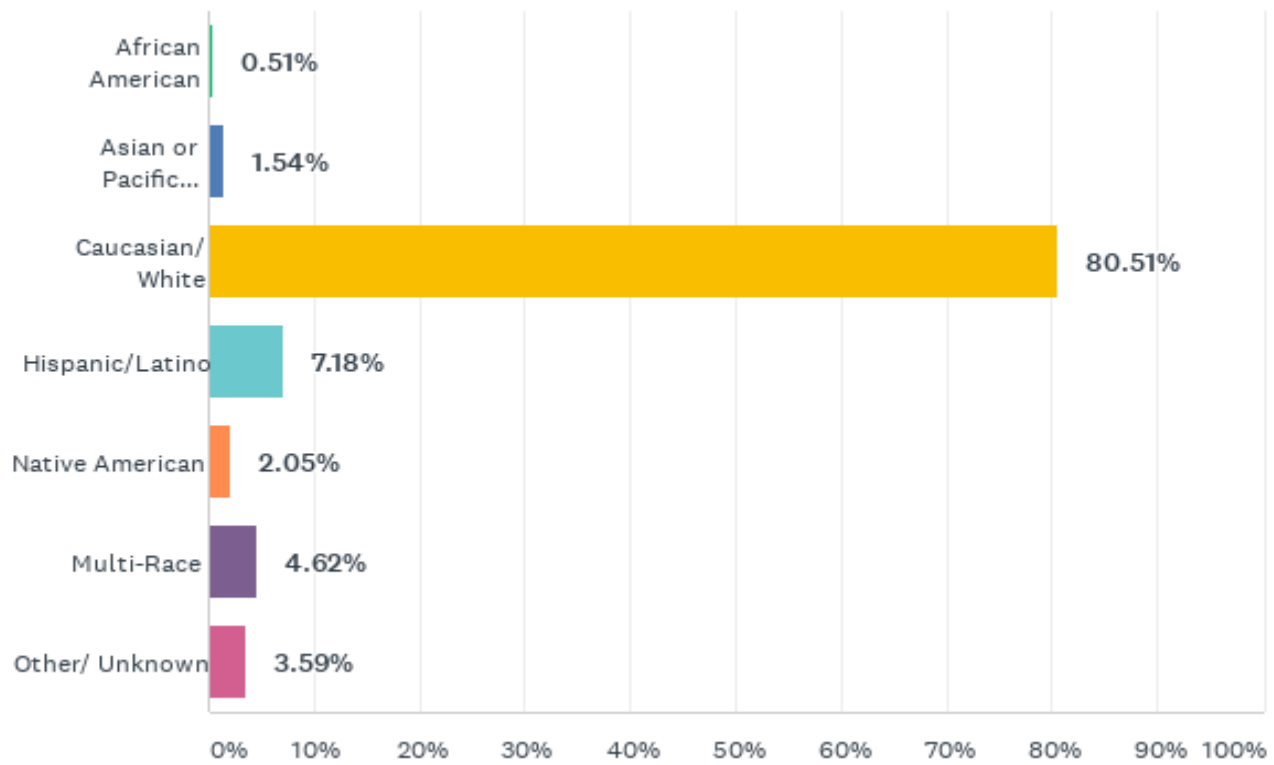
*196 respondents answered this question. For the second year in a row, all age groups were represented in the survey responses.*

**QUESTION 3: WHAT IS YOUR PREFERRED LANGUAGE?**



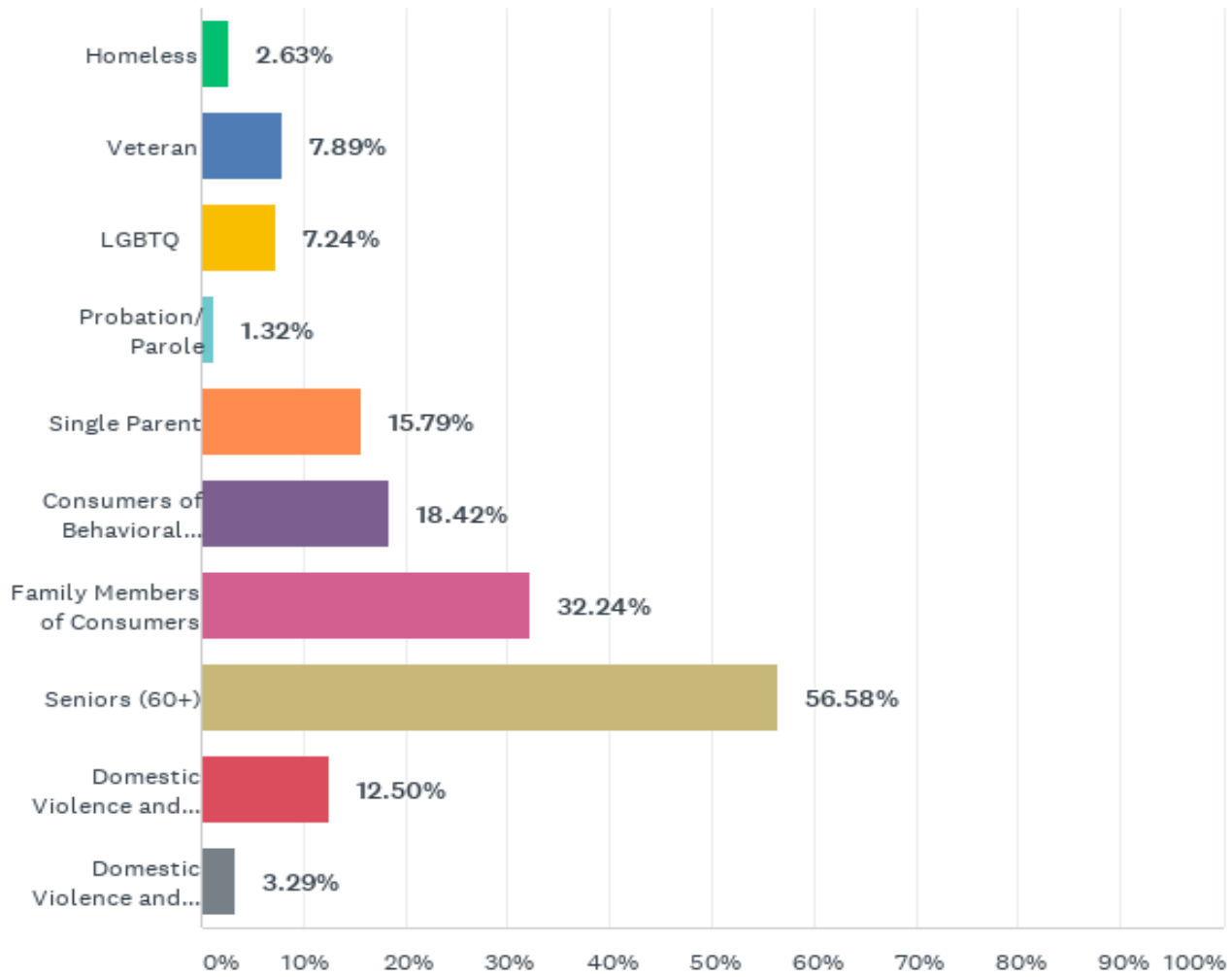
*194 respondents answered this question. When compared to last year's results, six respondents stated that Spanish was their preferred language and this year only two respondents stated that Spanish was their preferred language. No 'Other' responses were received.*

**QUESTION 4: WHAT IS YOUR RACE/ETHNICITY?**



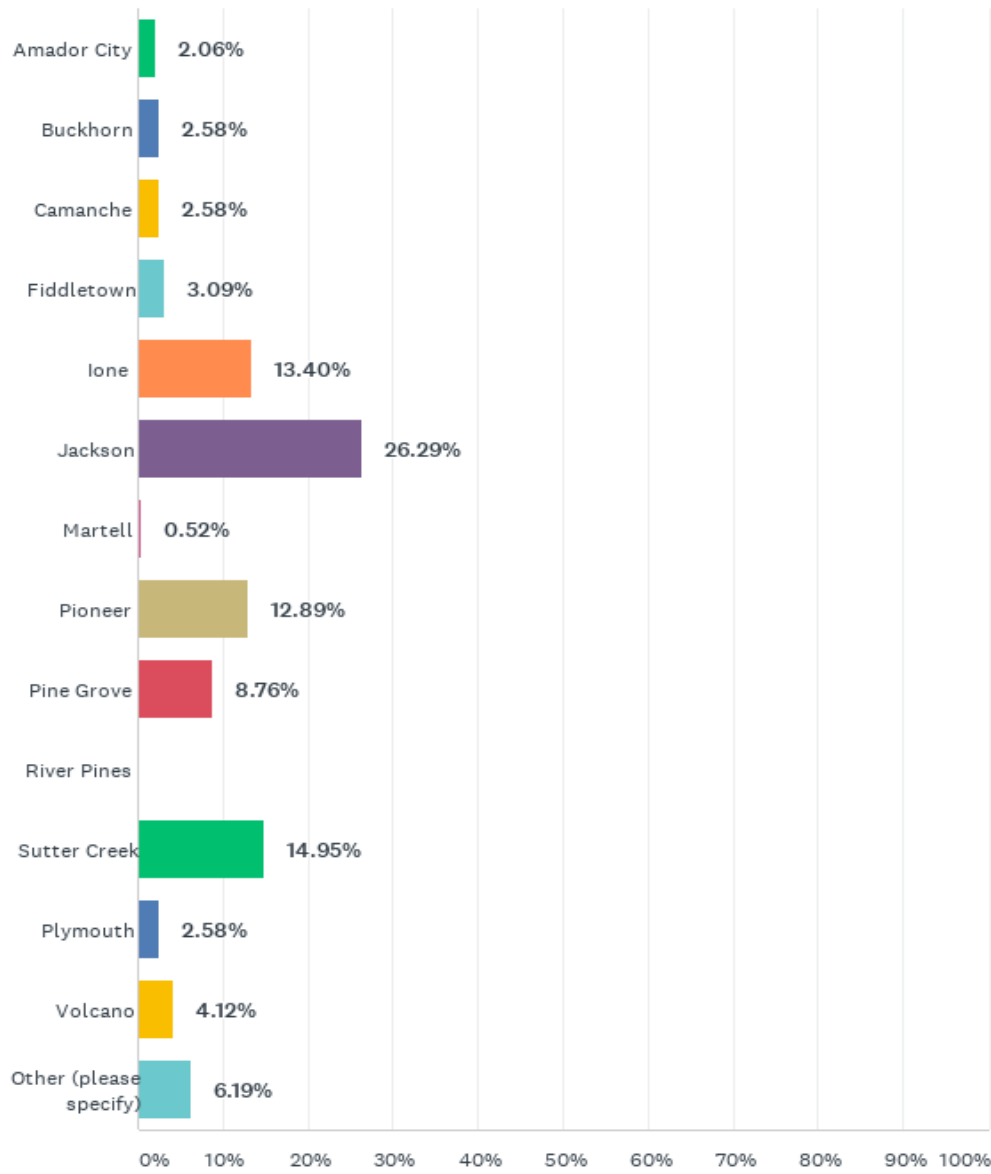
195 Respondents answered this question. The results received are reflective of the demographics of Amador County.

**QUESTION 5: DO ANY OF THE FOLLOWING DESCRIPTIONS APPLY TO YOU?**



195 respondents answered this question. The majority of respondents identified as Seniors (60+) as well as Family Members and Consumers of Behavioral Health Services—the same as last year’s results.

**QUESTION 6: WHAT CITY/TOWN DO YOU LIVE IN?**



194 respondents answered this question.

