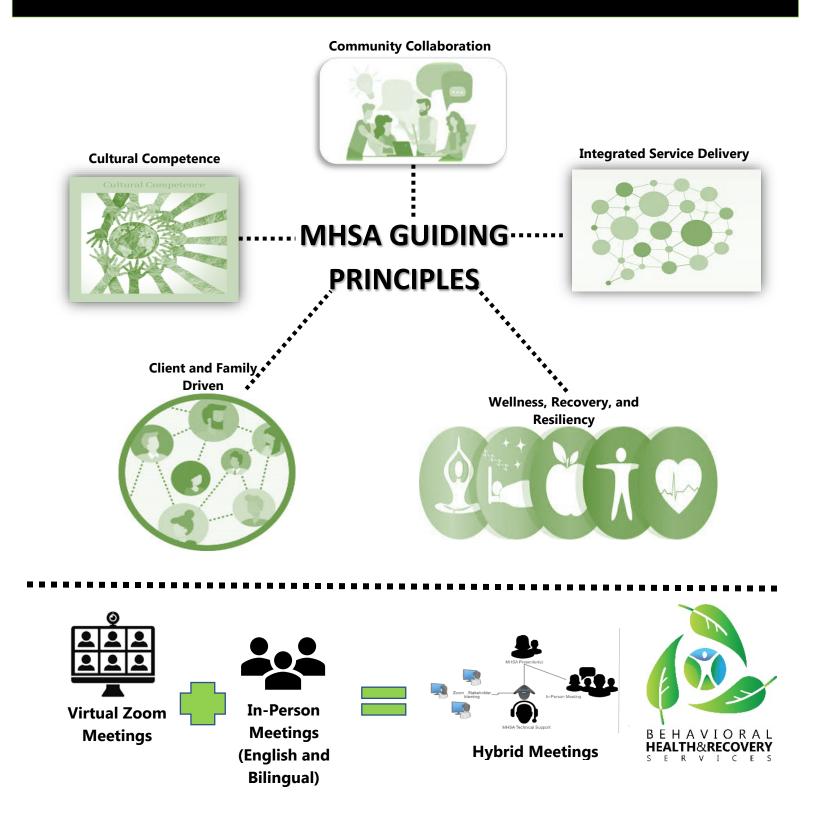
KERN COUNTY MENTAL HEALTH SERVICES ACT (MHSA) COMMUNITY PROGRAM PLANNING PROCESS (CPPP) ANNUAL REPORT – FISCAL YEAR 2022-2023



THE MENTAL HEALTH SERVICES ACT & THE COMMUNITY PROGRAM PLANNING PROCESS

More than two million Californians are affected by potentially disabling mental illnesses every year. To address this, California's voters passed Proposition 63 (also known as Mental Health Services Act or MHSA) in the November 2004 General Election. Proposition 63 promised to greatly improve the delivery of mental health services and treatment across the State of California and taxes very high-income individuals an additional one percent portion of their annual income that exceeds one million dollars.

The MHSA represents a comprehensive approach to the delivery of behavioral health services and support for the residents of Kern County. It also addresses a broad continuum of prevention, early intervention, and service needs; providing the necessary infrastructure, technology, and training elements that will effectively support behavioral health and substance use programs.

Kern Behavioral Health and Recovery Services (KernBHRS) utilize five MHSA principles to guide its Community Program Planning Process (CPPP). Those guiding principles are:

MHSA GUIDING PRINCIPLES

1. Community Collaboration

Services should strengthen partnerships with diverse sectors to help create opportunities for employment, housing, and education.

2. Cultural Competence

Services should reflect the values, customs, beliefs, and languages of the populations served and eliminate disparities in service access.

3. Client, Consumer, and Family Involvement

Services should engage clients, consumers, and families in all aspects of the mental health system, including planning, policy development, service delivery, and evaluation.

4. Wellness and Recovery

Services should promote recovery and resiliency by allowing clients and consumers to define their goals so they can live fulfilling and productive lives.

