

County of San Diego Pandemic Impact Report

**Adult and Older Adult
Behavioral Health Services**

Report Date: 12/9/2022



Introduction

This report examines the impact of two full years of the pandemic by comparing the County of San Diego Behavioral Health Services (SDCBHS) Adult and Older Adult System of Care (AOA SOC) data* from 1) March 2020 to February 2021 (Year 1) and 2) March 2021 to February 2022 (Year 2) to the year prior to the pandemic (March 2019 to February 2020; Pre). This report includes Medi-Cal and unfunded clients.

Topics Reviewed:

- ❖ Demographics
- ❖ Service Utilization
 - Contact Type
 - Levels of Care
 - Service Type
 - Emergency/Crisis
- ❖ Inpatient Psychiatric Admissions
 - 30-Day Readmissions
 - Admissions by Hospital
- ❖ Satisfaction
- ❖ Client Outcomes
- ❖ Additional Outcomes

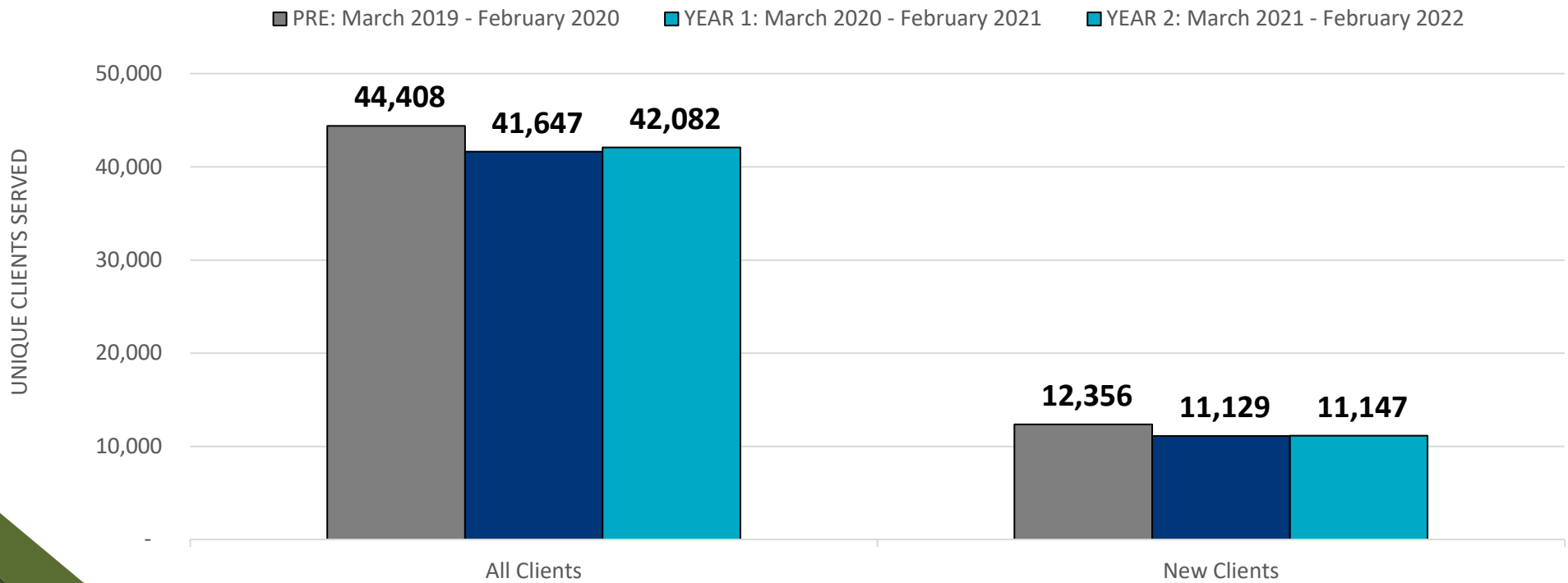
*The majority of the data comes from the county mental health organizational provider system.

Demographics

Clients Served

During the year prior to the pandemic, there were 44,408 clients served. A **6.2% reduction** in the **number of clients** served by the AOA SOC was observed during the **first year of the pandemic** (41,647). The **number of clients** served during the **second year of the pandemic** (42,082) reflects a **reduction of 5.2%** compared to the year prior to the pandemic. Also, during the year prior to the pandemic, there were 12,356 new clients served. There was a **9.9% reduction** in the number of **new clients** served by the AOA SOC during the **first year of the pandemic** (11,129), and a **reduction of 9.8% new clients** served during the **second year of the pandemic** (11,147) compared to the year prior to the pandemic.

Clients Served Before and During Pandemic*

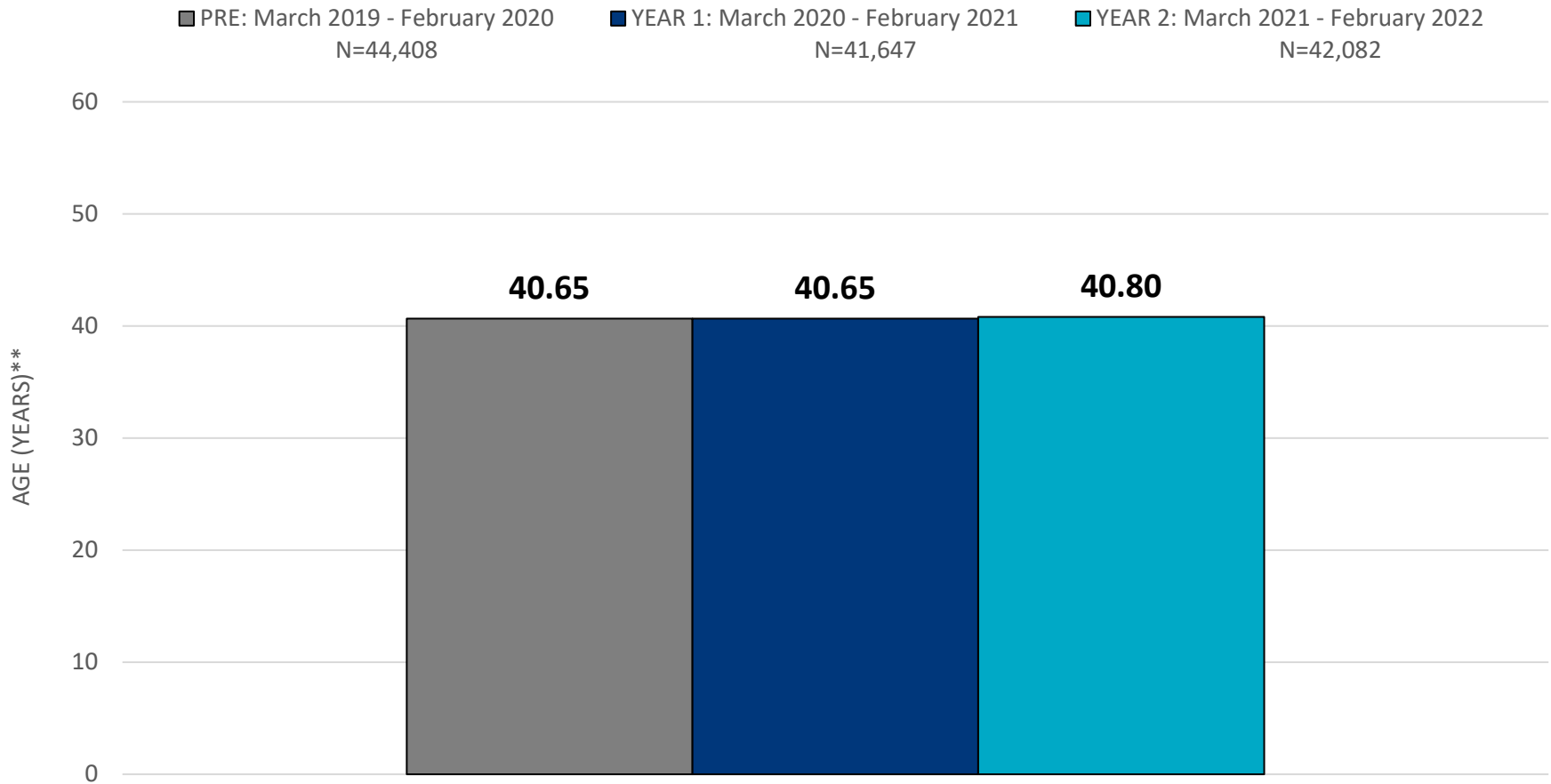


*These numbers represent unique clients within this timepoint that received any service within each time period.