12 'Other' responses were received:

-Omaha, Nebraska

-Jenny Lind

-Placerville

-Unincorporated area

-Work-Jackson, live in Tuolumne County

-I actually live in Somerset (El Dorado County)

-Elk Grove, CA I work for ACUSD

-Do not live in Amador County, but work in Amador County

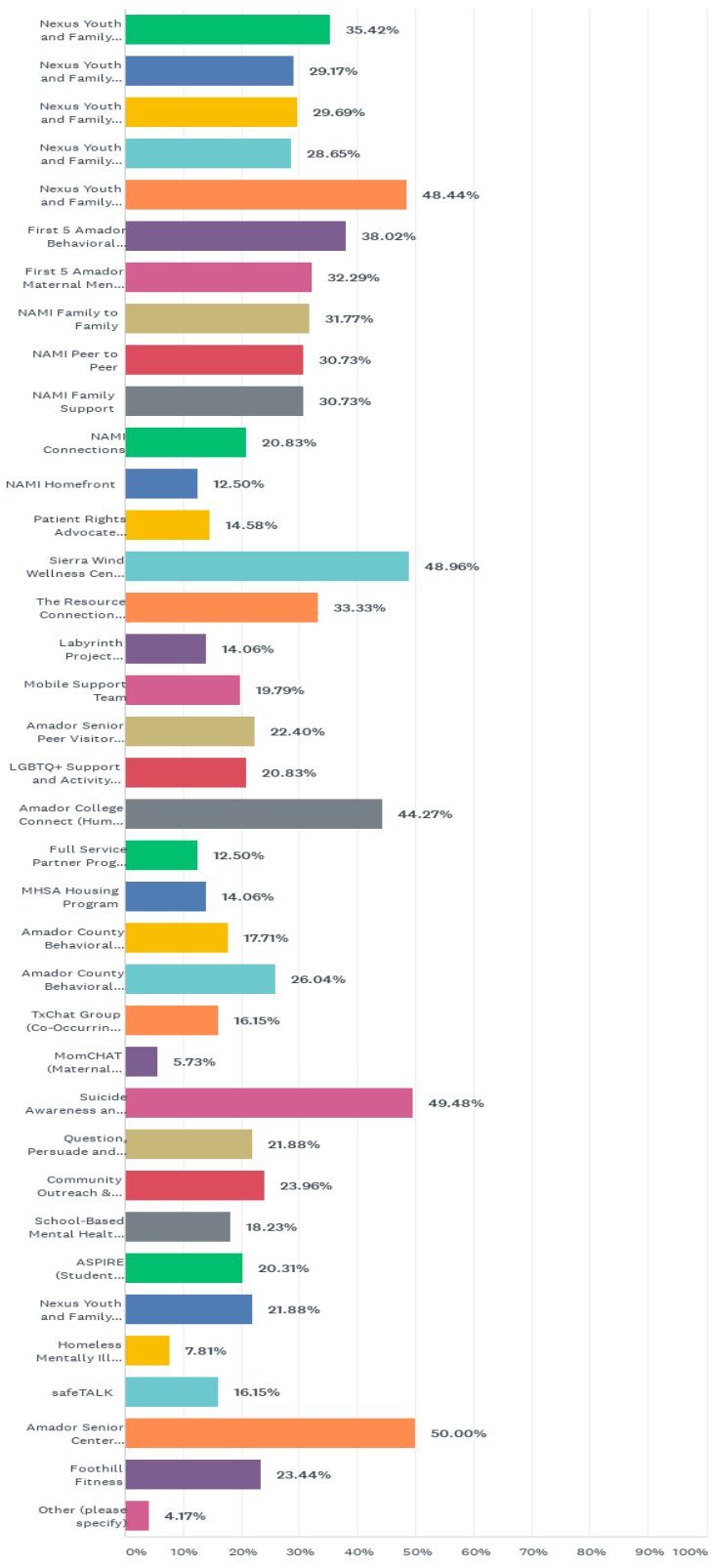
-Shenandoah Valley

-Mokelumne Hill

-Kirkwood

-Angels Camp

**QUESTION 7: WHAT MHSA-FUNDED PROGRAMS ARE YOU MOST FAMILIAR WITH?**



192 respondents answered this question.

8 respondents answered 'Other':

- Aspire
- Victory Village\*
- Big Brother/Big Sister Program\*
- Commission on Aging\*
- NAMI Walk\*
- The Arc of Amador and Calaveras\*
- ATCAA services in therapy CHAT\*
- CASA\*

***\*The responses with an asterisk are not MHSA-funded programs.***

**Summary of Question 7 Data:**

Last year’s community program planning process respondents listed the following five MHSA-funded programs as most familiar to them:

1. Sierra Wind Wellness & Recovery Center
2. Suicide Awareness and Prevention Efforts
3. Nexus Family Resource Centers
4. Amador College Connect/Human Services Scholarship
5. First 5 Behavior Consultant

This year, respondents identified the following MHSA-funded programs as most familiar to them:

1. Amador Senior Center Lunch/Nutrition Program
2. Suicide Awareness and Prevention Efforts
3. Sierra Wind Wellness and Recovery Center
4. Nexus Youth and Family Services Resource Centers (FRC’s)
5. Amador College Connect (Human Services Scholarship)

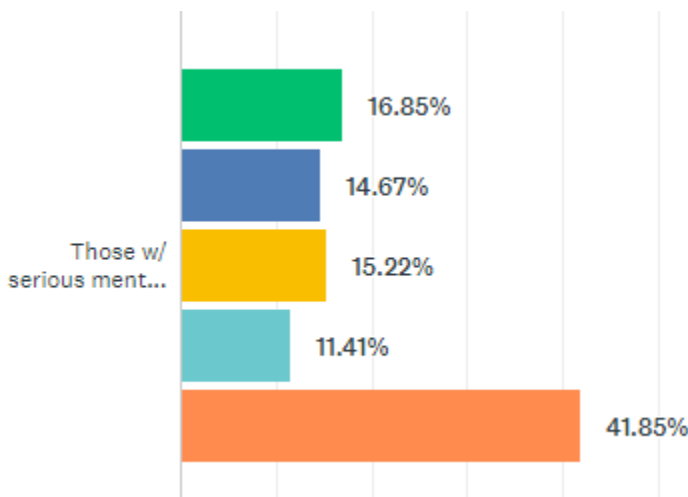
Overall, when compared to last year’s community survey results, knowledge of MHSA funded programs have increased significantly. To name a few:

<b>FY19/20 Results</b>	<b>FY20/21 through FY22/23 Results</b>
Nexus Building Blocks (PCIT & ART) – 14%	Nexus Building Blocks (PCIT & ART) – 35%
Maternal Mental Health – 13%	Maternal Mental Health – 32%
Grandparents Program – 17%	Grandparents Program – 33%
Senior Peer Visitors Program – 17%	Senior Peer Visitors Program – 22%
TxChat (Co-occurring group) – 9%	TxChat (Co-occurring group) – 16%
Community Outreach – 18%	Community Outreach – 24%



**QUESTION 8: AS A WHOLE, HOW DO YOU FEEL MHSA-FUNDED PROGRAMS ARE DOING IN SERVING THE FOLLOWING?**

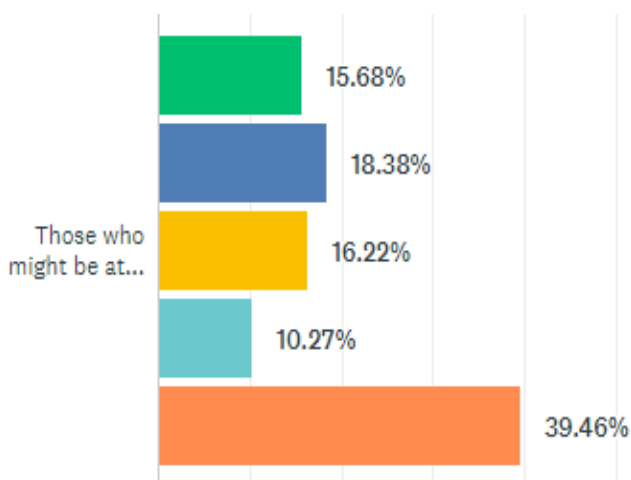
■ Poor   
 ■ Fair   
 ■ Good   
 ■ Excellent   
 ■ I Don't Know



**Those with serious mental illness:**

This year only 26% of survey respondents felt MHSA-funded programs are doing a good or excellent job at serving those with Serious Mental Illness. 35% of respondents last year felt MHSA was doing good or excellent in this category.

**Year-to-Year comparison: No improvement; 3<sup>rd</sup> year in a row**



**Those who might be at risk of mental illness:**

This year only 26% of survey respondents felt MHSA-funded programs are doing good or excellent job at serving those who might be at risk of mental illness. Last year 31% felt MHSA was doing good or excellent in this category.

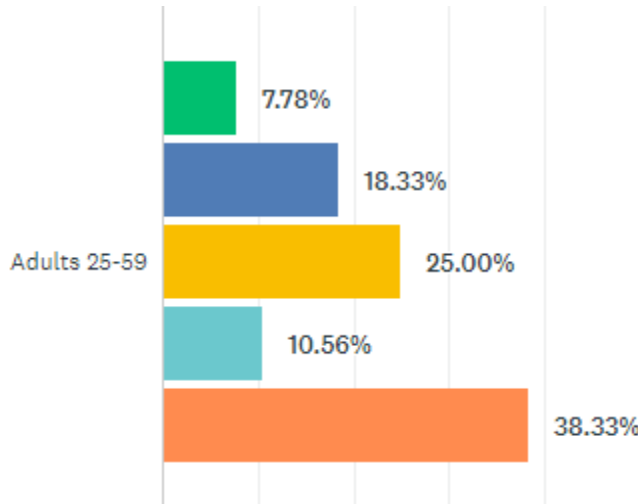
This year, 34% of survey respondents felt MHSA-funded programs were doing fair or poor. Last year, 30% felt MHSA

programs were doing fair or poor in serving those who might be at risk of mental illness.

**Year-to-Year comparison: No improvement; 3<sup>rd</sup> year in a row.**

■ Poor   
 ■ Fair   
 ■ Good   
 ■ Excellent   
 ■ I Don't Know

**Adults:**

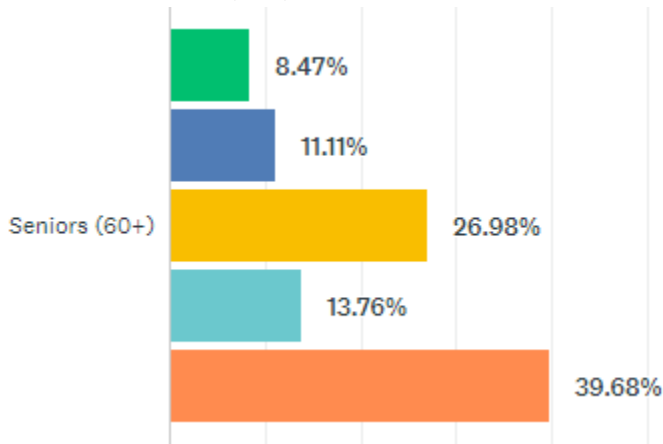


36% of survey respondents feel MHSA is doing good or excellent in serving adults. 26% feel MHSA is doing fair or poor in serving adults.

Last year 37% felt MHSA was doing good or excellent and 21% felt MHSA was doing fair or poor when it came to serving adults.

**Year-to-Year Comparison: About the same**

**Older Adults/Seniors (60+):**



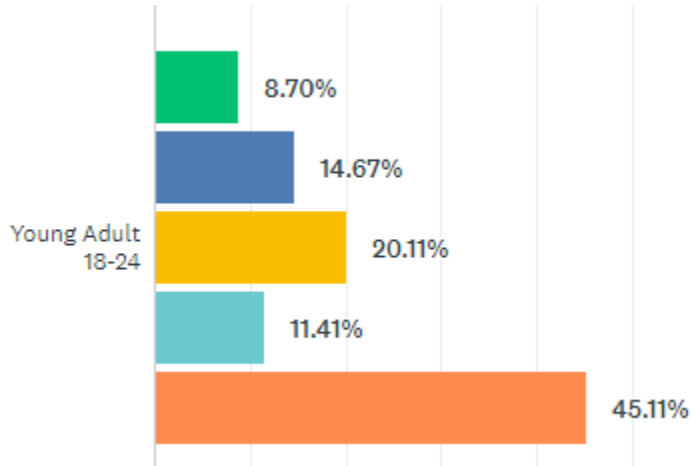
41% of respondents feel MHSA is doing good or excellent in serving older adults. 19% feel MHSA is doing fair or poor.

Last year, 37% of respondents felt MHSA was doing good or excellent in serving older adults and 23% felt MHSA was doing fair or poor.

**Year-to-Comparison: Improvement**

■ Poor   
 ■ Fair   
 ■ Good   
 ■ Excellent   
 ■ I Don't Know

**Young Adults/Transition Aged Youth (TAY):**

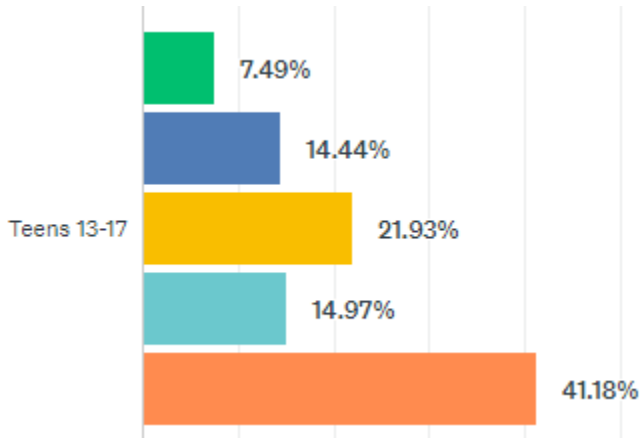


31% feel MHSAs are doing good or excellent in serving Transition Aged Youth (TAY) aged 18-24. 24% feel MHSAs are doing fair or poor.

Last year only 25% felt MHSAs were doing good or excellent and 27% felt MHSAs were doing fair or poor.