5. Integrated Service Delivery

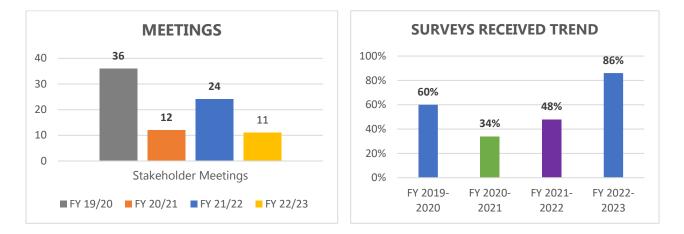
Services should reinforce coordinated agency efforts to create a seamless experience for clients, consumers, and families.

Great importance is placed on the preparation and delivery of the stakeholder process, as it is the driving force behind the consideration of program implementation. Any individual who resides in the community is considered a stakeholder and is welcome to participate and give feedback.

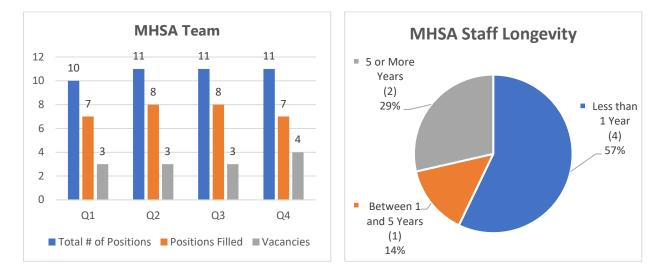
The focus of the CPPP is to collect feedback on programs and services either already in effect but in need of modification; or new programs that need to be created to provide appropriate, comprehensive, and meaningful mental health care.

In the Fiscal Year 2022 – 2023, the MHSA Team continued dealing with the challenges of "the new normal of living with COVID-19". The MHSA Coordination team adapted to conduct Virtual Stakeholder Meetings, In-person Stakeholder Meetings (English & English/Spanish Bilingual), and Hybrid Stakeholder Meetings (a combination of the above).

Even though we had a reduction in the number of Stakeholder Meetings in comparison to the fiscal year pre-COVID-19 (see **MEETINGS** graph below), we experienced an *increase* in the percentage of Stakeholders who provide valuable feedback (see **SURVEYS RECEIVED TREND** graph below).



FY 2022 – 2023 was a year of high employee turnover rate for Kern Behavioral Health and Recovery Services (KernBHRS). The high turnover rate and staff longevity were contributing factors to the decline in the number of stakeholder meetings we were able to conduct during the fiscal year (see charts below).



CPPP INCENTIVE PROGRAM

The CPPP Incentive Program started on December 1, 2021 and it continued in the FY 2022 - 2023. This incentive program offers a \$20 gift card for consumers/clients, their families, and other MHSA program participants for attending a MHSA Community Forum.

To qualify for the CPPP Incentive Program, interested consumers/clients, family members, and other MHSA program participants must first *pre-register* to attend the MHSA Community Forum. Upon pre-registration, the MHSA staff ensures that those who *pre-register* have reliable access to Zoom if joining virtually. If the meeting is in person, MHSA staff verifies that they have all the information to be able to attend an in-person meeting.

If they do not have reliable access, the MHSA staff provide other options that may be available to them (i.e. Consumer Family Learning Center, County Library, Program Site, School, etc.) to ensure their attendance and participation.

During the MHSA Community Forum, MHSA staff confirms the consumer/client, family member, or other MHSA program participants' attendance. If the forum was in-person, the participant receives the \$20 gift card at the end of the meeting. If attending virtually, the \$20 gift card is mailed to the address they provided during pre-registration.

MHSA Community Forum Date	7/20/2022	8/12/2022	12/6/2022	12/21/2022	2/3/2023	2/28/23	FY 2022 – 2023 TOTAL
# of Gift Cards Distributed	2	1	2	2	1	7	15

During this fiscal year, we distributed the following number of \$20 gift cards:

The MHSA/CPPP Incentive Program information was added to both the English and Spanish flyers (see below). The information was also shared through other communication outlets such as weekly electronic newsletters, MHSA email invites, and KernBHRS social media platforms (*see samples below*).