Clients Served: Age

The **mean age of clients served remained stable** when comparing the **first year and second year of the pandemic to the year prior to the pandemic.**

Age of Clients Before and During Pandemic*



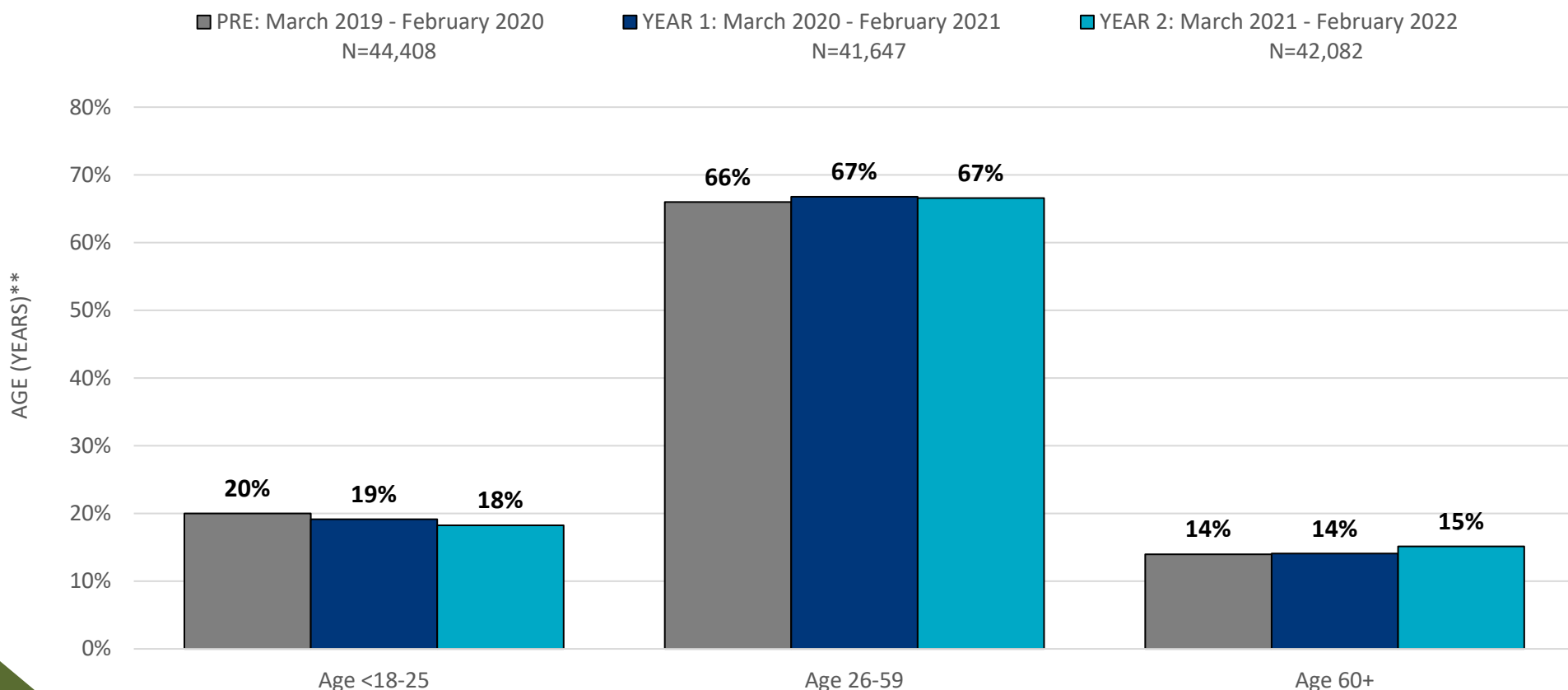
*These numbers represent unique clients within this timepoint that received any service within each time period.

**Age is calculated based on the beginning of each time period.

Clients Served: Age

The proportion of clients served by the AOA SOC who are **25 years of age and younger decreased** from 20% during the year before the pandemic to 19% during the first year of the pandemic to 18% during the second year of the pandemic. The clients served by the AOA SOC ages **between 26 and 59 years** and ages of **60 or more years slightly increased** from the year prior to the pandemic and across years 1 and 2 of the pandemic.

Age of Clients Before and During Pandemic*



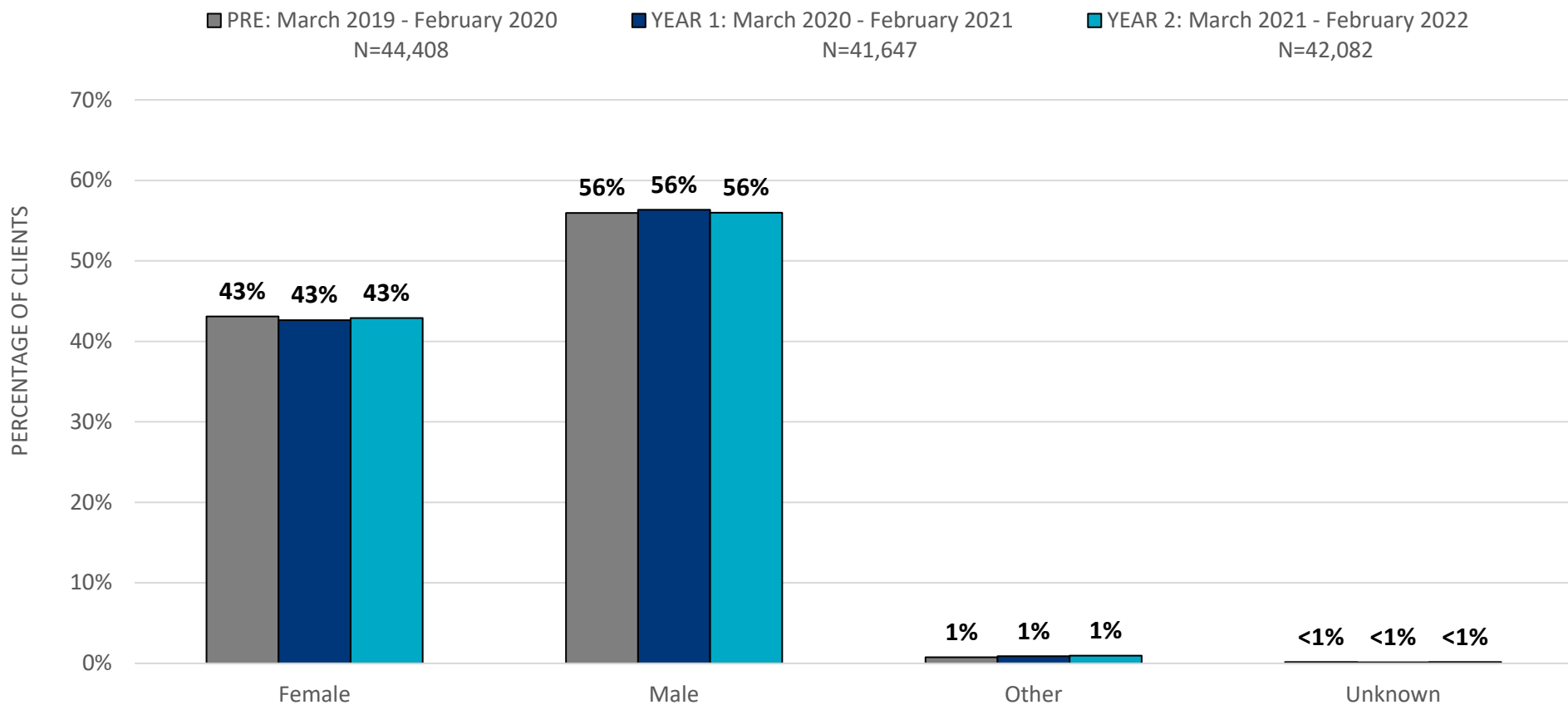
*These numbers represent unique clients within this timepoint that received any service within each time period.

**Age is calculated based on the beginning of each time period.

Clients Served: Gender

The **gender proportions** of clients served by the AOA SOC **remained stable** from the year prior to the pandemic and across years 1 and 2 of the pandemic.