**Year-to-Year Comparison: Improvement**

**Teens (aged 13-17):**

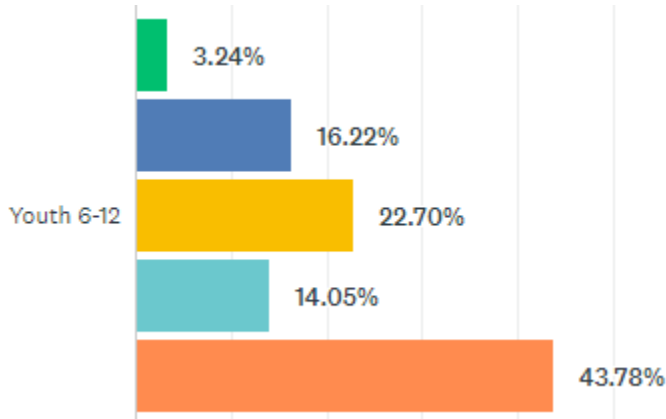


37% of respondents feel that MHSAs are doing good or excellent in serving Teens aged 13 – 17 and 21% feel MHSAs are doing fair or poor.

Last year, 28% felt that MHSAs are doing good or excellent and 27% felt MHSAs were doing fair or poor.

**Year-to-Year Comparison: Improvement**

**Youth (aged 6-12):**



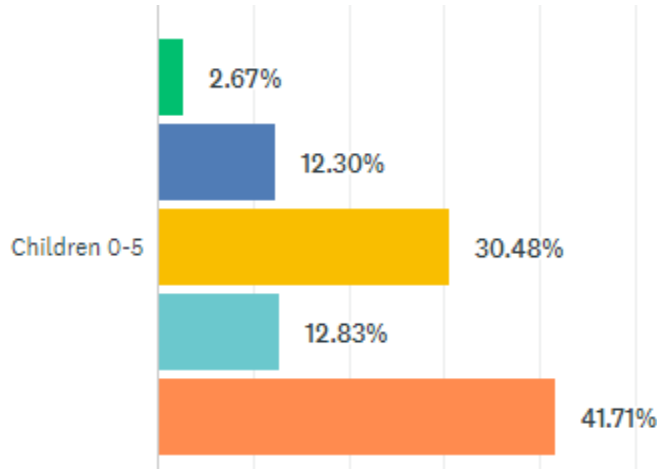
37% of respondents feel that MHSAs are doing good or excellent in serving Youth aged 6-12 and 19% feel MHSAs are doing fair or poor.

Last year, 27% felt MHSAs are doing good or excellent and 21% felt MHSAs were doing fair or poor.

**Year-to-Year Comparison: Improvement**

Poor Fair Good Excellent I Don't Know

**Children (aged 0-5):**

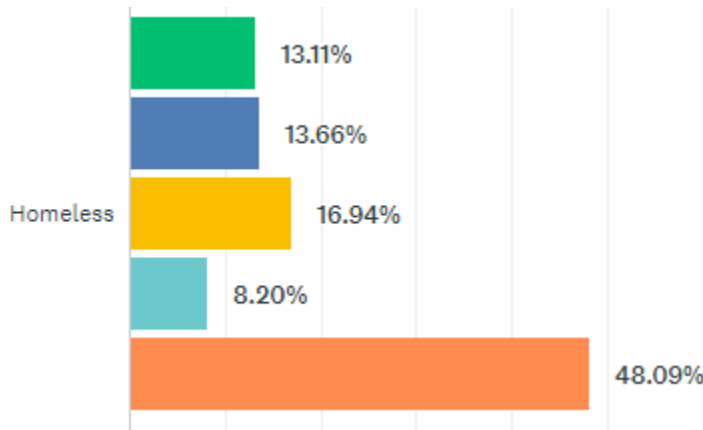


43% of respondents feel that MHSA is doing good or excellent in serving Children aged 0-5 and 15% feel MHSA is doing fair or poor.

Last year, 35% felt MHSA was doing good or excellent and 15% felt MHSA was doing fair or poor.

**Year-to-Year Comparison: Improvement for good/excellent and about the same for fair/poor.**

**Homeless:**

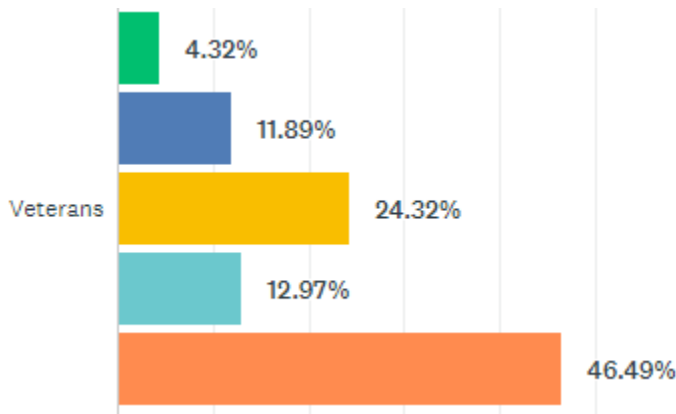


25% of respondents feel MHSA is doing good or excellent in serving homeless populations. 27% feel MHSA is doing fair or poor.

Last year, 21% felt MHSA was doing good or excellent and 33% felt MHSA was doing fair or poor.

**Year-to-Year Comparison: Improvement**

**Veterans:**



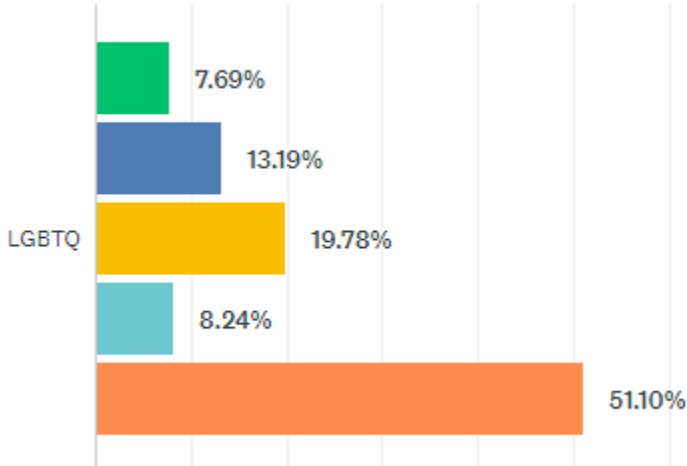
37% of respondents feel that MHSA is doing good or excellent in serving Veterans. 16% feel MHSA is doing fair or poor.

Last year, 28% felt MHSA was doing good or excellent and 29% felt MHSA was doing fair or poor.

**Year-to-Year Comparison: Improvement**

■ Poor 
 ■ Fair 
 ■ Good 
 ■ Excellent 
 ■ I Don't Know

**LGBTQ:**



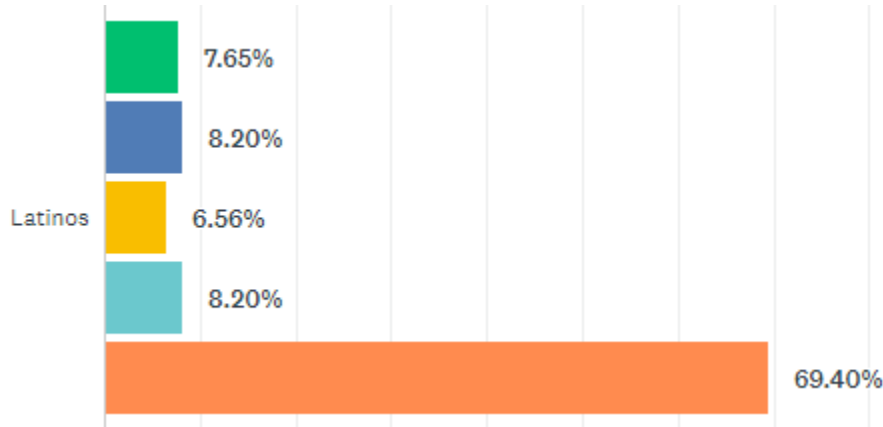
28% of respondents feel that MHSa is doing good or excellent in serving the LGBTQ population. 21% feel MHSa is doing fair or poor.

Last year, 25% felt that MHSa is doing good or excellent and 17% felt MHSa was doing fair or poor.

**Year-to-Year Comparison: Some**

**improvement regarding good/excellent and no improvement for fair/poor.**

**Latinos:**



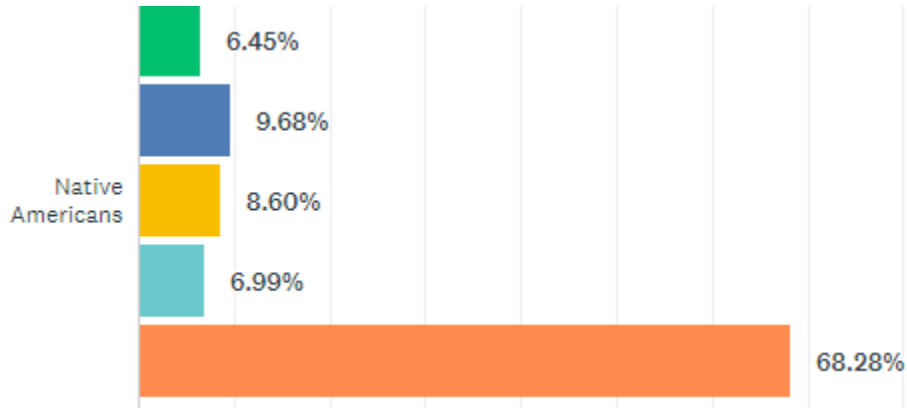
15% of respondents feel that MHSa is doing good or excellent in serving the Latino population and 15% feel that MHSa is doing fair or poor.

Last year, 17% felt that MHSa is doing both good or excellent *and* fair or poor.

**Year-to-Year Comparison: Improvement**

■ Poor   
 ■ Fair   
 ■ Good   
 ■ Excellent   
 ■ I Don't Know

**Native Americans:**



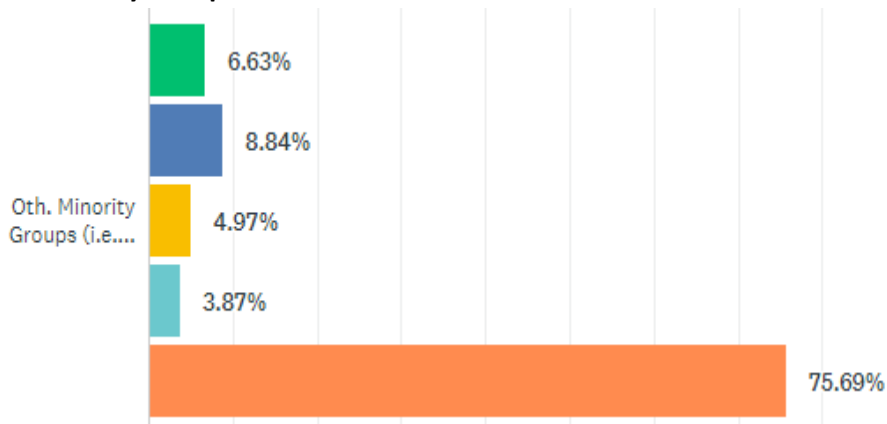
16% of respondents feel that MHSAs are doing good or excellent in serving Native Americans while 16% feel that MHSAs are doing fair or poor.

Last year, 19% felt

MHSAs were doing good or excellent while 11% felt MHSAs were doing fair or poor.

**Year-to-Year Comparison: No improvement for good or excellent and improvement for the fair or poor scores.**

**Other Minority Groups:**



9% of respondents feel that MHSAs are doing good or excellent at serving Other Minority Groups. 16% feel MHSAs are doing fair or poor.

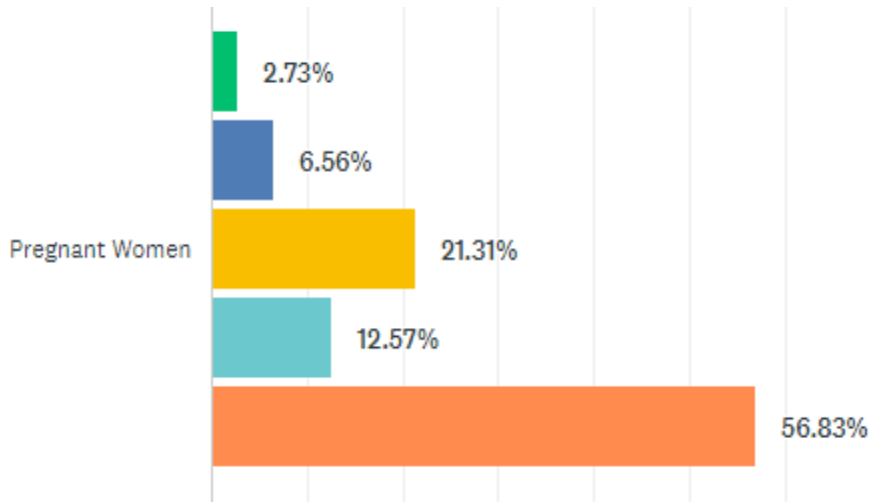
Last year, 11% felt MHSAs were doing good or excellent and 16%

felt MHSAs were doing fair or poor.