CALENDAR OF STAKEHOLDER MEETINGS FOR FY 2022 – 2023

SCHEDULE OF VIRTUAL, IN-PERSON & HYBRID STAKEHOLDER MEETINGS:

Date	Location	Time	Participants	Focus	Attendance	Surveys Received/ Completed
July 20, 2022 (Wednesday)	In-Person Meeting (Dream Center)	12:00 PM	Community Forum	Services for Youth	32	30
July 25, 2022 (Monday)	In-Person Meeting (Westchester)	11:00 AM	Community Forum	MHSA Expansion and Infrastructure Efforts	10	9
July 26, 2022 (Tuesday)	VIRTUAL Zoom Meeting	12:00 PM	Community Forum	MHSA Expansion and Infrastructure Efforts	17	9
August 12, 2022 (Friday)	In-Person Meeting (Dream Center)	11:30 AM	Community Forum	Services for Youth	17	17
September 7, 2022 (Wednesday)	VIRTUAL Zoom Meeting	11:30 AM	Community Forum	Housing, Expansion Efforts, and Additional Community Needs	10	6
December 6, 2022 (Tuesday)	In-Person Meeting (Westchester)	11:30 AM	Community Forum	Housing, Program Updates, Expansion Efforts	13	13
December 21, 2022 (Wednesday)	In-Person Meeting (Westchester)	10:30 AM	Community Forum	Innovation Updates	9	8
February 3, 2023 (Friday)	In-Person Meeting (Dream Center)	12:00 PM	Community Forum	Behavioral Health Crisis Grants	12	9

February 8, 2023 (Wednesday)	In-Person Meeting (Westchester)	10:30 AM	Community Forum	Behavioral Health Crisis Grants	4	4
February 28, 2023 (Wednesday)	In-Person Meeting (Presented in both English & Spanish) (Westchester)	11:30 AM	Community Forum	Staff Retention and Recruitment	19 (12 English & 7 Spanish)	19 (12 English & 7 Spanish)
April 27, 2023 (Thursday)	In-Person Meeting (Westchester)	11:30 AM	Community Forum	Presenting MHSA 3-Year Plan and Annual Revenue and Expenditure Plan (ARER)	9	6
		TOTALS	;		152	130

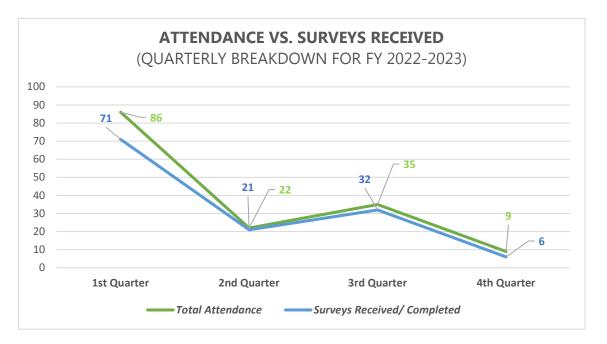
+ In-Person Community Forum and Stakeholder feedback were received with the use of paper surveys.

- Virtual Community Forum via Zoom. Stakeholder feedback was received via a SurveyMonkey link.

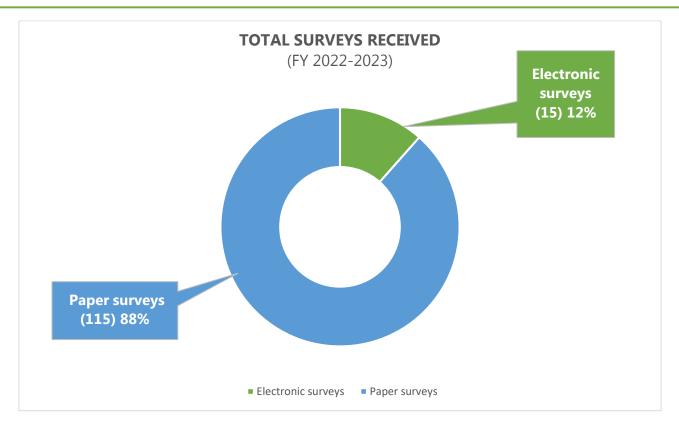
* Hybrid Community Forum was presented in person in both English and Spanish. Forums were conducted in separate rooms simultaneously. All materials and surveys were provided in both English and Spanish.