Gender of Clients Before and During Pandemic*

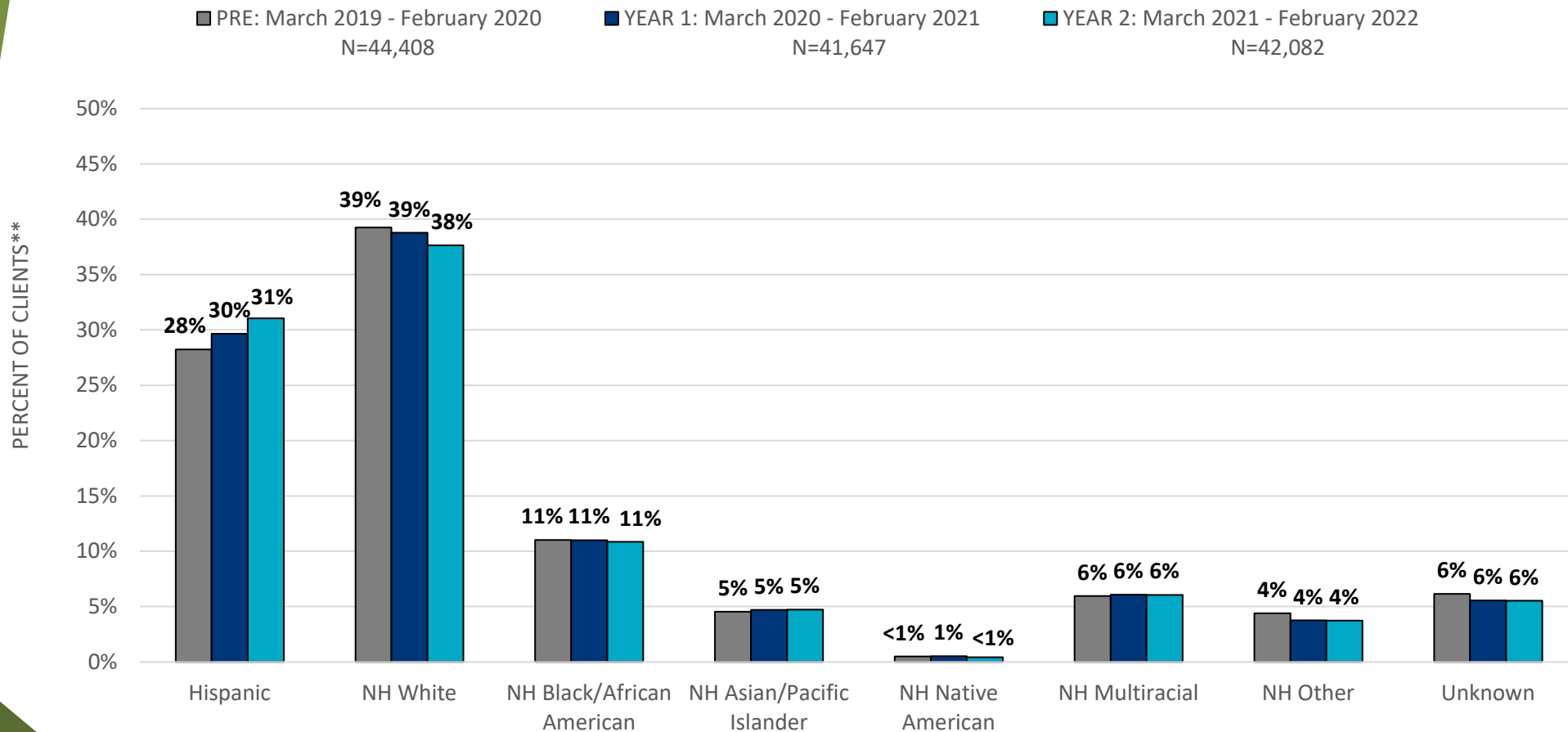


*These numbers represent unique clients within this timepoint that received any service (except FFS IP) within each time period.

Clients Served: Race and Ethnicity

The proportion **Hispanic clients served slightly increased** each year of the pandemic (30% to 31%) compared to the year before the pandemic (28%). The proportions of the other racial/ethnic categories **remained relatively stable** during both years of the pandemic.

Race/Ethnicity of Clients Before and During Pandemic*



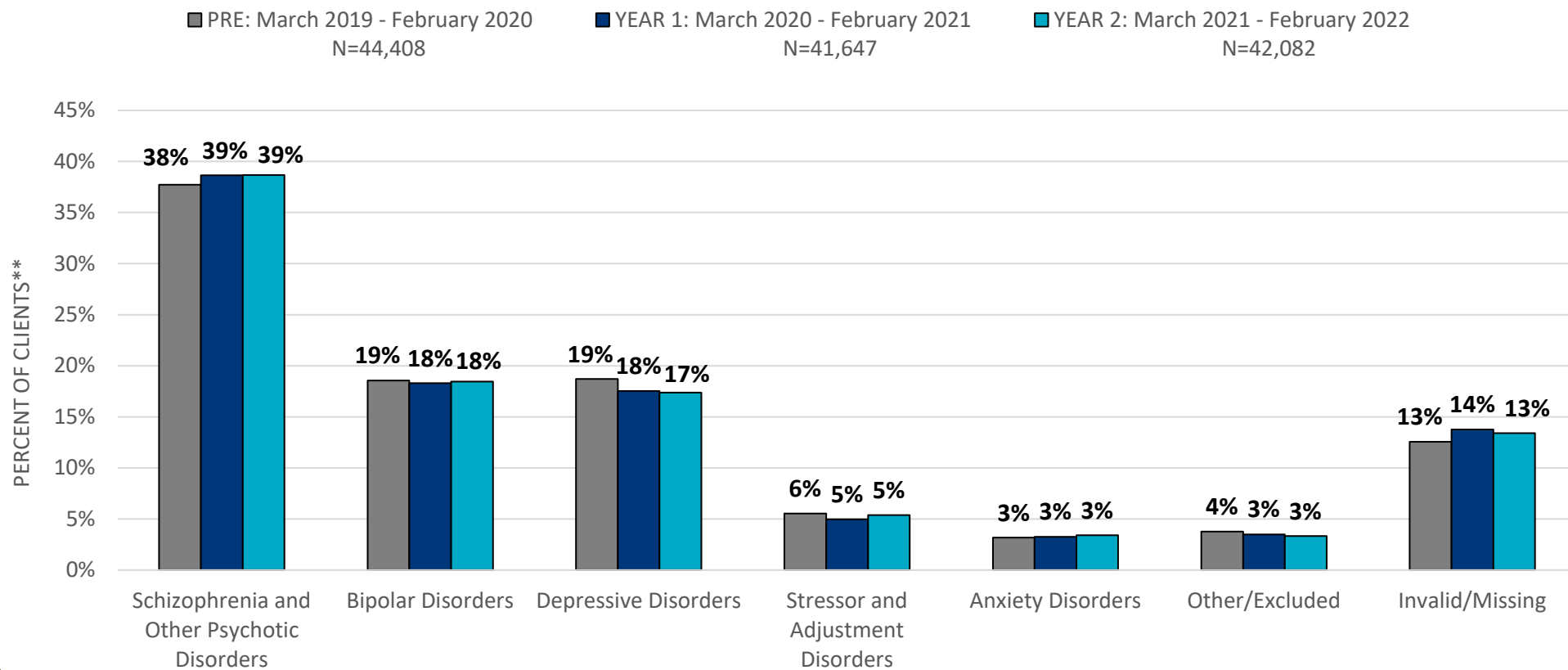
*These numbers represent unique clients within this timepoint that received any service within each time period.

**Race is the most recent for each timepoint (cutoff of 12/31/19, 12/31/20, or 12/31/21).

Clients Served: Primary Diagnosis

Compared to the year before the pandemic, the proportion of clients with a **primary diagnosis of Depressive Disorders decreased** from 19% prior to the pandemic to 18% during the first year of the pandemic and 17% during the second year of the pandemic. The proportions of the other primary diagnosis categories **remained relatively stable** during both years of the pandemic.

Primary Diagnosis Before and During Pandemic*



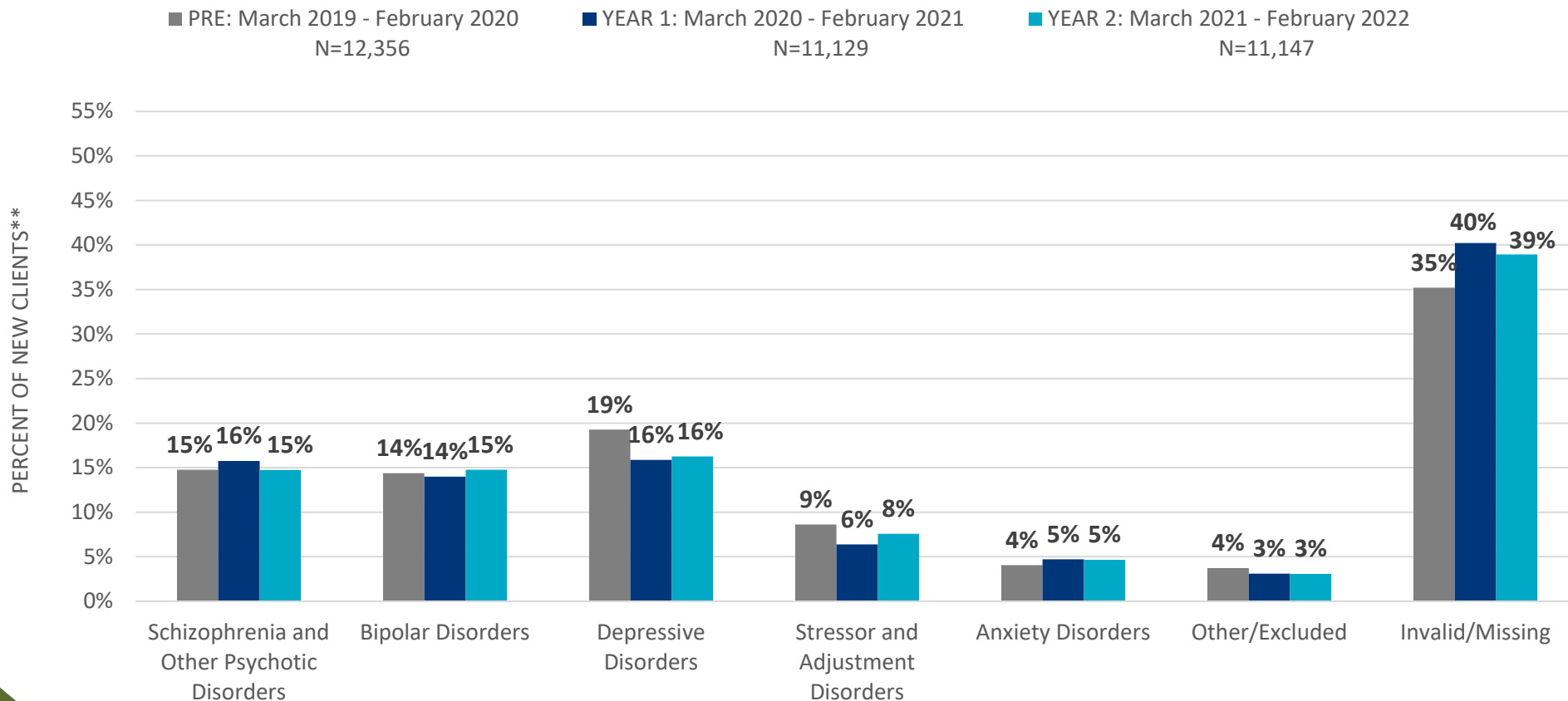
*These numbers represent unique clients within this timepoint that received any service within each time period.