**Year-to-Year Comparison: No improvement**

■ Poor   
 ■ Fair   
 ■ Good   
 ■ Excellent   
 ■ I Don't Know

**Pregnant Women:**



This designation was new to this years survey. There is no data to compare it too from previous years.

34% feel MHSA is doing a good or excellent job at serving pregnant women. 10% feel that MHSA is doing fair or poor.

**Question 8 Summary:**

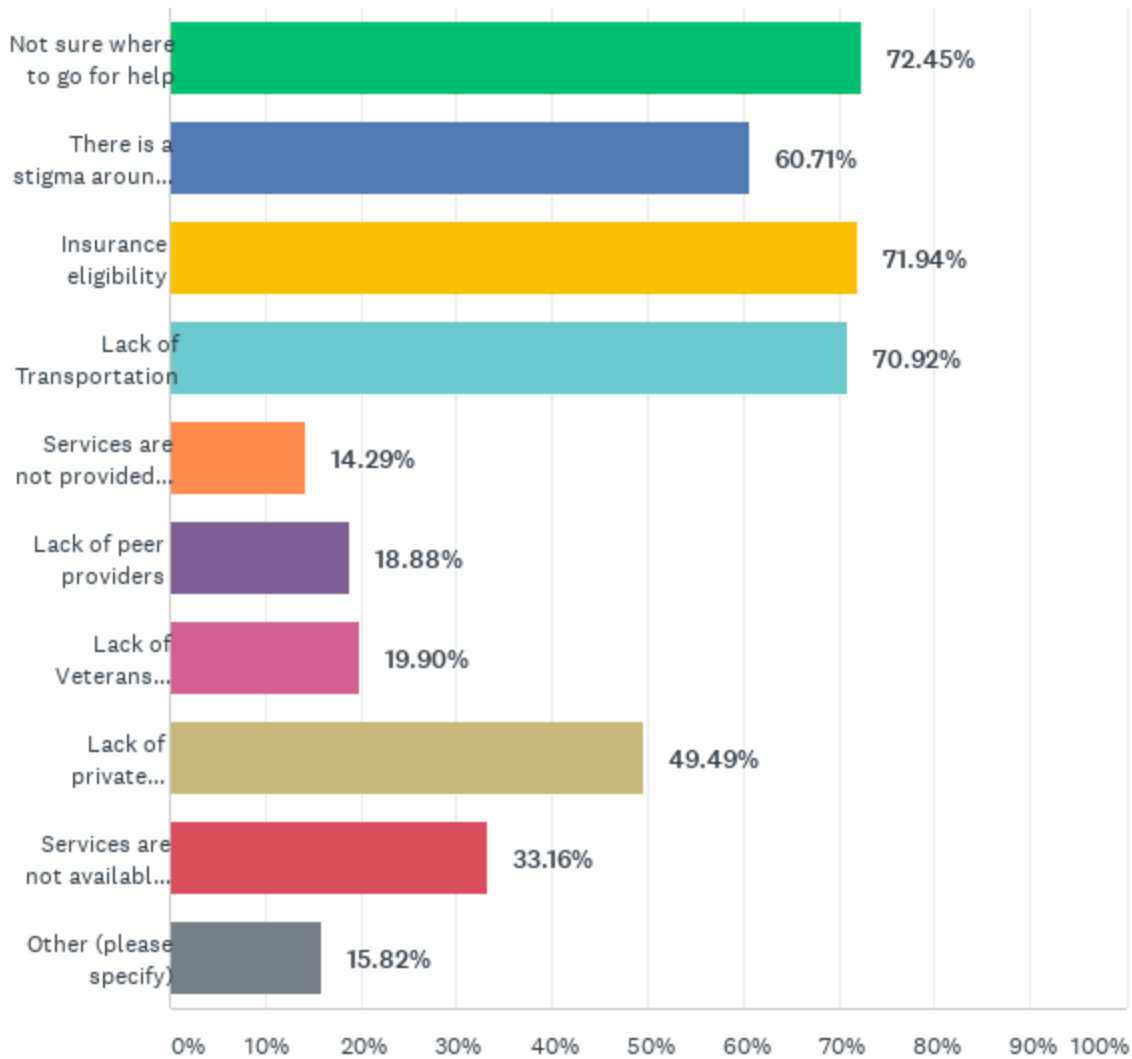
*Out of 15 designations, respondents felt that improvement was made in 7 areas, no improvement was made in 3 areas, things stayed about the same for one area and three had mixed results. One could not be measured for improvement since it is the first year the designation was included.*

*Much improvement was made in historically unimproved areas such as youth and seniors.*

*No improvement was measured for the third year in a row for those who have serious mental illness and those who may be at risk of serious mental illness.*

*It should be noted, many questions had high rates of 'I don't Know' responses which could skew the data.*

**QUESTION 9: WHAT ARE SOME ISSUES OR BARRIERS THAT MAY PREVENT PEOPLE FROM SEEKING MENTAL HEALTH SERVICES IN AMADOR COUNTY?**



196 respondents answered this question.

The top issues preventing people from seeking mental health services in Amador County include:

1. Not sure where to go for help;
2. Insurance eligibility;
3. Lack of Transportation; and
4. Stigma around mental illness in the community.

Last year, the top three issues were insurance eligibility, not sure where to go for help and lack of transportation.

30 respondents who checked 'Other' explained further:

- No staff, such as an RN or MD, that is on-call for 5150's in the only acute care hospital in the County. I knew a young lady who waited in Sutter Amador (Sutter system) for close to 3 days before being seen by someone who could assess her Behavioral Health, and get her admitted to an acute care behavioral health unit on her 5150. Even though she had spent 3 days on a gurney in the ER hallway, her 72 Hour Hold only began near the end of her 3 days there. ER's have legal necessities to not keep any patient there for more than 24 hours. This was a violation of hospital



policy, which is shaped by the state policy regarding length of ER stays. The "Take-Home" message to this, is that Behavioral Health in the County needed to violate state legislation meant to avoid the inhumane treatment of any ER patient by getting them transferred to an appropriate discharge service, to treat their signs and symptoms, or discharge them. The state legislation ensures that homeless persons are offered an appropriate home or hospital before being discharged...within 24 hours! Of course there are provisions for exceptions to these laws, based on the reality that it is sometimes difficult to discharge some ER patients because there are not any appropriate facilities

- Lack of services and responsiveness
- County Behavioral Health only serves medi-cal patients. Many Medicare patients are at or below poverty level and cannot get services in Amador. Depression and anxiety issues in older adults are not adequately addressed when there is no one to address them
- Needs to better collaboration in Veteran services.
- I feel like a lot of people who are struggling for whatever reasons may not realize there are programs to help. If yall didn't contact me, I would of never known about Nexus. Being without friends/family & new to Jackson, single mom/working 7 days/week to barely make it, didn't have time to look 4 help!
- Undocumented
- Too costly! Regular doctor must ask & refer
- Not severe enough to meet eligibility criteria for services, significant wait times for initial appointment/between appointments, lack of therapists in the county
- more Spanish speaking therapist
- Total lack of providers (especially psychiatrists)
- No mental health services available for Medicare patients.
- Many people who move Upcountry want to be left alone for whatever reason.
- Lack of psychiatrists
- I wish I could provide more answers but I really can't judge from experience in this area.
- county mental health has a bad reputation; poor standard of care; county staff are closed-minded
- NOT ENOUGH PROVIDERS- CONTRACT WITH MORE PROVIDERS IMMEDIATELY
- You said you couldn't help me with therapy because I'm on Medicare (specifically an Advantage Plan). You said you could if I were on Medi-Cal as well. I referred my mom because she's Medi-Medi. You said you couldn't offer her services because she wasn't suicidal at the moment, and all you could provide her was emergency services for suicide risk. It seems the goal post moved and neither of us were helped. If you don't help disabled, poor or elderly, who do you help? Based on the services you fund, it appears you should be able to help more than just emergency suicide prevention.
- my daughter has reied BH 3/4 times and no one there can relate to you - part is her personality but I feel that that is your job to help people with all kinds of problems and that has not been the case with her. She has walked out on therapist as she felt they were not interested in her.
- Not enough services to cover needs, not enough funding
- lack of short-term crisis prevention and respite facility
- lack of patients rights representation
- understaffing
- Ugh

- Lack of providers for lgbtq youth especially transgender youth. I haven't been able to find a single therapist in this county with knowledge or experience in this area.
- Lack of culturally competent compassionate care from the get go, at its core
- Lack of knowledge of programs due to isolation
- Cost
- Being able to select their own provider
- It doesn't help.
- Lack of home based ongoing therapy/support for elderly

**QUESTION 10: IN YOUR EXPERIENCE (EITHER DIRECTLY OR INDIRECTLY) WHAT HAS BEEN THE MOST BENEFICIAL MENTAL HEALTH PROGRAM AND/OR SERVICES IMPLEMENTED IN YOUR COMMUNITY?**

109 respondents answered this question. Here are the responses:

- In my experiences Behavioral health Full Partnership Sierra Wind, Peer Support, Counseling, NAMI peer 2 peer/PTSD support Groups. Codependent Groups. Nexus Operation Care Go Youth
- FNL/SAPA 180 You-Turn Gracias por la comida y la informacion. Me a ayudado mucho, ahora que no estoy trabajando bien. mis hijos tienen almuerzo y bnche.
- Promotoras de Salud. Ayudandome a refertime
- Grupo de niños
- I don't have any experience of Amador County Behavioral Health services other than knowing of the above-mentioned situation due to knowing young lady as her landlord. However, I have been a BSN prepared RN for 40 years, with most of that time spent treating Behavioral Health patients in an acute-care hospital. I have worked both medical AND behavioral health ERs, as well as ICU, county clinics, "jail" Nursing, management, and acute hospital mental health inpatient units. I currently work full-time on the PM shift of the adult BH Unit in Mills Hospital, San Mateo, Ca., another Sutter systems hospital. Having worked for so long in acute behavioral health, I was appalled when my tenant told me of her saga through Sutter Amador ER, and her 5150. There were 3 system wide failures involved with her BH treatment in the County. First, was that no BH professional saw her for a BH problem within an appropriate and legal, timeframe of 24 hours. The 2nd problem was that her 72 hours on her 72 Hour Hold were not started until she was ready to be transferred to an acute-care BH inpatient unit. This "hold" on the Hold would have been appropriate if her ER visit had only been spent there for the legal 24 hours, instead of 3 days. The related problem I am identifying here, was that I'm surmising the only BH Unit that had a contract with Amador County was the one she was sent to, Aurora Hospital over near Sonoma. Heck, the Sutter Healthservices Corp. has many of it's own hospitals, like my own unit, that they could have admitted her to. Why wasn't this done? I'm guessing that Sutter Amador BH Services has some misguided policy of only using less expensive hospitals such as Aurora and Fremont Hospitals. I do not know, but whoever is reading this knows, or can find out the "why" of it. All I know is that her treatment was not right. She had never been on a 72 Hour Hold before (so she told me...), and the delay in treatment for her, made a stressful part of her life even MORE stressful, instead of LESS. It certainly gave her a bad taste for BH services of any kind, which is a shame. Any inappropriate BH services leads to these patients thinking that the entire IDEA, as well as the application of BH services is stressful instead of helpful. We all want someone's first interaction with BH services to be helpful and healing for them, not the opposite. These identified problems can be fixed, and I hope that my input is helpful as well as utilized to make positive changes in the treatment of ER patients in the County.

- Full partnership, Sierra Wind, Mobile Support Counseling & Nexus/Peer-Peer All NAMI support groups codependency All Nexus - Op Care Go Youth Recovery
- Carla's outreach
- Amador Mental Health Wellness Clinic
- Food Bank Hospice CLCC
- no se
- none
- none
- Behavior health
- Not sure only been here for three months
- Unsure
- One on one counseling and group therapy.
- Mobile Support for Crisis situations, Suicide Prevention, and FSP for clients who are needy.
- Mobil support teams
- Any program that looks at and addresses the causes or roots of the challenges community members are facing, that often the challenges they are facing are "symptoms" of more pervasive societal and community challenges.
- College Connect Suicide Prevention efforts Trauma Informed Care trainings ASPIRE NAMI Nexus Senior lunch program
- I attended a suicide prevention workshop last year and it was beneficial. I do not have any other experiences.
- I love seeing NEXUS at our school site doing early intervention with our students!
- Income- based counseling and therapy groups being available to Medicare recipients. This has not been available in a long time
- Victory Village is great. In El Dorado county, Only Kindness does a great job with MHSA funds serving Veterans with housing and mental health issues.
- I think the services that nexus provides are very good. My grandchildren talk about them & know the Nexus employees that come to their schools. One of them are getting help in the Aspire program. Excellent service!
- I only know about Nexus & Sierra Wind with my experience. My cousin was in TxChat & my mom did COLlege Connect too.
- Behavioral Individual, Therapy and the teen group
- One on one counseling
- College Connect program was really beneficial Nexus programs really help in the community Sierra Wind is close to my house and there is always people there.
- Drug Alcohol Program - Rose youth Counseling - some providers
- Nexus, with involvement in education and groups. Working closely with Mental Health and school.
- As a Community-Based Organization staff, I am biased. I believe that nexus programs are good programs for youth & families. I also believe College Connect is great for this community.
- Behavioral health support groups.
- The programs offered to children and youth are plentiful & all I have come in contact with are very caring & helpful
- gives my son someone to talk to outside the family and school.