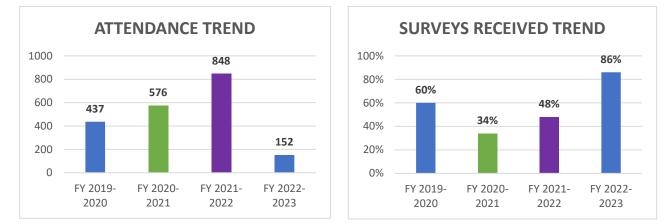
CPPP – COLLECTING DATA

The following demographics were compiled based on **130** surveys collected from the **152** Stakeholders who participated in our Virtual, In-Person, and Hybrid Stakeholder Meetings during the FY 2022-2023 (**July 2022 through June 2023**):



MHSA STAKEHOLDER DATA REPORT FOR FY 2022 - 2023



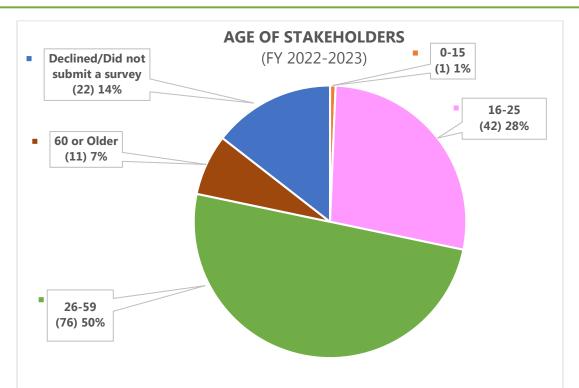


DEMOGRAPHICS

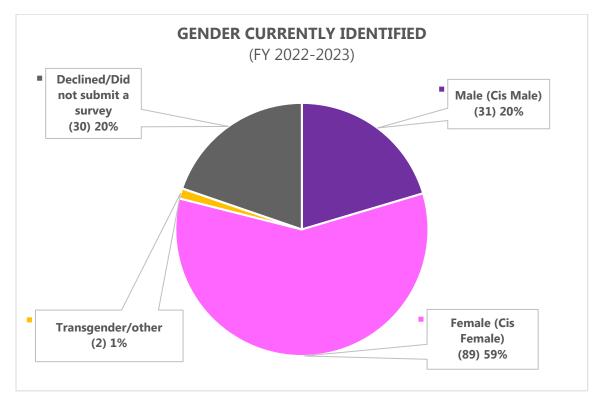
Of the **152** Stakeholders who participated in Community Forums in the FY 2022-2023, **130** (86% of stakeholders) completed a survey.

Of the total surveys, **115** (88%) completed paper surveys, and **15** (12%) were completed via SurveyMonkey.com.

The surveys collected revealed that the majority of those who completed a survey identified as being between the ages of 26-59 (**50%**), with the largest portion of this population identified as **Female (59%)**.

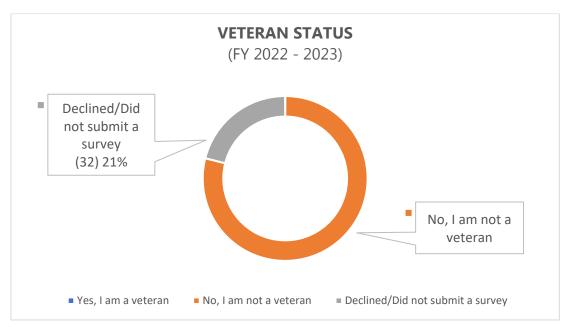


AGE OF STAKEHOLDERS					
AGE GROUPS N %					
26 – 59	76	50%			
16 – 25	42	28%			
Declined/Did not submit a survey	22	14%			
60 or Older	11	7%			
0 – 15	1	1%			
TOTALS	152	100%			

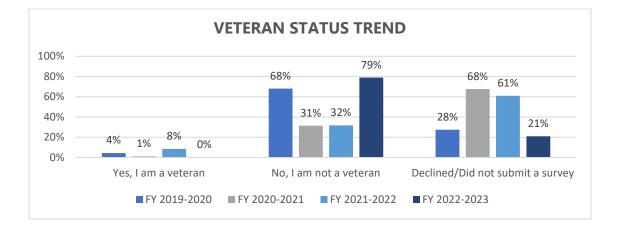


GENDER CURRENTLY IDENTIFIED	N	%
Female (Cis Female)	89	59%
Male (Cis Male)	31	20%
Declined/Did not submit a survey	30	20%
Transgender	2	1%
Genderqueer, Nonbinary, Genderfluid, Questioning or Unsure	0	0%
TOTALS	152	100%