** Diagnosis is the most recent for each timepoint (cutoff of 2/29/20, 2/28/21, or 2/28/22).

Clients Served: Primary Diagnosis New Clients

Compared to the year before the pandemic, the proportion of new clients with a **primary diagnosis of Depressive Disorders decreased** from 19% prior to the pandemic to 16% during both years of the pandemic. The proportions of the other primary diagnosis categories **remained relatively stable with slight fluctuations** during both years of the pandemic.

New Clients Primary Diagnosis Before and During Pandemic*



*These numbers represent unique clients within this timepoint that received any service within each time period who had not received any services before the time period..

** Diagnosis is the most recent for each timepoint (cutoff of 2/29/20 or 2/28/21).

Clients Served by Geographic Region

There are 41 sub-regional areas (SRAs) in San Diego. SRAs are aggregations of census blocks that approximate Health and Human Services Agency (HHSA) regions (which are based on zip codes). The **Palomar-Julian, Pauma, Coronado, Lakeside, and Lemon Grove** areas appear to have lost the greatest percentage of clients during the pandemic. **On average, neighborhood clinics served 9% fewer clients during the pandemic.**

Neighborhoods	PRE: March - February 2020	YEAR 1: March - February 2021	YEAR 2: March - February 2022	Clients Served Change (Pre to Year 1)	Clients Served Change (Pre to Year 2)	Percent Change (Pre to Year 1)	Percent Change (Pre to Year 2)
Palomar-Julian	28	28	15	0	-13	0.0%	-46.4%
Pauma	54	46	40	-8	-14	-14.8%	-25.9%
Coronado	108	96	82	-12	-26	-11.1%	-24.1%
Lakeside	588	472	470	-116	-118	-19.7%	-20.1%
Lemon Grove	610	522	503	-88	-107	-14.4%	-17.5%
El Cajon	2307	1914	1918	-393	-389	-17.0%	-16.9%
Harbison Crest	1451	1220	1240	-231	-211	-15.9%	-14.5%
Central SD	6797	6232	5837	-565	-960	-8.3%	-14.1%
Santee	730	640	632	-90	-98	-12.3%	-13.4%
La Mesa	883	770	785	-113	-98	-12.8%	-11.1%
Coastal	497	472	445	-25	-52	-5.0%	-10.5%
Southeast SD	2925	2689	2640	-236	-285	-8.1%	-9.7%
Ramona	372	335	340	-37	-32	-9.9%	-8.6%
Carlsbad	650	562	603	-88	-47	-13.5%	-7.2%
Alpine	170	141	158	-29	-12	-17.1%	-7.1%
Mid-City	3532	3247	3287	-285	-245	-8.1%	-6.9%
North SD	698	625	650	-73	-48	-10.5%	-6.9%
University	258	252	243	-6	-15	-2.3%	-5.8%
National City	928	834	884	-94	-44	-10.1%	-4.7%
San Marcos	699	632	669	-67	-30	-9.6%	-4.3%

Clients Served by Geographic Region

The **Laguna-Pine Valley, Mountain Empire, Sweetwater, Chula Vista, and Vista** areas gained the **most clients** during the pandemic, but some of these areas served a small number of clients. This finding should be interpreted with caution.

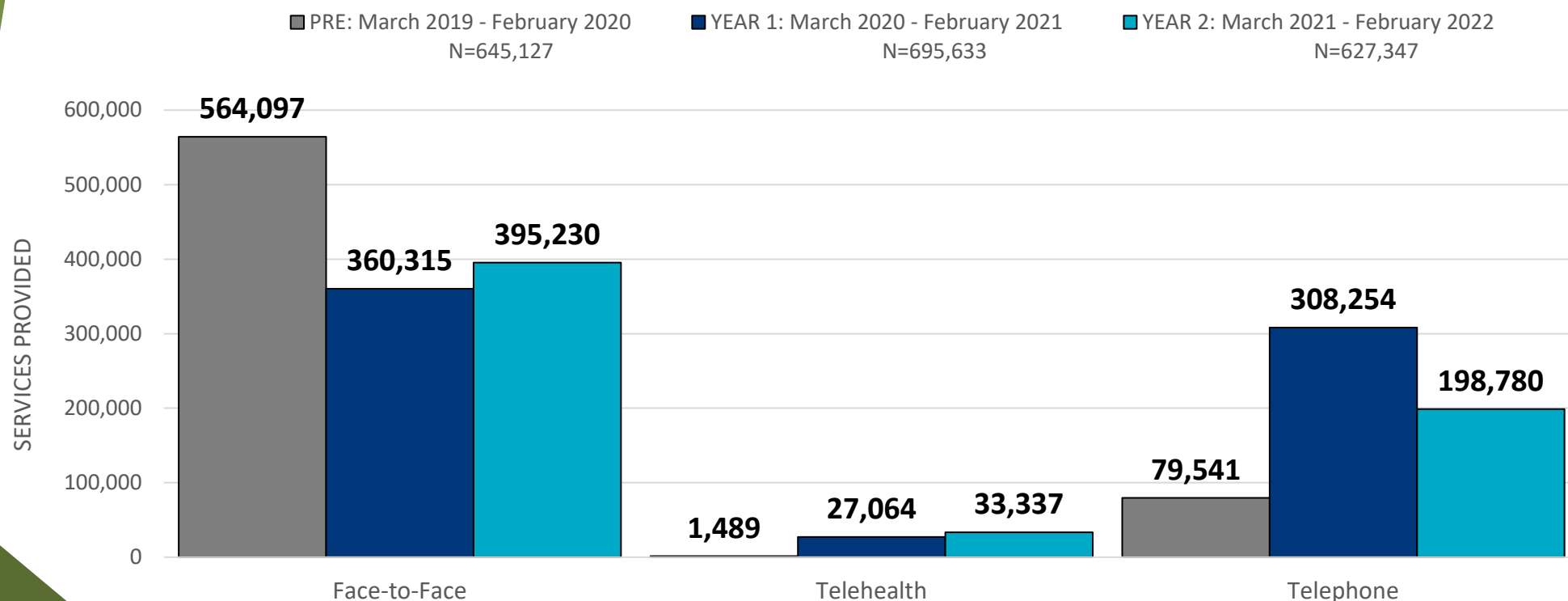
Neighborhoods	PRE: March - February 2020	YEAR 1: March - February 2021	YEAR 2: March - February 2022	Clients Served Change (Pre to Year 1)	Clients Served Change (Pre to Year 2)	Percent Change (Pre to Year 1)	Percent Change (Pre to Year 2)
Fallbrook	461	433	444	-28	-17	-6.1%	-3.7%
Spring Valley	938	885	906	-53	-32	-5.7%	-3.4%
San Dieguito	387	384	375	-3	-12	-0.8%	-3.1%
Jamul	156	132	152	-24	-4	-15.4%	-2.6%
Peninsula	387	376	378	-11	-9	-2.8%	-2.3%
Kearny Mesa	2880	3522	2821	642	-59	22.3%	-2.0%
Oceanside	2042	1891	2002	-151	-40	-7.4%	-2.0%
Del Mar-Mira Mesa	748	680	746	-68	-2	-9.1%	-0.3%
Escondido	2281	2127	2275	-154	-6	-6.8%	-0.3%
Elliott-Navajo	595	589	602	-6	7	-1.0%	1.2%
Anza-Borrego Springs	69	67	70	-2	1	-2.9%	1.4%
Poway	390	412	396	22	6	5.6%	1.5%
South Bay	1764	1700	1792	-64	28	-3.6%	1.6%
Valley Center	140	133	145	-7	5	-5.0%	3.6%
Vista	1585	1518	1658	-67	73	-4.2%	4.6%
Chula Vista	1941	1875	2085	-66	144	-3.4%	7.4%
Sweetwater	570	559	622	-11	52	-1.9%	9.1%
Mountain Empire	104	95	114	-9	10	-8.7%	9.6%
Laguna-Pine Valley	16	14	21	-2	5	-12.5%	31.3%
Miramar	<5	<5	<5	-	-	-	-
Pendleton	<5	8	7	-	-	-	-

Service Utilization

Services by Contact Type

During the year prior to the pandemic there were 564,097 **face-to-face services** provided. Compared to the year prior to the pandemic, there was a **reduction in face-to-face services by 36%** for the **first year** of the pandemic and **30%** for the **second year** of the pandemic. Also, there was a **288% increase** during the **first year** of the pandemic and a **150% increase** during the **second year** of the pandemic of **telephone services** provided compared to the year prior to the pandemic. Lastly, when compared to the year before the pandemic, there was a **1,718% increase** during the **first year** of the pandemic and a **2,139% increase** during the **second year** of the pandemic of **telehealth services** provided.

AOA Contact Type Before and During Pandemic



*Excludes correspondence, TTY and no contact services

Face-to-Face Services by Month

The largest reductions in the numbers of face-to-face services during the **first year** of the pandemic were observed in **April 2020** (49%), **May 2020** (43%), and **January 2021** (41%), relative to the corresponding month in the year before the pandemic. During the **second year** of the pandemic, the largest reductions in face-to-face services relative to the year before the pandemic was observed in **January 2022** (47%), **February 2022** (46%) and **May 2021** (32%).