- Everything Nexus has done for us, from the initial interview to the continued food/COVID help & counseling for my daughter I finally feel like I have a support system.
- for myself I have not had any issues needing or getting help I need mentally but I have had friends not be able to get help because of the lack of help available
- Not sure yet, I'm a transplant.
- NAMI
- Behavioral Health because someone always answers when I call. However, not having a Mobile Crisis mobile available on Fridays has been frustrating because Fridays are frequently days when our at risk students seem to have their greatest need for crisis intervention.
- Unsure.
- Well I'd definitely say the MHSA program at ACC is a very good thing. I believe any help with housing that behavioral health offers is great. The clients there are usually the most vulnerable are being helped with housing and that keeps them safe.
- I don't know
- Perinatal Wellness
- mobile support, community outreach
- Not familiar with services in Amador County
- Bryce Stein--lower cost & very good.
- I think behavioral health does an ok job with limited funding , but when people have problems , it seems like they try to pawn them off on someone else as fast as possible
- Nexus Youth & Family Services
- FSP: You saved my life! Helped me with my vehicle and housing. I am forever grateful. Sierra Wind when I really needed peer support, groups, and activities.
- suicide awareness
- While Amador County strives to provide Behavioral Health Services to much of the county, when I was in need of help and seeking professional counseling as a Medicare patient, I was not able to find any service available through the county. In fact, I was only able to find one private Marriage/Family Counselor who did not accept any insurance of any kind, but was able to see him on a regular basis.
- Behavioral health, Nexus, school foster and homeless support
- School age programs
- Drug and alcohol program
- Individual Therapy sessions
- Student support systems (ASPIRE) and other services for children have been a welcomed addition to the children in Amador County. Vanessa and Ken did an excellent job in their outreach programs, educating those in small group instruction.
- Based on my job, the ASPIRE program through Nexxus is a huge benefit for our community.
- As a principal of an Upcountry elementary school, I have seen a huge benefit to our students and their families from the ASPIRE program and our Nexus providers. We have many families who are currently in crisis or who have experienced trauma. Their children attend our school and have a serious need for counseling services and other services that we cannot provide them. I have reached out to Emma Swett with ASPIRE for several of our families and hope to be able to continue doing this in the future. Many of our families live below the poverty line and Emma has been able to connect those we've referred with services we at school are not even

aware of. These programs are VITAL to the health and well-being of our community which has its own unique challenges that come with being so remotely located.

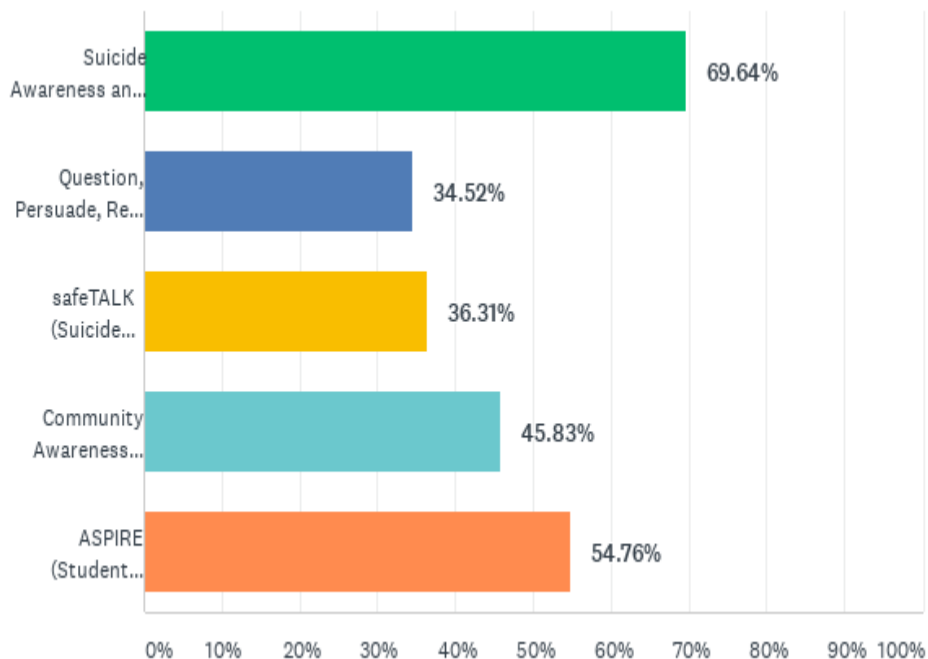
- The ASPIRE program has been critical in helping us link students in our school to services they need.
- They are all beneficial, but I have no personal experience with any of them.
- I do not know much about the services offered in the community, so cannot give meaningful input.
- The Senior Peer Visitor's program is very effective in addressing the needs of isolated and lonely seniors. Our volunteers provide them with resources and support as well as companionship. In a rural county such as ours with a high number of elderly citizens, isolation and lack of computer proficiency can prevent seniors from getting the help that they need. This program fills a gap. The Foothill Fitness program helps to keep seniors fit and active, physically and mentally. The Senior Peer Visitor's program is very effective in addressing the needs of isolated and lonely seniors. Our volunteers provide them with resources and support as well as companionship. In a rural county such as ours with a high number of elderly citizens, isolation and lack of computer proficiency can prevent seniors from getting the help that they need. This program fills a gap. The Foothill Fitness program helps to keep seniors fit and active, physically and mentally.
- Senior visitor program
- MHSA scholarship with Amador College Connect
- First 5, Head Start programs have been very positive influences with our young folks...the mobile help unit at Behavioral Health has been very positive in helping folks establish a plan to get on a better track in their lives, and many succeed
- None. County Behavioral Health needs a change in staffing, vision, and approach. IF what you were doing were helpful, our county wouldn't have such a high suicide rates, so much domestic violence, and such high substance abuse rates.
- QPR - But their is not adequate follow up regarding the older population in our community.\
- Mobile Support Team
- I wish I had something to put here but I had to seek mental health help in another county because there isn't anything in amador county that fit my needs.
- I don't know. Based on my Medicare Advantage plan (the only option I can afford), I have to go to Sacramento for physical therapy, mental health services, dental and eye care. I wish I knew of an advocate in Amador who can guide me through this and let me know of any programs I've yet to find. Meanwhile, Health professionals say it's my insurance refusing to contract with them. United Healthcare says they're having trouble finding providers in Amador who will contract with them. Each county program for which I've reached out, I was told I couldn't get help because I'm not on Medi-Cal or I make too much. It's frustrating, though, because I'm too poor to pay for Medicare Supplemental, which seems is the only thing many providers here take. I'm also disabled, so it's hard for me to make the drives to Sacramento. I feel as though I'm stuck in a gray area that prevents me from getting help here, both with private care and county programs.
- NAMI programs have been fantastic both for family and peers. Th ere are two ways to go with NAMI and that is support and education. Both of which are fantastic.
- Mental health First Aide as a training tool
- When the man case managers were able to pick up kids from the schools and connect them to important community services like youth peer LGBTQ groups. Transportation is a barrier to kids getting to these types of groups which has now led to many going without this importance

connection. With so few services in this area, this was a really valuable and safe connection for youth in our community.

- I have heard anecdotally that our country lacks adequate numbers of mental health professionals and programs and struggles to provide services. Residents with health insurance have no providers here, and have to go to Sacramento or San Joaquin for help. This disproportionately affects low income folks who aren't able to access the remote services. The current virus pandemic likely has exacerbated mental disorders for our isolated residents---we just don't know how much---and effects will remain for a long time.
- NAMI and Senior Peers. The County needs to do a better job of raising awareness of the services, but I really believe that until the stigma surrounding mental health is mitigated, people will not use the services. Residents going to the ER should not be turned away. As a retired EMT, I have seen this happen many times. Isn't there someone on call 24/7? If there is, it seems you need to make the hospital staff aware, rather than sending the patient home to wait a week or two or more for their appointment.
- Don't know
- Human Services Scholarship through Amador College Connect
- Don't know
- Nexus/school partnerships
- There are and have been many good and great efforts that are community-based and do a good job, in my limited knowledge, but until our County is able to budget more for services, have more staff, extended hours, really put a value on mental health for all, all the efforts, other than those good efforts aimed at education and prevention, seem to be for the not-so-seriously mentally ill or those at risk of mental illness. So many people here are much more in need of serious crisis intervention by professionals.
- For many years I worked for the Santa Clara County Bar Association's program "Mental Health Advocacy Project". Through appropriate and accessible legal services many clients kept their housing, received appropriate treatment when required and or requested. We also supported and providing peer counseling and peer representation for judicial proceedings e.g. SSI, involuntary holds, and appropriate placement following incarceration and 72 hour holds.
- Sierra Wind
- Unknown
- Seems like Calaveras Co might provide more services
- Unable to find Assistance in county
- The tri-counties alliance lgbtq youth group has been the best resource for my teen. This is NOT a group thru mental health but it provides great peer support for my child
- I know we have counseling services but am really unaware of details. If we do have the highest suicide rate in CA then something is not working.
- First 5 and ATCAA (not listed above?) Though I don't know impact, county mental health services seem to provide at least some care to a subset of the population they serve.
- NAMI peer group meetings at Senior Center is great. The Foothill Fitness program is excellent but could open to more days per week. Most are only 2 days at the individual sites. More 'walk and talks' venues around the county.
- I have not had any experience with mental health programs in Amador County. I just support the NEED for such programs. Lots of people need help out there.
- The rare authentic therapeutic relationship as seen in the Senior Peer Counseling program offers.

- Private counseling Social media Word of mouth
- Senior services
- Tx Chat Nexus Behavioral Health FSP Sierra Wind Mobile Support Homeless outreach
- I really don't know. I have seen just a little of the programs and know just a few people that have used these programs.
- Sierra Wind
- Suicide prevention
- I think the ACES approach that has now been initiated will prove beneficial. Also beneficial: QPR and the Mental Health 8-hour program for lay people. Vanessa's pushing information out to the community is great also.
- First 5 Behavioral Consultant QPR
- Amador SPEAK-community suicide awareness network
- ICC for foster youth
- NAMI Amador has help, where behavior help cannot, due to insurance restrictions and over abundance of people who need help, but are not seriously/high level of mental illness.
- Youth services and those for the Hispanic community are very effective but there is not enough funding for the need, especially for youth.
- Faith based institutions.
- QPR, ASPIRE & Amador College Connect
- Sierra Wind Wellness Center, PCIT, NAMI, FSP

**QUESTION 11: PROGRAMS THAT HAVE BEEN FUNDED USING TIME-LIMITED REVERSION FUNDS WILL NO LONGER BE FUNDED EFFECTIVE JULY 1, 2020. IN ORDER FOR AMADRO COUNTY BEHAVIORAL HEALTH TO DETERMINE FUNDING PRIORITIES, PLEASE SELECT WHICH REVERSION-FUNDED PROGRAMS ARE MOST BENEFICIAL TO AMADOR COUNTY:**