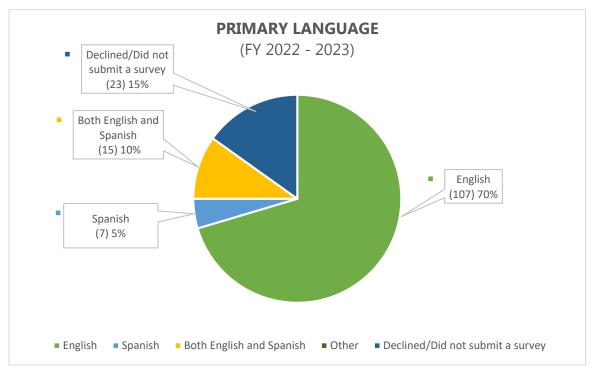
VETERAN STATUS



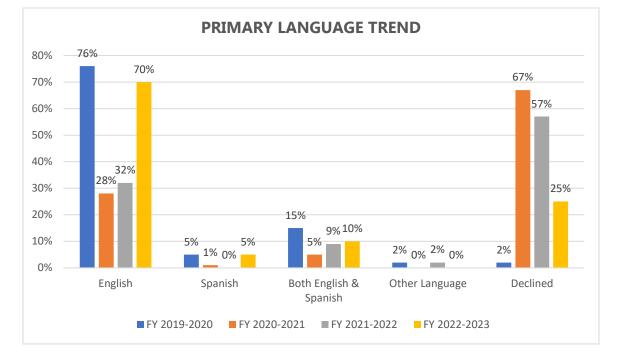
VETERAN STATUS	N	%
No, I am not a veteran	120	79%
Declined/Did not submit a survey	32	21%
Yes, I am a veteran	0	0%
TOTALS	152	100%



PRIMARY LANGUAGE



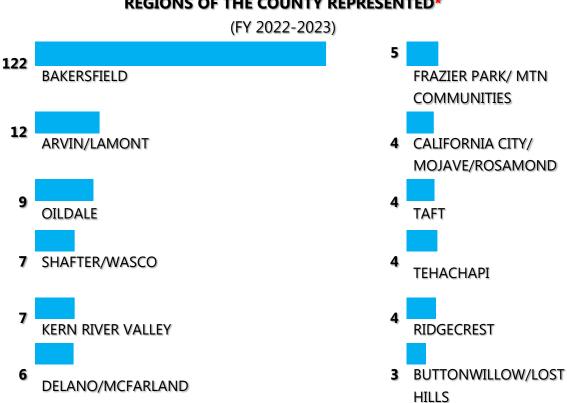
PRIMARY LANGUAGE	Ν	%
English	107	70%
Declined/Did not submit a survey	23	15%
Both English and Spanish	15	10%
Spanish	7	5%
TOTALS	152	100%



STAKEHOLDER REPRESENTATION

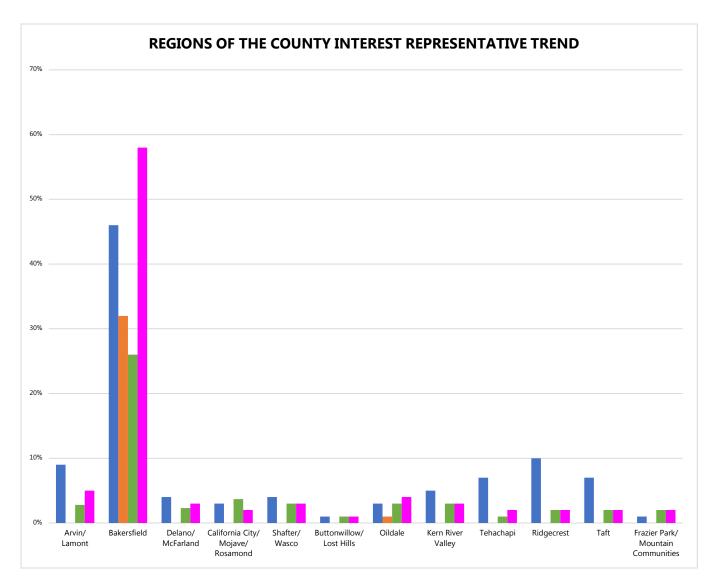
	STAKE	HOLDER CATEGOR (FY 2022-2		ITED*	
KernBHRS Staff	Education/ School	Client/ Consumer/Person with Mental Illness	Family Members of a Client	Community Member	County Agency Staff (Not KernBHRS)
53 (25.4%)	47 (22.5%)	36 (17.2%)	14 (6.7%)	13 (6.2%)	9 (4.3%)
Other	Behavioral Health Provider (not KernBHRS)	Senior Services	Veteran Services	Medical Provider	Law Enforcement
9 (4.3%)	2 (1%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)