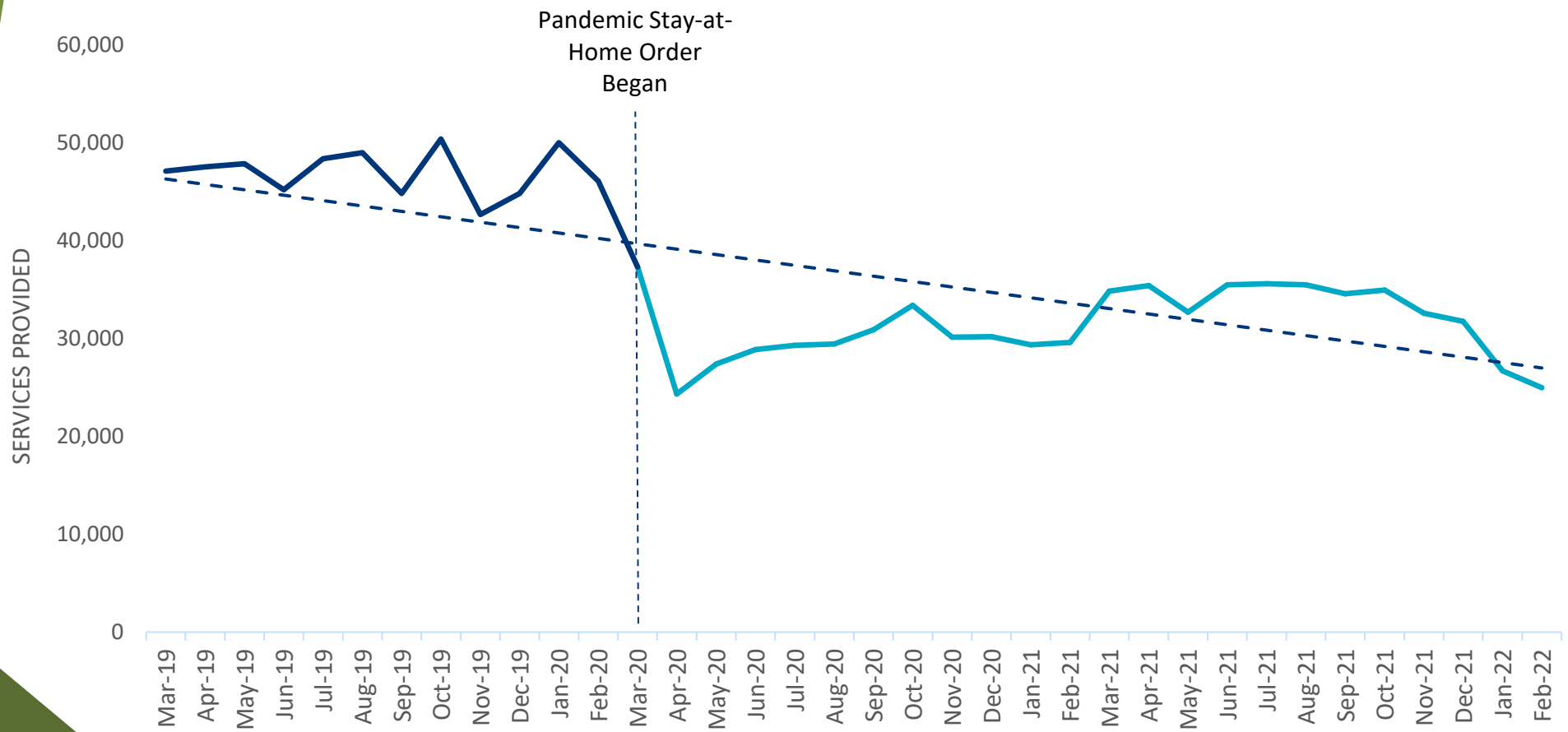
Month	Pre: March 2019 – Feb. 2020		Year 1: March 2020 – Feb. 2021		Year 2: March 2021- Feb. 2022	
	Contacts	% Change†	Contacts	% Change†	Contacts	% Change†
March	47,127	-	37,319	21% ↓	34,868	26% ↓
April	47,546	-	24,336	49% ↓	35,424	25% ↓
May	47,886	-	27,399	43% ↓	32,710	32% ↓
June	45,216	-	28,896	36% ↓	35,507	21% ↓
July	48,401	-	29,305	39% ↓	35,618	26% ↓
August	49,021	-	29,445	40% ↓	35,492	28% ↓
September	44,849	-	30,907	31% ↓	34,583	23% ↓
October	50,405	-	33,404	34% ↓	34,971	31% ↓
November	42,694	-	30,149	29% ↓	32,607	24% ↓
December	44,825	-	30,189	33% ↓	31,761	29% ↓
January	50,038	-	29,365	41% ↓	26,707	47% ↓
February	46,089	-	29,601	36% ↓	24,982	46% ↓
Total	564,097	-	360,315	36% ↓	395,230	17% ↓

†Percent change is calculated in comparison to the number of contacts during the year before the pandemic.

Face-to-Face Services by Month

As shown below, the AOA SOC face-to-face services trended downward from **March 2019** to **February 2022**. The months recording the total **highest number of face-to-face services** were **October 2019 and January 2020**. The months with the total **lowest number of face-to-face services** were **April and May 2020**.

AOA SOC Face-to-Face Services Before and During the Pandemic



Telehealth Services by Month

Utilization of **telehealth services increased** in each month during the first two years of the pandemic, relative to each respective month during the year before the pandemic. The **largest increases** in the number of telehealth services provided in the AOA SOC during the **first year** of the pandemic, relative to the prior year, were observed during **April 2020** (380%), **December 2020** (354%), and **September 2020** (348%). During **year 2**, the **largest increases** in utilization of telehealth services compared to the same month of the year before the pandemic were noted in **March 2021** (348%), **April 2021** (268%), and **June 2021** (209%).

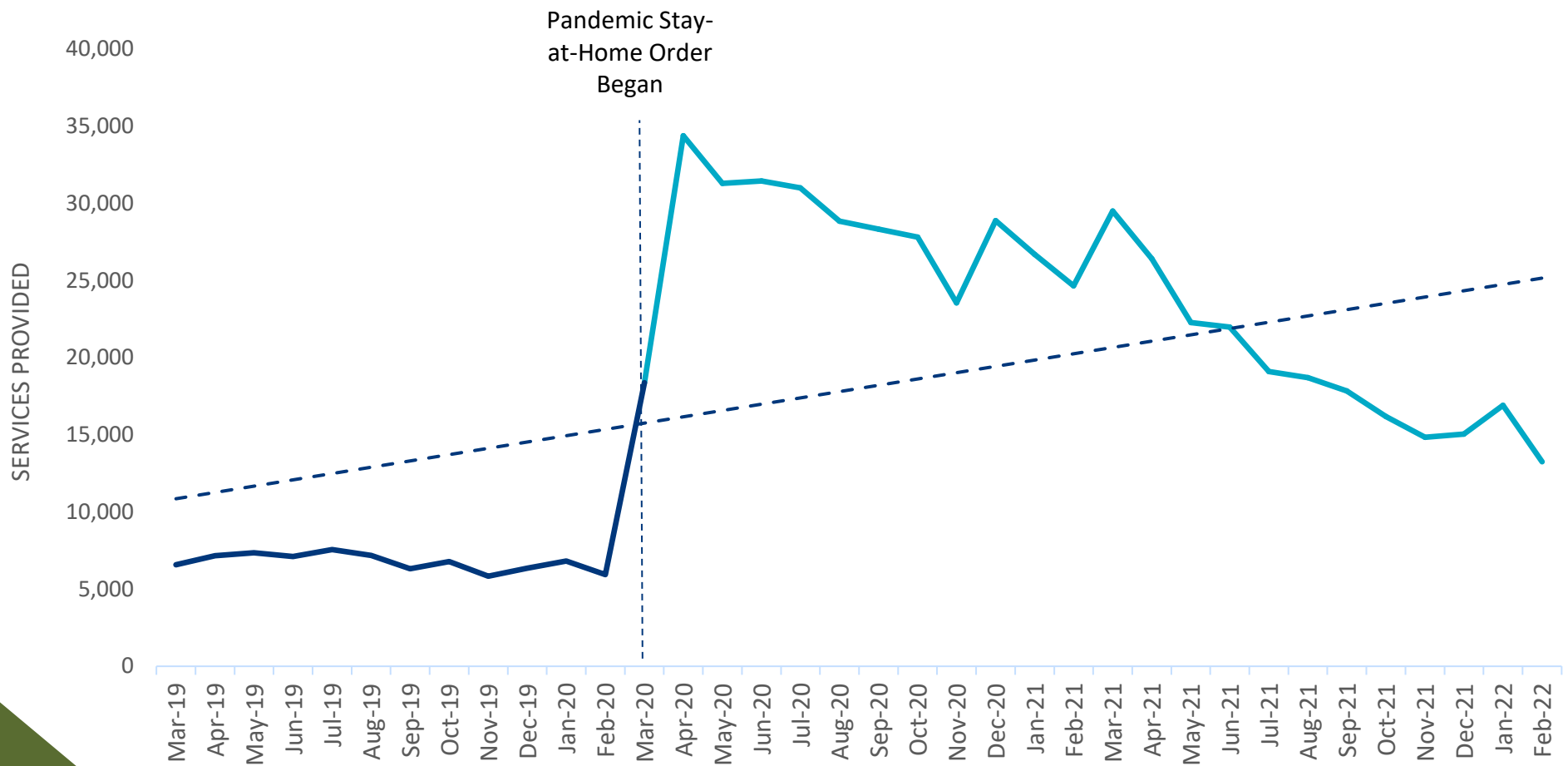
Month	Pre: March 2019 – Feb. 2020		Year 1: March 2020 – Feb. 2021		Year 2: March 2021- Feb. 2022	
	Contacts	% Change†	Contacts	% Change†	Contacts	% Change†
March	6,584	-	18,374	179% ↑	29,509	348% ↑
April	7,171	-	34,389	380% ↑	26,425	268% ↑
May	7,357	-	31,301	325% ↑	22,277	203% ↑
June	7,109	-	31,454	342% ↑	21,986	209% ↑
July	7,569	-	31,005	310% ↑	19,113	153% ↑
August	7,175	-	28,849	302% ↑	18,702	161% ↑
September	6,320	-	28,330	348% ↑	17,845	182% ↑
October	6,785	-	27,818	310% ↑	16,192	139% ↑
November	5,833	-	23,562	304% ↑	14,844	154% ↑
December	6,357	-	28,880	354% ↑	15,058	137% ↑
January	6,827	-	26,700	291% ↑	16,918	148% ↑
February	5,943	-	24,656	315% ↑	13,248	123% ↑
Total	81,030	-	335,318	314% ↑	232,117	186% ↑

†Percent change is calculated in comparison to the number of contacts during the year before the pandemic.