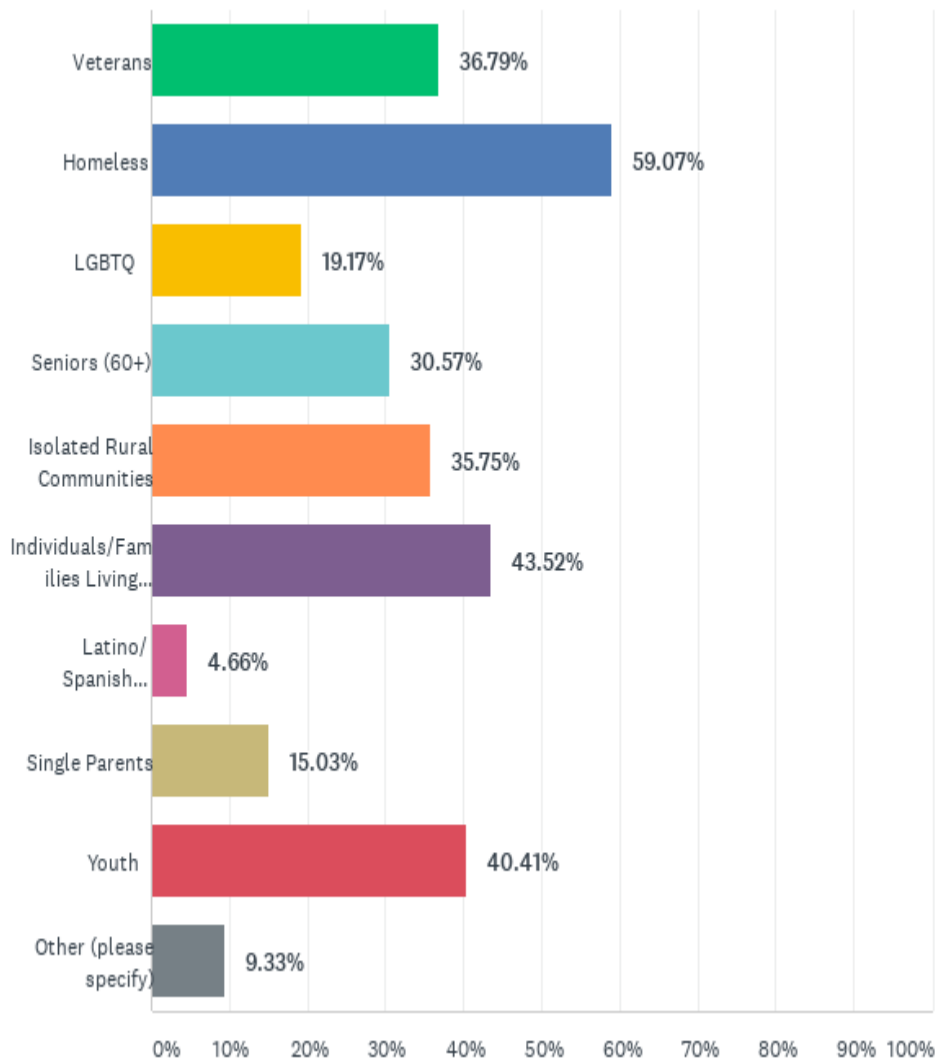


*168 respondents answered this question. The top three reversion programs that are most beneficial to Amador County are:*

- 1. Suicide Awareness and Prevention Efforts;*
- 2. ASPIRE (Student Assistance Program)*
- 3. Community Awareness Campaign*



**QUESTION 12: WHO CURRENTLY HAS THE HIGHEST NEED FOR MENTAL HEALTH SERVICES AND SUPPORTS?**



193 respondents answered this question.

***For the second year in a row, Homeless were rated as the population having the most need for mental health services and supports.***

*Individuals/Families Living in Poverty and Youth followed.*

18 respondents who specified 'Other' explained further:

-family surviving Domestic Violence  
- I do not have any data or experience to answer this question.  
- Family's surviving domestic violence

- Drug/alcohol addicts
- Individuals with substance abuse problems
- any one in need of the services
- All
- In my opinion more help is needed in these people
- Young adults -18-25
- Victim of domestic violence
- Homeless children
- Anyone of the above. In particular drug takers in any of the above categories.
- Chronic illness/pain Chronic illness/pain
- Domestic Abuse Victims, including children
- Displaced gig workers (short-term 2 years); domestic violence re pandemic isolation
- Probably all
- women in situations of violence - too many murder-suicides
- Foster youth / special needs youth



**QUESTION 13: IN YOUR OPINION, WHAT BEHAVIORAL HEALTH SERVICES ARE WORKING WELL IN AMADOR COUNTY? WHY?**

99 respondents answered this question. Here is what they said:

- Sierra Wind Wellness Center, NAMI All of NAMI, Having an Advocate at Behavioral health.
- grupos con los ninos
- grupu de ninos
- I don't know. In my personal experience of being a Sutter Amador ER patient after being assaulted, I know that no one made contact with me to see if I needed or wanted any post trauma mental health services. That could be easily fixed. The young lady's experience noted above is my only other BH service, which could also be fixed. Probable one State fine for violating the ER visit time or less than 24 hours policy, would pay a staff's annual cost, and bring legal, humane treatment to Amador County. It does not very effective in my experience.
- Sierra Wind NAMI
- more programs
- CLCC
- None
- CLCC First 5 Playgroup
- None
- no se
- yes
- none
- yes
- Not sure only been here 3 months
- Unsure
- All the services supporting families of mentally ill folks, and programs supporting mentally ill folks who are trying to work and go to school
- I hear nothing but amazing stories about the success of the ASPIRE program. It seems that the trust in that program/the person offering the services is extremely high, which I feel is a direct component of any successful program.
- Senior Peer Visitors - preventing isolation in older adults Outreach to homeless in the county - it lets them know people care and that services are available if needed ASPIRE - surrounding youth and families with services and support is vital to the mental health of the community Community outreach & engagement -emails and community presentations let people know what Amador County has to offer and where to find mental health services.
- I only know about the following: Victory Village Amador El Dorado Forest forum Maidu Group Sierra Club Daughters of American Revolution They all do a good job.
- School services because the youth are at a high risk for mental health issues especially because of social media
- Take medical for family support
- Case MGMT, Group Therapy, a great outlet for support
- see #10
- The Aspire program has been a real asset to the schools, youth and families
- Foster School age Becasue of easy access
- Nexus because everyone puts in the effort to make it work

- Nexus Programs TX CHAT Resource Connection Aspire MomCHAT First 5 programs College Connect Senior Center NAMI program HOPE Art therapy Senior Visitors Program
- support groups and the transportation
- Amador Mental Health, Nexus run programs, Grief Busters. Tose are the ones I know and appreciate what they do.
- I am only aware of the one we are using. Nexus
- I'm not sure on most services but I know the services we have received have been invaluable & extremely beneficial to us, But again, I don't think most people know about available resources.
- I don't really know I have the help I need with no issues because therapy is in the same clinic as my primary maybe this is fruit for though when it comes to others needing help make it available within family practice facilities as well as out patient
- Don't know yet.
- Being a teacher, I know a lot of our students are involved in the Nexus Program (not sure which one). There are advocates that help provide help to our students which I can see as a big positive.
- I don't know.
- Nexus is doing a great job serving our teen population.
- N/A
- The wellness center, transportation, bus tickets, SPEAKS,
- i don't know
- mobile support, homeless support
- I think we do a good job or helping single mothers and veterans and seniors.
- Aside from my experience with Resource Connection several years ago, I was not aware many of these resources existed here.
- There is a lack of information on Amador County services. People who are hurting don't get information on streets, in crisis...need OUTREACH!
- There is a great sense of taking care of our youth in Amador County
- As stated above , I think the people working in the system want to help , but their bosses and supervisors, due to funding gaps, wish to kick people out of the system as expediently as possible
- Groups and services provided to children at school sites because it limits the effort on parents part
- CHAT I have seen great results with some families.
- Sierra Wind is an excellent place to go for help and support. FSP is working assisting clients needing help with other aspects of life. Senior Programs are successful, peer support and referrals.
- I don't know what is working well because I have not personally used any of the currently available services.
- Behavioral health and Nexus for severe issues. Aspire. I see kids that get help from these programs.
- Amador Senior Center, provide wonderful services, programs need more funding to continue and grow.
- Unsure
- Drug and alcohol program. It makes an alternative to incarceration. Helps to reunite families.
- I'm not sure
- The ASPIRE program has been another layer of support for our families in need of social/emotional support in addition to our school counselors
- Aspire
- The ASPIRE program and Nexus are the two programs I've worked with closely. They benefit our students and our families by offering counseling services and connecting them with other services that we as a school are unaware of in our county.

- Aspire
- ASPIRE
- I can't speak with any authority or personal knowledge however with the current virus situation the jobless are going to be very stressed out.
- I do not know enough to give a meaningful answer.
- Indirectly, I think that NAMI, First 5, Amador College Connect, the Senior Center, Sierra Wind, and Foothill Fitness all provide important and essential services that address their constituents. As mentioned, the Senior Peer Program works well.
- Sierra wind wellness center community workshops
- The Mobile Unit as I discussed above
- Please show us which are working with published outcomes!
- Case aides who provide case management and support services.
- As stated above, despite living in Amador county, I had to go elsewhere so I do not know.
- I honestly don't know. I haven't had any luck getting help at the services I've reached out to. Neither has my mother. She tried to find rides to Sacramento when I'm physically unable to take her to the doctors (she couldn't find a primary doctor in Amador that takes Medi-Cal). She was told the program was shut down because not enough people were getting rides. She was turned down at Behavioral Health Services for not being suicidal, but she's on Medi-Cal. I physically can't get myself and her to Sacramento every week for counseling. The gas cost is also too much. Our insurances don't allow us to do telehealth counseling appointments. Mom does get In Home Health Service hours and I do some of those hours, so that's one benefit I can think of. It helps cover gas for some of our Sacramento Dr appointments.
- Sierra Wind and Victory Village are the two I'm most aware of
- Not sure
- I am not well informed on general population, but feel senior services are well planned and coordinated, and are well positioned to be expanded.
- I don't actually know of any that are working well.
- Don't know
- I don't know enough to say.
- First 5 services - good outreach, education to community; NAMI Connections and Family Support groups - doing good group support; LGBTQ groups also providing support. Know less about actual mental health services within ACBH.
- Homeless outreach programs; veteran and LGBTQ services
- Unknown
- Don't know
- Sierra Wind is a great resource in the community
- None found
- Unsure
- I don't know.
- Coordinated services to help people with mental health issues to use and find services (e.g. alcohol and drug abuse recovery programs, severe mental health challenges)
- Foothill Fitness program gets people out and together for a health reason! Physically and emotionally. NAMI has had a wonderful outreach but since the COVID-19 how can they reach out to those who are now home?
- Again, I am not sure as I have not had any experience.
- Sierra Wind Friendly Visitors

- ATCAA Chat
- I think the mobile support team has been very beneficial because they are filling a gap that is otherwise difficult to fill in this rural community. Also think TxChat is beneficial so that our youth have the benefits of a co-occurring approach. ASPIRE because I believe this will help to find services for the youth and families who fall beneath the cracks.
- NAMI Groups seem to be working best as far as my awareness goes.
- I see the good Sierra Wind does for people needing to root themselves in a positive community atmosphere.
- Mobile Crisis
- I do feel Sierra Wind is a safe place for people to go and seek relationships and resources. Suicide Prevention campaigns have been successful in bringing awareness I believe. Nexus has been partnering with other agencies on projects.
- The community partners are dedicated. It really feels like the community along with ACBH come together to provide as much as possible to Amador County.
- Amador Speak, QPR
- Sierra Child and Family offers excellent mental health and behavioral services
- The mobile response team has help the image of behavioral health.
- Services for youth in the schools Aspire program QPR

**QUESTION 14: WHAT SUGGESTIONS DO YOU HAVE FOR IMPROVING BEHAVIORAL HEALTH SERVICES IN AMADOR COUNTY?**

112 respondents answered this question. Here is what respondents said:

- More child base programs. More funding for Sierra Wind homeless support.
- mas personas en espanol en la oficina yen los grupos
- As above. Have a policy of asking trauma patients in ER if they want any BH treatment during their ER stay, and following it. Have an RN with BH experience available to assess BH needs of ER patients who come in on a 5150. Have a "5150 Certified" RN in our county available to Sutter Hospital ER for persons admitted on, or needing a 5150 written. Having many more hospitals under County contract to provide BH inpatient care, as needed.
- Programs for youth, fudning for Sierra Wind-NAMI
- More programs like Carla
- no.
- Better Transportation
- None
- que tengar (?) mas therapists in espanol
- More programs for seniors
- more programs.
- More transportation & programs
- make them known
- More community outreach
- More provider options for medical-cal
- More housing options for mentally ill and homeless folks.
- Hire more publicly available Therapists and counselors

- Behavioral health needs to address not only "clients" but the health of service providers, organizations/agencies offering the services, leadership, the community at large, and all of our systems.
- Make it easier for people to find help (county website is difficult to navigate) Sutter Hospital having local options for mental health services A more 'welcoming' environment for new staff at mental health (check in with people to see how they are doing) Create a safe space and listen to staff, validate concerns, suggestions, ideas and input Training for staff at mental health - see below
- Make sure that people seeking help get a return phone call.
- Provide more providers at all levels
- It looks like you are doing a good job reaching out and collaborating.
- offer computer classes, and tutors for at risk youth's
- Clinicians to make contact consistently on a schedule.
- ?
- Enhance the programs that are making a difference so they can reach more people.
- Different Psychiatrist
- better psychiatrist, people with private insurance can use their services
- Continue services to agencies that are doing well & expand them if possible to reach more people.
- To offer youth's and teens computer classes
- more public awareness about the services you offer.
- Everything we have experienced has been amazing
- Get more Dr's good Dr's willing to actually help and not just push a patient to someone else until they send them to someone else, etc...
- I'll let you know.
- Same as above.
- Hosting group support sessions during lunch at the high schools in our County?
- Provide more services; it seems as though MANY MANY people who are in dire need of services, are denied those services. MH providers should be knowledgeable enough to know through their assessments when a patient who has been referred for services is not being honest. Too many families are denied services.
- N/A
- Have a therapist certified in EMDR. or the DBT training. I feel you need different therapy choices that can be made customized per client. Off and on for 19 years; it just consisted with how are you doing? How was your week?
- Keep training
- providing more outreach to non -english speaking residents
- Educating the public on what Amador County has to offer
- When my son was 18 and causing our family major trouble, we couldn't get help because he was an ADULT. He was living under our roof....we kicked him out and then he got assistance as a homeless person living at the homeless shelter. (Thank God for the homeless shelter....he really learned a few serious lessons there)
- To make these services and resources more visible to the community if they do exist.
- Need a psychiatrist and psychologist
- More counselors for poor!
- Getting the message out to the general public that these services are available for them
- Focus on funding for people that seriously need it and stop worrying about things that Our politically correct state government tells us should be a priority