*NOTE: There was a total of 26 (12.4%) stakeholders who Declined/Did not submit a survey who are not represented in the above chart.



*NOTE: There was a total of 28 (13.0%) stakeholders who Declined/Did not submit a survey who are not represented in the above chart.

REGIONS OF THE COUNTY REPRESENTED*

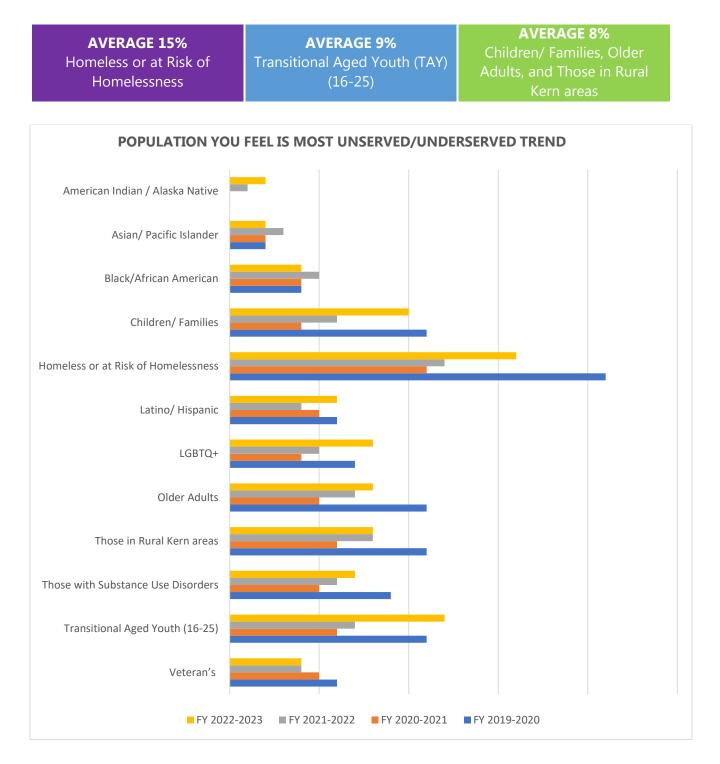


REGIONS OF THE COUNTY INTEREST REPRESENTATIVE TREND (DATA TABLE)					
TOWNS & CITIES	FY 2019-2020	FY 2020-2021	FY 2021-2022	FY 2022-2023	
Arvin/Lamont	9%	0%	3%	5%	
Bakersfield	46%	32%	26%	58%	
Delano/McFarland	4%	0%	2%	3%	
California City/ Mojave/ Rosamond	3%	0%	4%	2%	
Shafter/Wasco	4%	0%	3%	3%	
Buttonwillow/ Lost Hills	1%	0%	1%	1%	
Oildale	3%	1%	3%	4%	
Kern River Valley	5%	0%	3%	3%	
Tehachapi	7%	0%	1%	2%	
Ridgecrest	10%	0%	2%	2%	
Taft	7%	0%	2%	2%	
Frazier Park/ Mountain Communities	1%	0%	2%	2%	
Declined/ Did not submit a Survey	0%	66%	48%	13%	

UNSERVED/UNDERSERVED POPULATION

One of the questions we asked stakeholders is to tell us what populations they feel are currently unserved or underserved. The answers we receive from our stakeholders, help us assess our programs and plan needed changes to current and future services.