Telephone/Telehealth Services by Month

As shown below, Telephone/Telehealth services trended sharply upward from **February 2020** to **April 2020** and have **trended downward** from **April 2020** to **February 2022**. The month recording the total **highest number of Telephone/Telehealth services** was **April 2020**.

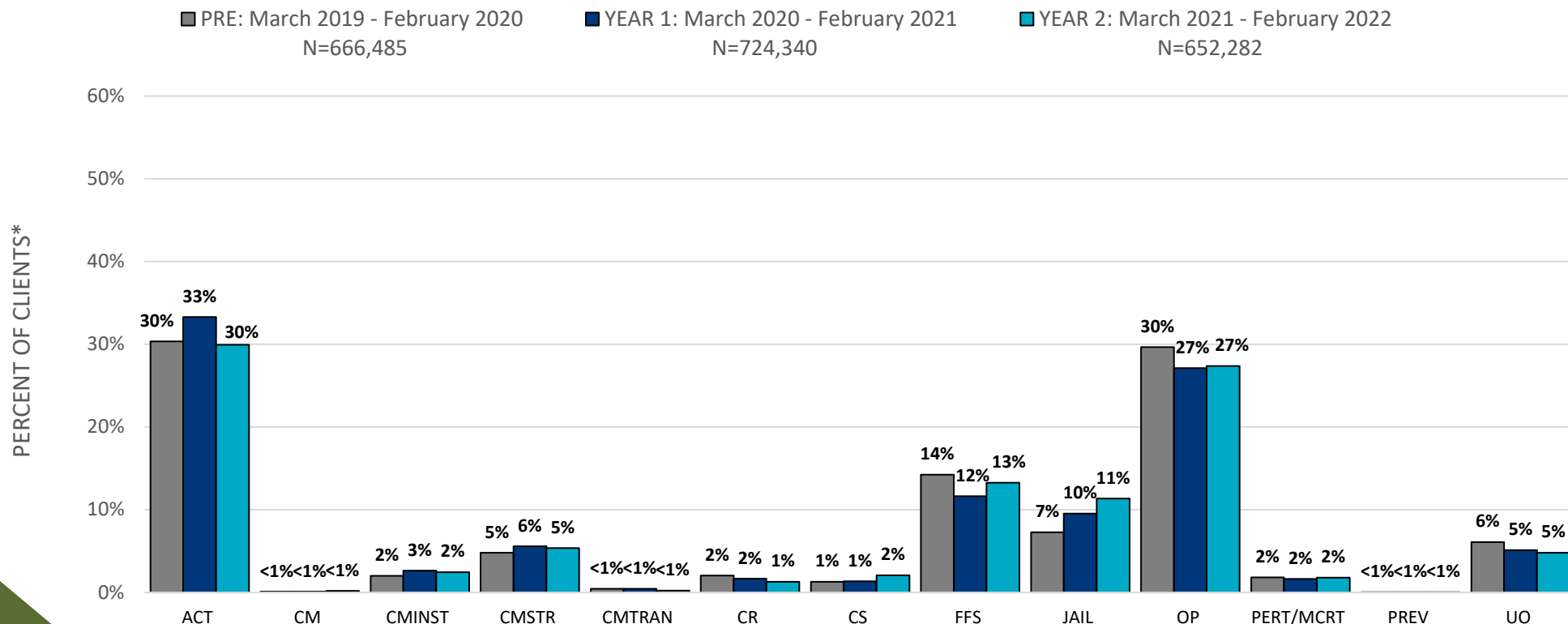
AOA Telephone/Telehealth Services Before and During the Pandemic



Services by Level of Care

Compared to the year before the pandemic, the proportion of **jail services utilized increased** from 7% prior to the pandemic to 10% during the **first year** of the pandemic and 11% during the **second year** of the pandemic. Also, the proportion of **outpatient services utilized decreased** from 30% prior to the pandemic to 27% during the **first year** and **second year** of the pandemic. The proportions of the other services utilized by type **remained relatively stable with slight fluctuations** during both years of the pandemic.

AOA Services by LOC Before and During Pandemic

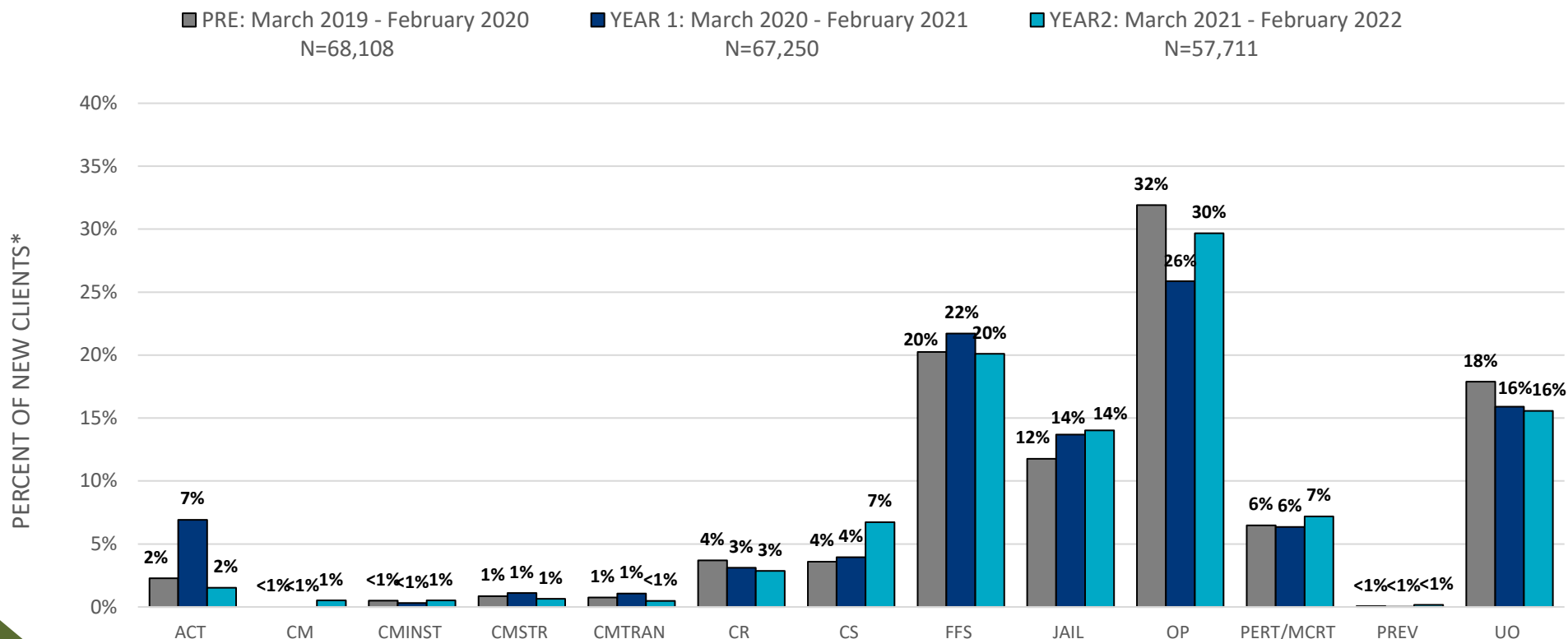


*These numbers represent unique clients within this timepoint that received any service within each time period.

New Client Services by Level of Care

The proportion of **crisis stabilization services and jail services utilized by new clients increased** during the **first year** and the **second year** of the pandemic when compared to the year prior to the pandemic. Also, compared to the year before the pandemic, the proportion of **urgent outpatient services utilized by new clients decreased** from 18% prior to the pandemic to 16% during the **first year** and **second year** of the pandemic. The proportions of the other services utilized by type **remained relatively stable with some fluctuations** during both years of the pandemic.