- Help for adults who have private insurance that does not cover behavioral health costs or requires travel to providers.
- More Spanish speaking staff.
- More programs for Veterans help them with disability/veterans benefits application process. Support group. Emergency crisis center (24 hour stay). Housing programs. Group home?
- Increase the number of mental health providers available. I had to travel to El Dorado county to find a psychiatrist to help treat my depression - there is not one in this county! For many people, traveling that far is not possible.
- Provide behavioral health services for senior on Medicare. MFT counselors, Psychiatrists, etc.
- I hear about a lot of people who have to go outside of the county for counseling help. More counseling in county. Social workers in the schools. More counselors at school.
- More funding for Programs, and professional staff.
- More funding for school support
- I think they are doing a good job
- More services
- Accessibility for all.
- Please keep the ASPIRE and Nexus programs for our families and students! Please make services more readily available and easier to access for our families and students.
- more access for low income families
- Easier access to mental health therapists.
- All I know is that this county is a poor county, there are drug (speed) issues, few good paying jobs. It seems like a lot of people are retired. Mental health is never as well funded as health issues. I found that even finding a doctor or dentist is very difficult.
- more service providers for low income (medi-cal) people. My son's behavioral health therapist stated that her organization's protocol is no more than one appt per month. This is not enough to support my son with his current level of need. He does not have many options for providers, so is getting less service than his therapist actually recommends.
- There is a need to recruit and fund more mental health professionals. This county lacks psychologists and psychiatrists. It is especially critical for those who are uninsured or whose coverage does not include mental health services. Teenagers are especially at risk for depression and suicide.
- It is crazy to lease real estate for services that are PERMANENTLY NEEDED.
- If we could provide services to MORE than just people who have Medical, many more needy people could be served
- Bring in new, professional staffing to replace the current providers and leadership to bring in new vision, leadership.
- Services for the older population. This includes free services, sliding scale for those on a fixed or low income, MediCare providers, suicide prevention directed to shut-ins and those individuals who do not have transportation, older males who have a significant reluctance to reach out for services and counseling for individuals with newly diagnosed medical/mental health issues (dementia, cancer, liver disease, diabetes and depression) who are at high risk for suicide.
- NOT ENOUGH PROVIDERS- CONTRACT WITH MORE PROVIDERS IMMEDIATELY. you must contract with more providers so there can be more services, in more places, for more clients, with quicker appointment times. there are more people who need help than you can serve, you must work to increase capacity immediately by enticing providers to serve clients in Amador county.
- Transportation services, accepting more insurance.

- MORE THERAPISTS
- There is so much need and the homeless are of a big concern
- Increase number of psychiatrists. Increase availability of sub ozone and doctors certified to dispense it.
- Be more open minded about connecting our youth to lgbtq supports.
- Universal youth programs through schools. Programs to raise community awareness and social norms change. Recruit grant writers to bring in funds. Expand peer-to-peer programs
- Get in the community more. The office is too far from town.
- Don't know
- Continue first responder education.
- More essential job opportunities, not service industry
- Greatly increased funding. More effort in grant writing. Consider a multi-agency grant writer: contact County Office of Education, Law enforcement, and more.
- More shelters, safe houses, homes; doctors and nurse practitioners; free medical services; education of everyone on these issues & not just those in need, jobs; improved public transportation; training for supervisors and city councils about these issues and learning about successes in other locations so we could implement better programs; teach how to get rid of racism/sexism/LGBTQ.
- More funding - hiring more professionals would be great - training interns is cost-effective, but is it best outcomes for clients?
- Consistent and reliable leadership from the County at all levels
- More outreach for seniors as well as students.
- Improved services through increased personnel
- Don't know
- A ride to appointments outside the county would be very beneficial
- Get telehealth availability.
- Access to qualified mental health/therapists for lgbtq youth
- As always, more money is needed and more programs.
- Reach out to local providers who might be able to contract their services to take up the need that isn't being met for mental health issues.
- More interactive outreach programs for both youth and adults. Programs that are practical. Maybe something like a youth and adult mentorship but with a hands on focus. i.e. Youth teaching an elder about computers/ how to with technology that they do not understand. An adult teaching a youth how to plant a garden, etc. One on one within a group structure. This could benefit both elders and youth that have crisis issues. Increase of professional therapists in our county or access to them at reasonable rates.
- We need more programs and to have the options advertised more.
- Staff Training
- All agencies working together, sharing resources, using social media.
- More information given in more places. More funding of mental health and homeless services as well as we just need more beds and parking available for the homeless.
- No opinion
- Enhance mobile crisis unit w JPD
- more focus on prevention and the intersectionality of issues such as senior+isolated rural+LGBTQ or Youth+LGBTQ+Homeless or Single Parent + Living in Poverty +Isolated Rural Community My perception is that existing programs focus on singular issues and that there are few resources dedicated to prevention, most programs are intervention oriented once a person is in crisis.



- I had an opportunity (through a close family member) to first hand observe and participate in mental health care. There were some things I was very grateful for and others that I feel the county failed. Although I am not pointing fingers and I understand how the system works...the system has a lot more work ahead of it. I feel this family member was let down, forced to "figure it out on their own"...because they did NOT Medi-Cal. That is a HUGE GAP for those that go through the ER and are unfortunate to not "qualify" for services. I do think the BH staff did their best...but it had sever repercussions for this family member. So sad!
- More information distributed in the general public.
- More preventative services in the schools. More transportation/support/socialization for the elderly
- We need services and transportation for LGBTQ Youth
- Access to servcies and assessment questions to real data to base access or deny services.
- Make it more visible to the community. Be very specific on what HHS has to offer the community. I think a lot of people do not no what kind of help is available for them.
- Better training for therapists. Trauma informed approach for foster youth.
- We need to get to licensed in house (not teleconference) psychiatrists.
- Continue to look for more funding to support mental health services
- Less might be better. With the overload of safety nets people are becoming less self dependent. Things seem to be getting worse.
- Improving the level of professional training/capacity of Nexus lay counselors and administration.
- Providing more individual therapy during odd hours such as Saturdays, evenings.

#### **QUESTION 15: WHAT ADDITIONAL TRAINING, IF ANY, WOULD BENEFIT AMADOR COUNTY?**

70 respondents answered this question. Here is what they said:

- Nexus has had excellent classes. Like parenting, ADHD, Suicide Prevention w/spanish verion I would love to have more
- Having a small core of BH RNs who work with one or two Psychiatric MDs to take care of any psychiatric needs of County residents admitted to Sutter Amador ER. There is no replacement for having competent professional staff available for the County's patients in need. With more and more "Flat-landers" moving to our County, I feel it's imperative to have the right staff to meet the BH needs of our County's growing population. Whether we want to admit it, or not, many of these new county transplants will be psychiatric patients escaping the high cost of living in the Bay Area or San Joaquin Valley. Yes, even Stockton and Lodi are less expensive to live in than our beloved County. On the fixed incomes that the chronically, severely affected mental health persons are on, our less expensive area will be a boon to this population.
- More classes education learning from Nexus
- getting over stigmas
- no
- none
- more classes
- none
- N/A
- Training on how to eliminate stigma about mentally ill and homeless folks.
- I feel ACEs and Trauma-Informed awareness play an important role in addressing the underlying causes of many of the challenges we face here in Amador.



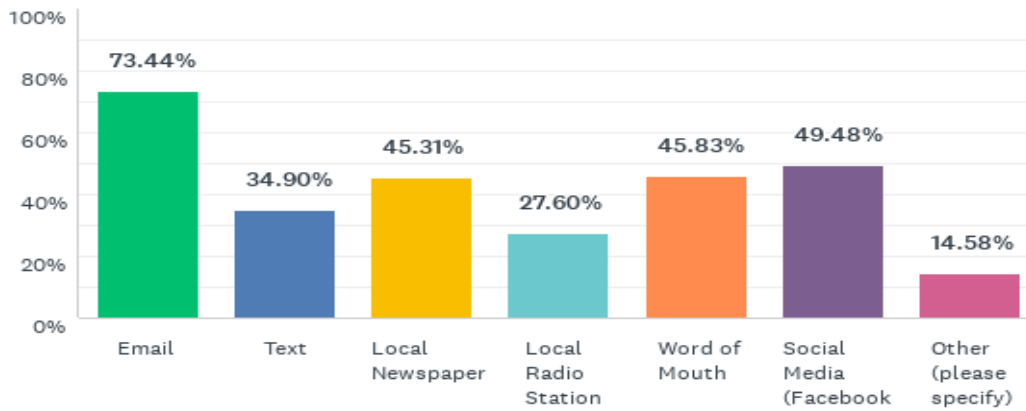
- Trauma Informed Care (including compassion, empathy and self awareness) for supervisors, program managers and directors. Management training - having accountability that leadership skills gained are being implemented and utilized Supervisors, managers and directors leading by example (once trained)
- Communication training - how to communicate effectively (possibly through CNVC) Secondary trauma and preventing re-traumatization (for service providers)
- More activities and better publicity for community centers.
- Keep up the Suicide awareness training.
- peer training
- anything to keep kids busy
- Homeless issues More senior services including @KCCH, Amador Residential, Gold Quartz & Alzheimers Residence
- More crisis workers
- People to offer after school tutoring
- not sure
- I'm not sure
- Therapists and Dr's understanding their patients better listening not just sending them someplace else as explained in last question #14
- N/a
- Same as above.
- N/A
- Self care for homeless, Trainings offered for the popular topics lately: mindfulness, grounded, meditation along with the different popular methods, what the heck is brain mapping.
- training to know which people need the most help
- increased cultural competence on foreign language speakers in this county
- Sexual Assault, human trafficking especially for minors and their parents, domestic violence and a safe way out
- Community training in recognizing the need and the ability to implement services for individuals
- Who knows
- Interpreters training.
- Bring back Mental Health First Aid...My certificate has expired. More peer training.
- I am not aware of any.
- In all areas of Behavioral mental Health
- Training for teachers and school administrators
- I don't know
- Anything would be helpful
- More Trauma Informed Practices from outside our county.
- more mental health providers who could provide services upcounty
- DBT training EMDR training
- any and all
- LGBTQ+
- Some Amador County employees and entities would benefit from Domestic Abuse training and awareness. In case things don't work out with Operation Care, those who still need help (especially when children are involved) should have additional places to turn. I hope we could add more trained providers in mental health to help our under served community who fall below middle class but above the poverty level. Behavioral Health Services would benefit on a training session to ensure those who

work with the public are clear on who is eligible for services, and if not, what other programs are available to them. They would also benefit from knowing the difference between Medicare with Supplemental insurance, Medi-Medi, and Medicare Advantage plans. When I went, I was turned away for not being on Medi-Cal as my secondary insurer. I was then given a list of private counselors who took Medicare. I called everyone on the list, and no one took Medicare Advantage plans. Medicare Advantage is an HMO and those who are usually on them make too much for Medicaid or the Extra Help program, but make too little for Medicare Supplemental plans. These employees should also get training on whether someone with Extra Help qualifies for services, which is what I had at the time. People on that program make too much for full Medicaid secondary coverage, but make too little to afford the Advantage plan or Supplemental plans. The Extra Help plan provides discounted prescription insurance premiums and deeply discounted prescription copays (the same as Medi-Medi). It's a state program, which I believe is provided through Medi-Cal also. Is there a place for people to go if they need to be under mental health observation or longterm supervision? What about those who need rehab for drug addiction or alcoholism? Are there at least people trained and available to help? Are there any county programs for those who cannot pay for rehab?