In the past 4 fiscal years, **Homeless or at Risk of Homelessness** has ranked #1 with an average of **15%**.

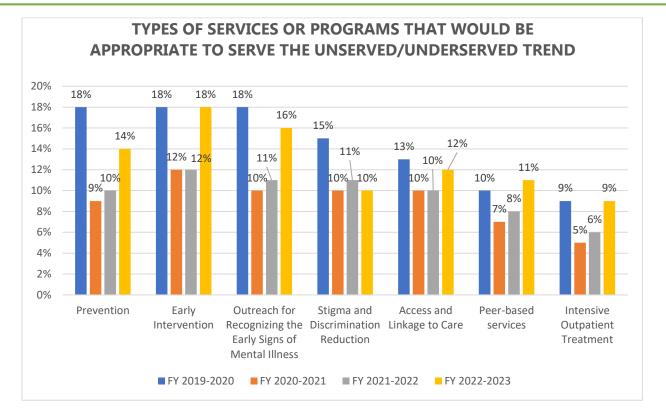


POPULATION YOU FEEL IS THE MOST UNSERVED/UNDERSERVED TREND (DATA TABLE)						
POPULATIONS	FY 2019-2020	FY 2020-2021	FY 2021-2022	FY 2022-2023		
American Indian / Alaska Native	0%	0%	1%	2%		
Asian/ Pacific Islander	2%	2%	3%	2%		
Black/ African American	4%	4%	5%	4%		
Children/ Families	11%	4%	6%	10%		
Homeless or at Risk of Homelessness	21%	11%	12%	16%		
Latino/ Hispanic	6%	5%	4%	6%		
LGBTQ+	7%	4%	5%	8%		
Older Adults	11%	5%	7%	8%		
Those in Rural Kern areas	11%	6%	8%	8%		
Those with Substance Use Disorders	<mark>9</mark> %	5%	6%	7%		
Transitional Aged Youth (16-25)	11%	6%	7%	12%		
Veteran's	<mark>6%</mark>	5%	4%	4%		

TYPES OF SERVICES OR PROGRAMS THAT WOULD BE APPROPRIATE TO SERVE THE UNSERVED/UNDERSERVED

(FY 2022 - 2023)

Ġ т́́Р			
Early Intervention (65) 18%	Outreach for Recognizing the Early Signs of Mental Health (60) 16%	Prevention (53) 14%	Access and Linkage to Care (44) 12%
	\mathbf{O}	STISMA	
Peer-based Services (40) 11%	Declined/Did not submit a survey (38) 10%	Stigma and Discrimination Reduction (36) 10%	Intensive Outpatient Treatment (32) 9%





FY 20			EHOLDER DATA REPORT 2– JUNE 30, 2023)		
(Note:)			e option to select multiple answers)		
AGE GROUPS:			SEXUAL ORIENTATION:		
0-15	1	0.7%	Straight/Heterosexual	104	68.4%
16-25	42	27.6%	Gay or Lesbian	5	3.3%
26-59	76	50.0%	Questioning	0	0.0%
60 or Older	11	7.2%	Queer	0	0.0%
Declined/Did not submit a Survey	22	14.5%	Asexual	1	0.7%
GENDER ASSIGNED AT BI	RTH:		Bisexual	7	4.6%
Male	35	23.0%	Pansexual	7	4.6%
Female	94	61.8%	Another Sexual Orientation	0	0.0%
Intersex	0	0.0%	Declined/Did not submit a Survey	28	18.4%
Declined/Did not submit a Survey	23	15.1%	RACE:		
GENDER CURRENTLY IDENTIFI	FD WITI	-l:	Asian	1	0.6%
Male	31	20.4%	Native Hawaiian/Pacific Islander	0	0.0%
Female	89	58.6%	Black/African American	16	10.4%
Transgender/other	2	1.3%	Latino/Hispanic	51	33.1%
Genderqueer	0	0.0%	Tribal/Native American	1	0.6%
Non-binary	0	0.0%	White/Caucasian	40	26.0%
Genderfluid	0	0.0%	Two or More Races	15	9.7%
Questioning or Unsure	0	0.0%	Tribe:	0	0.0%
Other Gender Identity	0	0.0%	Declined/Did not submit a Survey	30	19.5%
Declined/Did not submit a Survey	30	19.7%	ETHNICITY:		
DISABILITY:			African	14	9.2%
Vision	7	4.5%	Asian Indian/South Asian	1	0.7%
Hearing, or difficulty understanding speech	2	1.3%	Cambodian	0	0.0%
Mental/Cognitive (excludes behavioral)	14	9.1%	Chinese	0	0.0%
Mobility/Physical	1	0.6%	Eastern European	4	2.6%
Chronic Medical illness (not limited to pain)	9	5.8%	Korean	0	0.0%
None	83	53.9%	Middle Eastern	2	1.3%
Declined/Did not submit a Survey	37	24.0%	Vietnamese	0	0.0
VETERAN STATUS:			European	11	7.2%
Yes, I am a veteran	0	0.0%	Filipino	1	0.7%
No, I am not a veteran	120	78.9%	Japanese	0	0.0%
Declined/Did not submit a Survey	32	21.1%	Caribbean	0	0.0%
PRIMARY LANGUAGE			Central American	3	2.0%
English	107	70.4%	Mexican/Mexican American/Chicano	48	31.6%
Spanish	7	4.6%	Puerto Rican	0	0.0%
Both English and Spanish	15	9.9%	South American	1	0.7%
Other	0	0.0%	Two or more ethnicities	15	9.9%
Declined/Did not submit a Survey	23	15.1%	Other:	0	0.0%
					0.070