AOA New Client Services by LOC Before and During Pandemic

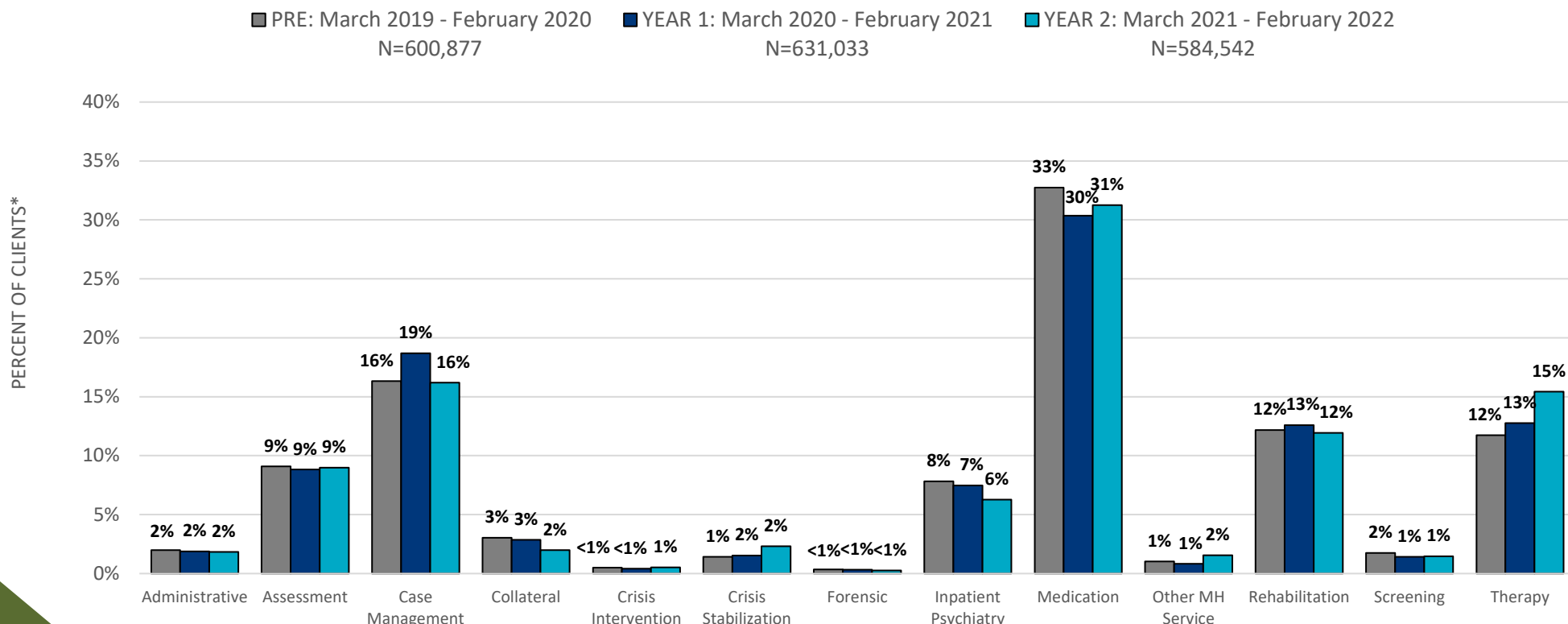


*These numbers represent unique clients within this timepoint that received any service within each time period.

Services by Type

Compared to the year before the pandemic, the proportion of **therapy services utilized increased** from 12% prior to the pandemic to 13% during the **first year** of the pandemic and 15% during the **second year** of the pandemic. Also, the proportion of **inpatient psychiatric services utilized decreased** from 8% prior to the pandemic to 7% during the **first year** of the pandemic and to 6% during the **second year** of the pandemic. The proportions of the other services utilized by type **remained relatively stable with slight fluctuations** during both years of the pandemic.

AOA Services by Service Type Before and During Pandemic

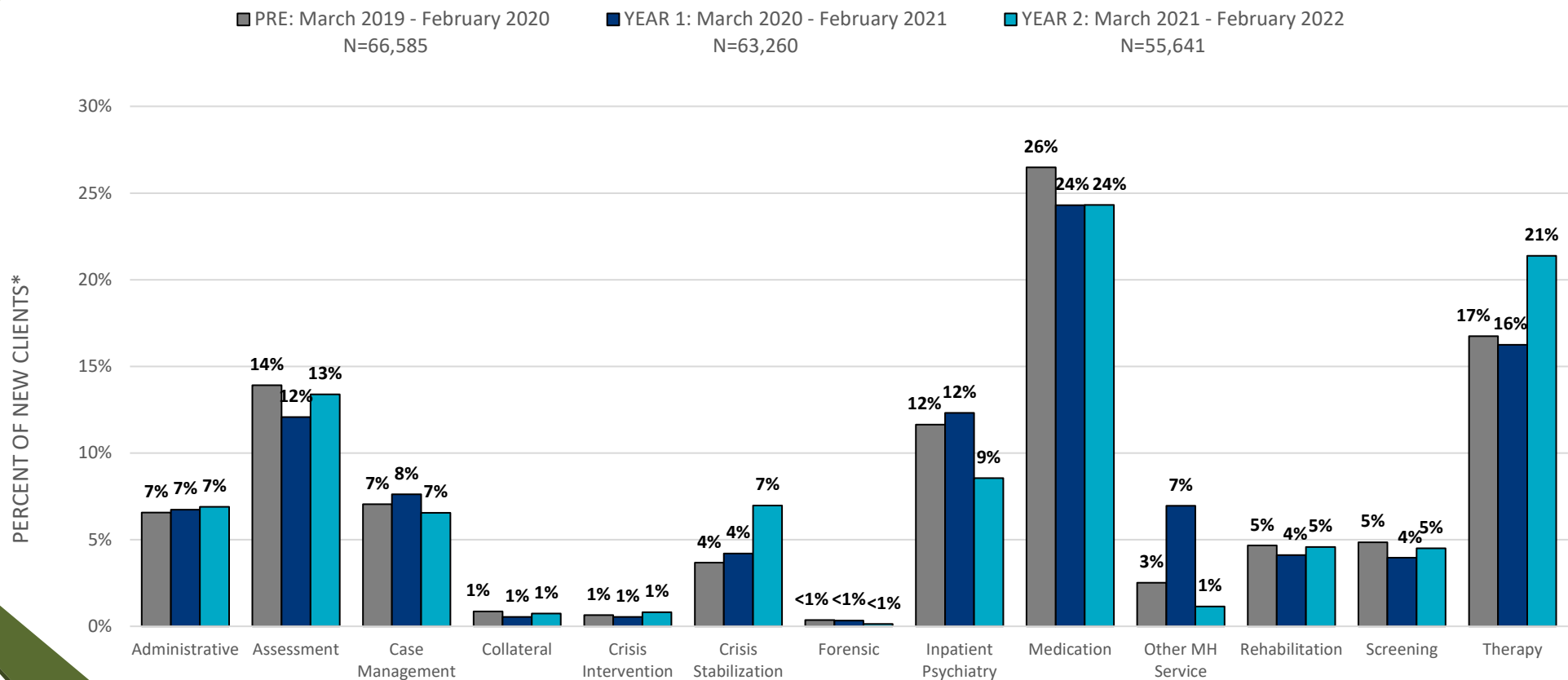


*These numbers represent unique clients within this timepoint that received any service within each time period.

New Client Services by Type

Compared to the year before the pandemic, the proportion of **crisis stabilization services utilized by new clients increased** from 4% prior to the pandemic and during the **first year** of the pandemic to 7% during the **second year** of the pandemic. Also, the proportion of **medication services utilized by new clients decreased** from 26% prior to the pandemic to 24% during the **first year** and the **second year** of the pandemic. The proportions of the other services utilized by type **remained relatively stable with some fluctuations** during both years of the pandemic.

AOA New Client Services by LOC Before and During Pandemic

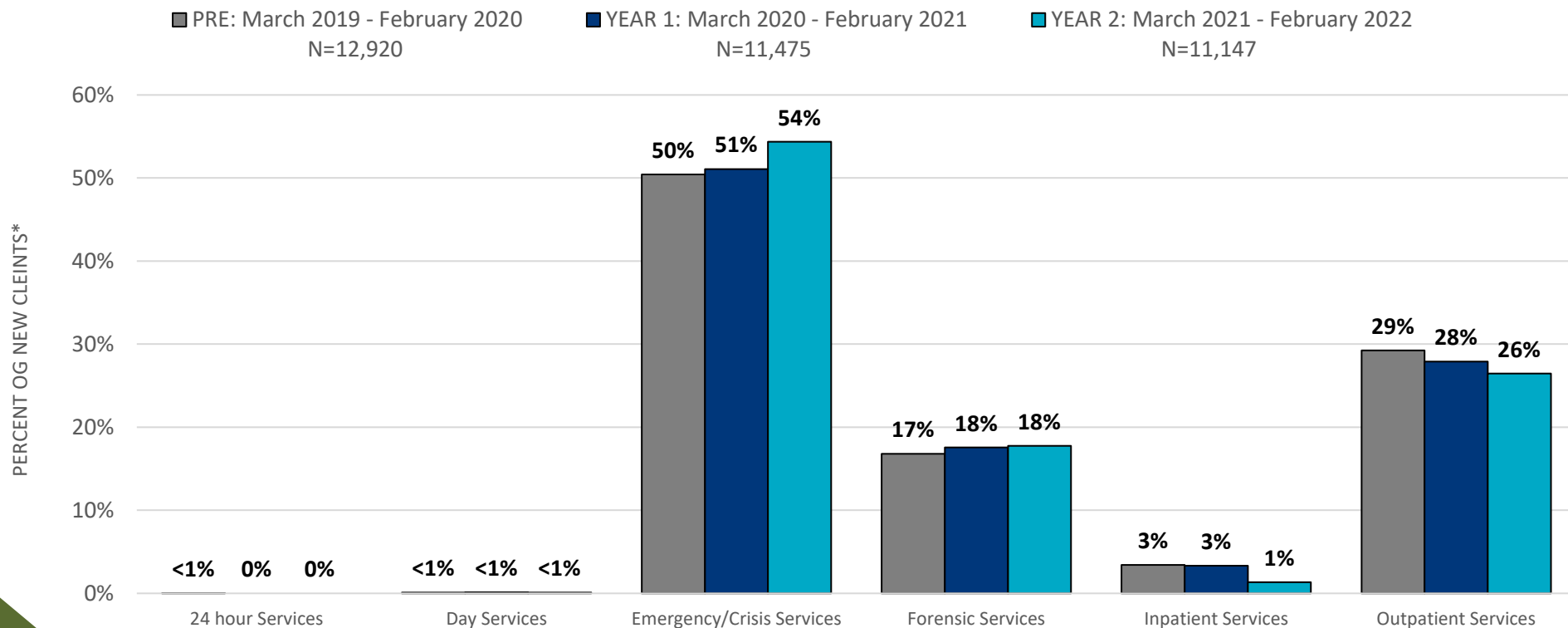


*These numbers represent unique clients within this timepoint that received any service within each time period.