- Maybe expanding knowledge of the intellectually disabled and especially those on the Autism Spectrum
- Cultural sensitivity maybe, or inclusion and diversity training for top levels like Board of Supervisors and mid management.
- Basic community member training in available resources, how to identify problems, ways to support people experiencing problems, and refer to services. Volunteer training at multiple levels---make incentives with continuing education units, school credits, community service recommendations for college, gift cards, some creative incentives for homeless peer-to-peer help.
- anything for which you can find funds. It's all urgent.
- I don't know
- Trade school, STEM training courses
- Cultural Competency training specifically to teachers, school staff.
- Those I posted in #14
- Mandatory training (lots of it) for local police departments on how to effectively and safely engage people showing signs of mental illness. Mental Health 101 training (a dream) for staff in Sutter Amador ER, who are often cruel to potential 5150 cases.
- Legal services especially for housing retention and access to appropriate services.
- Unknown
- Don't know
- Gender training for the mental health and medical communities.
- I think young children and young adults can always use help.
- Drug Addiction
- Cultural Competence
- No opinion
- Leveraging funding sources to build out infrastructure
- HOW THE PROCESS WORKS in a mental health emergency. It is NOT a "one fits all". Make the public aware of what could happen to prepare family members and the person(s) suffering from mental health issues.
- cultural competency
- More cultural competency

- Trauma informed TBRI Dealing with mental health issues in special needs children or children with developmental trauma.
- Training the Junior High School and High School students QPR.
- Make it easier for large companies to move in area and start the training and hiring.
- Marijuana prevention, youth programs for families of poverty

**QUESTION 16: HOW DO YOU GET YOUR INFORMATION?**



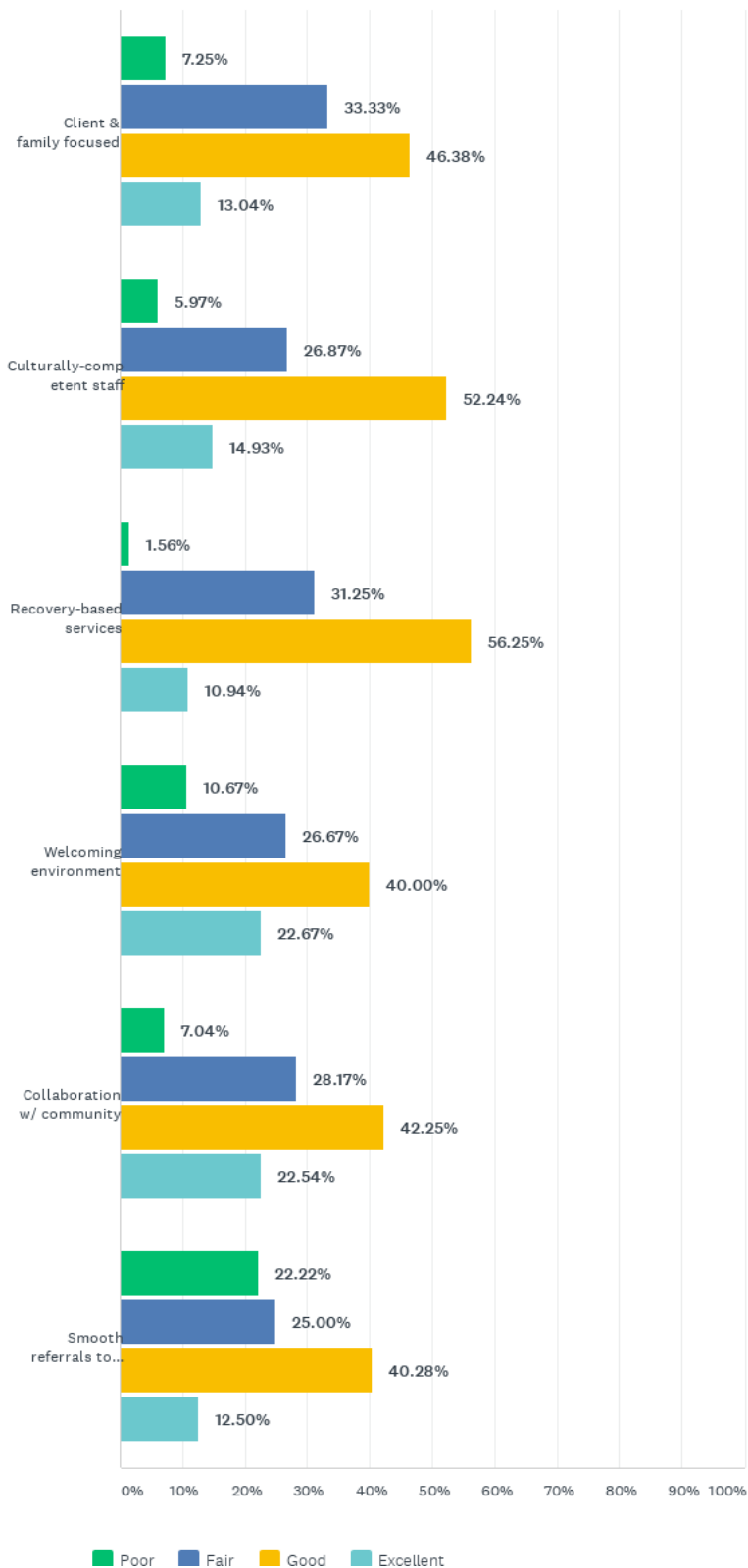
192 respondents answered this question.

The majority of respondents get their information via email or Social Media.

28 'Other' responses received stated the following:

- Behavioral health, Social services, Sierra Wind
- Behavioral health - Social Services Sierra Wind
- News
- Flyers
- Online news sources: CNN, CBS, NPR, BBC (NOT FOX)
- Colleagues and community/organizational meetings.
- bill board postings
- Newspaper, TV & Radio
- TV
- Grandmother
- In person meetings/collaborations
- legitimate news sources
- Reading various local and national news outlets.
- Google
- professional capacity
- Living and working in social services for 30 years
- public health information, client feedback, state information
- County and Local Program Websites
- Online
- CNN and NPR
- Sac Bee. CAPRadio
- other news papers and radio stations
- streaming News Services
- CNN News
- Experience
- Work
- Online not Social Media

**QUESTION 17: IF YOU ACCESS MENTAL HEALTH SERVICES AT AMADOR COUNTY BEHAVIORAL HEALTH, HOW DO YOU FEEL WE ARE DOING WITH THE FOLLOWING?**



79 respondents answered the question.

10 comments received stated:

-My daughter gets counseling @Nexus & our experience is very positive but I'm not sure about the counties Behavioral health Services

-Waiting and waiting for a referral is overwhelming and causes more stress and depression for me anyway I wish it were easier somehow and as a patient it be explained and gone over with each individual

-Several years ago when we tried to get help for our son, we felt very alone. We were on our own to figure it all out while trying to keep him out of jail and stopping him from committing suicide.

-Too few counselors we can afford

-Don't live in the county

-do not access BH at this time

-I don't

-I don't access services

-do not access these services

-N/A

Overall, the majority of respondents stated ACBHS was doing 'Good' in all areas. For the second year in a row, 'Smooth referrals to and from other providers' is the area that needs most improvement.

**QUESTION 18: PLEASE FEEL FREE TO ADD ANY ADDITIONAL COMMENTS YOU WOULD LIKE US TO KNOW ABOUT THE PROGRAMS AND SERVICES NOW BEING FUNDED BY MHSA. IF YOU WOULD LIKE TO BE CONTACTED, PLEASE INCLUDE YOUR NAME AND NUMBER.**

*37 respondents answered this question. Here is the information they provided. In order to protect respondent's privacy, contact information is not included in these responses.*

- Learning for mental illness is key, understanding of the illness helps to better find tools to cope with our daily lives. Peer support helps us learn from others alike and for families to understand what is WRAP, Triggers, tools. How important to have peer support.
- me gustan los programas que Nexus da para los niños y las familias
- me gustan los programas que Nexus da para los niños y las familias
- I can't answer most because none apply or don't know if them
- I'd love to be able to help correct these faults in our BH System that I have identified. Because I've actually worked for years in RN positions helping this clientele, it's easy for me to identify problems in our local BH services, and visualize solutions to them. This is always cheaper than being fined for non-compliance, and it's the right thing to do also. Tim Regehr, RN BSN, PhN at [sopiagotim@gmail.com](mailto:sopiagotim@gmail.com) or preferably, texted at 209-609-3216.
- More awareness classes - groups. Having an understanding helps to find tools that can help us cope - peer to peer. Help families understand triggers, WRAP, tools & how they work thanks
- Despite some of the amazing work being done by the Behavioral Health department there is still - to be completely honest - a reputation of being behind the times in their approach and not very effective in the community. That families are left frustrated by the internal systems they come up against when seeking services. Being aware of this and addressing it could only help everyone in our community and add exponentially to the good work already being done.
- Last October, I was desperately seeking help to find solutions for my son who urgently needed drug/alcohol rehab services. Sacramento County told me we had to contact the county we lived in. I called Amador County Behavioral Services during regular business hours and left a message requesting a call back for information and assistance. No one ever returned my phone call. That was truly horrible.
- Thank you for doing what you do for our community!
- My family really appreciates all the services they are getting, especially during COVID, from Nexus. They are really trying to provide activities for our family and we really appreciate the help with food and school lunches.
- Emma, Naomi, Brenna & the other gal that brings food, (maybe Katie? sorry!) have been so kind & sweet & genuinely concerned with us! Thank you!
- Mental health is different for all individual one day things are ok the next they aren't for me I wish the scheduling and referral part was different easier also explained easier to find a Dr or therapist for each individual smoother I have waited months sometimes over a year to get the help I needed simply cuz a box wasn't checked on \*unreadable\* that the office referrals are sent notices the patient explains what's happening it isn't easy when mentally breaking down and help isn't as close as it should be the 24 hour hotlines I think are very helpful it would also help if Dr's just simply listened and didn't see you as everyone else they see they should know everyone is different and really need help I've been mad feel less important in more ways than one in the past right now my therapist is great she's caring she listens she remembers what we spoke about in our last session I appreciate that in the past watch new appointment felt like all the appointments in between as well finding someone to confide in and trust isn't easy so it's nice when it's found the other is having the Dr and one Dr not every time you go it's a different Dr I hate that and I also think mental help should be allowed for any one regardless of income

money doesn't buy life when someone needs mental health help them regardless of how much \$\$ one has or don't have in my opinion

- I definitely want to be more aware of the programs and services available. I need help and would like to help others if possible. I've only been living in Amador County for a couple months, and COVID19 has dampened social activities. I just applied for behavioral health services, and I'd be happy to discuss this further, when I feel able. I have previously participated in a NAMI peer support group in Wayne County, Michigan.
- SVDP is more focused on the Homeless and there immediate needs. We give many referrals to other agencies that can help with other issues, i.e.Suicide, etc.
- N/A
- The people who need services can't afford them.
- Interested in learning more about projects offered.
- Amy Hixson and Margie Soracco are excellent providers
- Please keep ASPIRE funded.
- Keep the ASPIRE program going.
- We need better! And it is not on the fine professionals on the front lines, but up the ladder. This needs to be a much higher priority.
- I really hope you get good feedback and are able to provide some services where there are currently some gaps. I realize we're a small, rural county and there are challenges with it. I appreciate your reaching out to hear what your residents have to say. I wish to remain anonymous, but please know that I am praying for your success and discernment.
- I work thru NAMI and am not involved in other programs. I have been to a number of NEXUS classes in the past by Carla Fry and they have given me a lot of information.
- I'm fairly new to Amador County.
- Please allow transportation for youth to attend the tri-counties lgbtq youth group
- I have to admit that I'm very ignorant about these issues.
- Amador County has one of the highest suicide rates in California. How is that being addressed here? Would it reflect a need for more staff, professionals, larger outreach of the AMC Behavior Health Services? With the Covid-19 now upon us there will be an increase need for more support from the MHSA.
- Please continue to support these services.
- I know how difficult mental health services can be. It is a daily struggle and the team at Amador is wonderful. But there are area that can always be improved. Things can fall through the cracks. Sometimes it takes a "close to home" event to understand that nothing is perfect.
- Stephanie and Vanessa are doing a great job!
- Overzealous caretaking is Counter productive. Hard times make strong people, strong people make easy times, easy times make weak people, weak people make hard times.

Thank you for participating in this process and for your interest in mental health services and the Mental Health Services Act in Amador County.

This year's responses identified many mental health needs and suggestions for finding solutions to those unmet needs in Amador County. This information is crucial to the work being done through the Mental Health Services Act (MHSA) and Amador County Behavioral Health Services. The priorities, barriers, challenges and solutions offered through this process will be discussed throughout the year as we strive, together, to see that mental health services and supports are provided to all who need them.

This information is posted electronically on the Network of Care, under the MHSA tab. You can access Network of Care by going to this website: <http://amador.networkofcare.org/mh/>

This information will be included into the MHSA Three-Year Plan and Expenditure Report for FY 20-21 through FY 22-23. The plan will be posted to Network of Care on August 14 (if not sooner) for public comment and review.

A public hearing regarding this plan is scheduled for September 16, 2020 during the Amador County Behavioral Health Advisory Board meeting.

*If you have any questions, please contact Stephanie Hess at (209) 223-6308 or [shess@amadorgov.org](mailto:shess@amadorgov.org)*