MHSA STAKEHOLDER DATA REPORT FOR FY 2022 - 2023

GROUP/CATEGORY:			POPULATION YOU FEEL IS MOST UNSERVED/UNDERSERVED IN THE ABOVE-MENTIONED COMMUNITY:		
Client/Consumer/Person with Mental Illness	36	17.2%	Children/Families	35	10.1%
Family Member of a Client or Person with Mental Illness	14	6.7%	Transitional Aged Youth (16-25)	41	11.9%
KernBHRS Staff	53	25.4%	Older Adults	29	8.4%
Law Enforcement	0	0.0%	Homeless or at risk of Homelessness	56	16.2%
Veteran Services	0	0.0%	Those in Rural Kern areas	29	8.4%
Senior Services	0	0.0%	Veterans	13	3.8%
Education/Schools	47	22.5%	Those with Substance Use Disorders	25	7.2%
Community Member	13	6.2%	Latino/Hispanic	22	6.4%
County Agency Staff (Not KernBHRS Staff)	9	4.3%	Asian/Pacific Islander	7	2.0%
Behavioral Health Provider (Not KernBHRS Staff)	2	1.0%	Black/African American	15	4.3%
Medical Care Provider	0	0.0%	American Indian / Alaska Native	7	2.0%
Other	9	4.3%	LGBTQ	27	7.8%
Declined/Did not submit a Survey	26	12.4%	Other	0	0.0%
			Declined/Did not submit a Survey	39	11.3%
REGION OF THE COUNTY YOU ARE MOST INVOLVED:			PLEASE INDICATE THE TYPES OF SERVICES OR PROGRAMS THAT WOULD BE APPROPRIATE TO SERVICE THE ABOVE- MENTIONED POPULATION:		
Arvin/Lamont	12	5.6%	Prevention	53	14.4%
Bakersfield	122	56.7%	Early Intervention	65	17.7%
Delano/McFarland	6	2.8%	Outreach for Recognizing the Early Signs of Mental Illness	60	16.3%
California City/Mojave/Rosamond	4	1.9%	Stigma and Discrimination Reduction	36	9.8%
Shafter/Wasco	7	3.3%	Access and Linkage to Care	44	12.0%
Buttonwillow/Lost Hills	3	1.4%	Peer-based services	40	10.9%
Oildale	9	4.2%	Intensive Outpatient Treatment	32	8.7%
Kern River Valley	7	3.3%	Declined/Did not submit a Survey	38	10.3%
Tehachapi	4	1.9%	1		
Ridgecrest	4	1.9%			
Taft	4	1.9%			
Frazier Park/Mountain Communities	5	2.3%	1		
Declined/Did not submit a Survey	28	13.0%			