New Client First Service

Compared to the year before the pandemic, the proportion of **emergency/crisis services as a new client's first service into the AOA SOC increased** from 50% prior to the pandemic to 51% during the **first year** of the pandemic and 54% during the **second year** of the pandemic. Also, the proportion of **outpatient services as a new client's first service into the AOA SOC decreased** from 29% prior to the pandemic to 28% during the **first year** of the pandemic and to 26% during the **second year** of the pandemic. The proportions of the other services utilized by type **remained relatively stable with slight fluctuations** during both years of the pandemic.

AOA New Clients First Service Before and During Pandemic



*These numbers represent unique clients within this timepoint that received any service within each time period.

PERT Services

The largest reductions in the numbers of **PERT services** during the **first year** of the pandemic were observed in **July 2020** (16%) and **January 2021** (13%), relative to the corresponding month in the year before the pandemic. A **13% increase** in **PERT services** was observed in **April 2020**, relative to April 2019. During the **second year** of the pandemic, the **largest reductions** in **PERT services** relative to the year before the pandemic was observed in **August 2021** (13%), and **January 2022** (27%). A **22% increase** in PERT services was observed in **March 2021**, relative to March 2019.

Month	Pre: March 2019 – Feb. 2020		Year 1: March 2020 – Feb. 2021		Year 2: March 2021- Feb. 2022	
	Contacts	% Change†	Contacts	% Change†	Contacts	% Change†
March	926	-	998	7.8% ↑	1,126	21.6% ↑
April	917	-	1,038	13.2% ↑	1,034	12.8% ↑
May	1,034	-	1,044	1.0% ↑	976	5.6% ↓
June	960	-	913	4.9% ↓	1,019	6.1% ↑
July	1,116	-	936	16.1% ↓	977	12.5% ↓
August	1,116	-	1,016	9.0% ↓	967	13.4% ↓
September	1,004	-	1,049	4.5% ↑	1,016	1.2% ↑
October	1,115	-	1,135	1.8% ↑	1,002	10.1% ↓
November	993	-	931	6.2% ↓	899	9.5% ↓
December	875	-	892	1.9% ↑	849	3.0% ↓
January	1,048	-	910	13.2% ↓	763	27.2% ↓
February	993	-	977	1.6% ↓	911	8.3% ↓
Total	12,097	-	11,839	2.1% ↓	11,539	4.6% ↓

†Percent change is calculated in comparison to the number of contacts during the year before the pandemic.

Urgent Outpatient Services

Utilization of **urgent outpatient services decreased** in each month, during the **first two years of the pandemic**, except October and November 2020, relative to each respective month during the year before the pandemic. The **largest reductions** in the number of **urgent outpatient services** provided in the AOA SOC during the **first year** of the pandemic, relative to the prior year, were observed during **January 2021** (29%), **April 2020** (24%), and **February 2021** (20%). During **year 2**, the **largest reductions** in utilization of **urgent outpatient services** compared to the same month of the year before the pandemic were noted in **February 2022** (38%), **January 2022** (37%), and **December 2021** (30%).

Month	Pre: March 2019 – Feb. 2020		Year 1: March 2020 – Feb. 2021		Year 2: March 2021- Feb. 2022	
	Contacts	% Change†	Contacts	% Change†	Contacts	% Change†
March	3,488	-	3,148	9.7% ↓	2,881	17.4% ↓
April	3,513	-	2,665	24.1% ↓	2,810	20.0% ↓
May	3,538	-	3,066	13.3% ↓	2,689	24.0% ↓
June	3,184	-	3,052	4.1% ↓	2,871	9.8% ↓
July	3,460	-	3,384	2.2% ↓	2,970	14.2% ↓
August	3,562	-	3,552	0.3% ↓	3,031	14.9% ↓
September	3,386	-	3,325	1.8% ↓	2,941	13.1% ↓
October	3,310	-	3,722	12.4% ↑	2,446	26.1% ↓
November	2,996	-	3,053	1.9% ↑	2,122	29.2% ↓
December	3,271	-	2,875	12.1% ↓	2,282	30.2% ↓
January	3,540	-	2,527	28.6% ↓	2,240	36.7% ↓
February	3,241	-	2,589	20.1% ↓	2,012	37.9% ↓
Total	40,489	-	36,958	8.7% ↓	31,295	22.7% ↓

†Percent change is calculated in comparison to the number of contacts during the year before the pandemic.

Crisis Stabilization Services

Utilization of **crisis stabilization services increased** in each month, during the **first two years of the pandemic**, except January 2021, relative to each respective month during the year before the pandemic. The **largest increases** in the number of **crisis stabilization services** provided in the AOA SOC during the **first year** of the pandemic, relative to the prior year, were observed during **June 2020** (33%), **July 2020** (28%), and **May 2020** (23%). During **year 2**, the **largest increases** in utilization of **crisis stabilization services** compared to the same month of the year before the pandemic were noted in **November 2021** (98%), **October 2021** (89%), and **December 2021** (83%).

Month	Pre: March 2019 – Feb. 2020		Year 1: March 2020 – Feb. 2021		Year 2: March 2021- Feb. 2022	
	Contacts	% Change†	Contacts	% Change†	Contacts	% Change†
March	676	-	756	11.8% ↑	906	34.0% ↑
April	645	-	722	11.9% ↑	934	44.8% ↑
May	698	-	858	22.9% ↑	1,054	51.0% ↑
June	601	-	797	32.6% ↑	1,008	67.7% ↑
July	677	-	867	28.1% ↑	938	38.6% ↑
August	731	-	869	18.9% ↑	1,012	38.4% ↑
September	694	-	772	11.2% ↑	931	34.1% ↑
October	747	-	826	10.6% ↑	1,409	88.6% ↑
November	705	-	763	8.2% ↑	1,393	97.6% ↑
December	775	-	860	11.0% ↑	1,418	83.0% ↑
January	825	-	780	5.5% ↓	1,402	69.9% ↑
February	713	-	813	14.0% ↑	1,114	56.2% ↑
Total	8,487	-	9,683	14.1% ↑	13,519	59.3% ↑

†Percent change is calculated in comparison to the number of contacts during the year before the pandemic.



Inpatient Psychiatric Admissions

Admissions to Inpatient via Crisis Stabilization

Before the pandemic, there were **2,111 total admissions to inpatient via crisis stabilization**. There was a **9% increase during year 1** and a **2% increase during year 2** in total admissions to inpatient from crisis stabilization when compared to the year prior to the pandemic. **The largest increases** in the numbers of inpatient admissions from crisis stabilization during the **first year** of the pandemic were observed in **June 2020** (62%), **May 2020** (39%), and **July 2020** (29%) relative to the corresponding month in the year prior to the pandemic. During the **second year** of the pandemic, the **largest increases** in inpatient admissions from crisis stabilization relative to the year before the pandemic was observed in **April 2021** (43%), and **June 2021** (34%). Also, there was a **35% decrease** in inpatient admissions was observed in **February 2022**, relative to February 2021.

Month	Pre: March 2019 – Feb. 2020		Year 1: March 2020 – Feb. 2021			Year 2: March 2021- Feb. 2022		
	Contacts	% Change†	Contacts	% Change†		Contacts	% Change†	
March	192	-	179	6.8%	↓	205	6.8%	↑
April	151	-	158	4.6%	↑	216	43.0%	↑
May	165	-	229	38.8%	↑	190	15.2%	↑
June	141	-	228	61.7%	↑	189	34.0%	↑
July	155	-	200	29.0%	↑	199	28.4%	↑
August	193	-	208	7.8%	↑	208	7.8%	↑
September	170	-	157	7.6%	↓	186	9.4%	↑
October	202	-	186	7.9%	↓	176	12.9%	↓
November	162	-	185	14.2%	↑	154	-4.9%	↓
December	192	-	207	7.8%	↑	168	12.5%	↓
January	210	-	186	11.4%	↓	150	28.6%	↓
February	178	-	179	0.6%	↑	115	35.4%	↓
Total	2,111	-	2,302	9.0%	↑	2,156	2.1%	↑

†Percent change is calculated in comparison to the number of contacts during the year before the pandemic.

Inpatient Admissions

Before the pandemic, there were **9,001 total inpatient admissions**. There was a **7% decrease during year 1** and an **12% decrease during year 2** in total inpatient admissions when compared to the year prior to the pandemic. **The largest reductions** in the numbers of inpatient admissions during the **first year** of the pandemic were observed in **January 2021** (21%) and **February 2021** (18%) relative to the corresponding month in the year before the pandemic. A **16% increase** in inpatient admissions was observed in **June 2020**, relative to June 2019. During the **second year** of the pandemic, the **largest reductions** in inpatient admissions relative to the year before the pandemic was observed in **February 2022** (34%), **January 2022** (33%) and **October 2021** (23%).

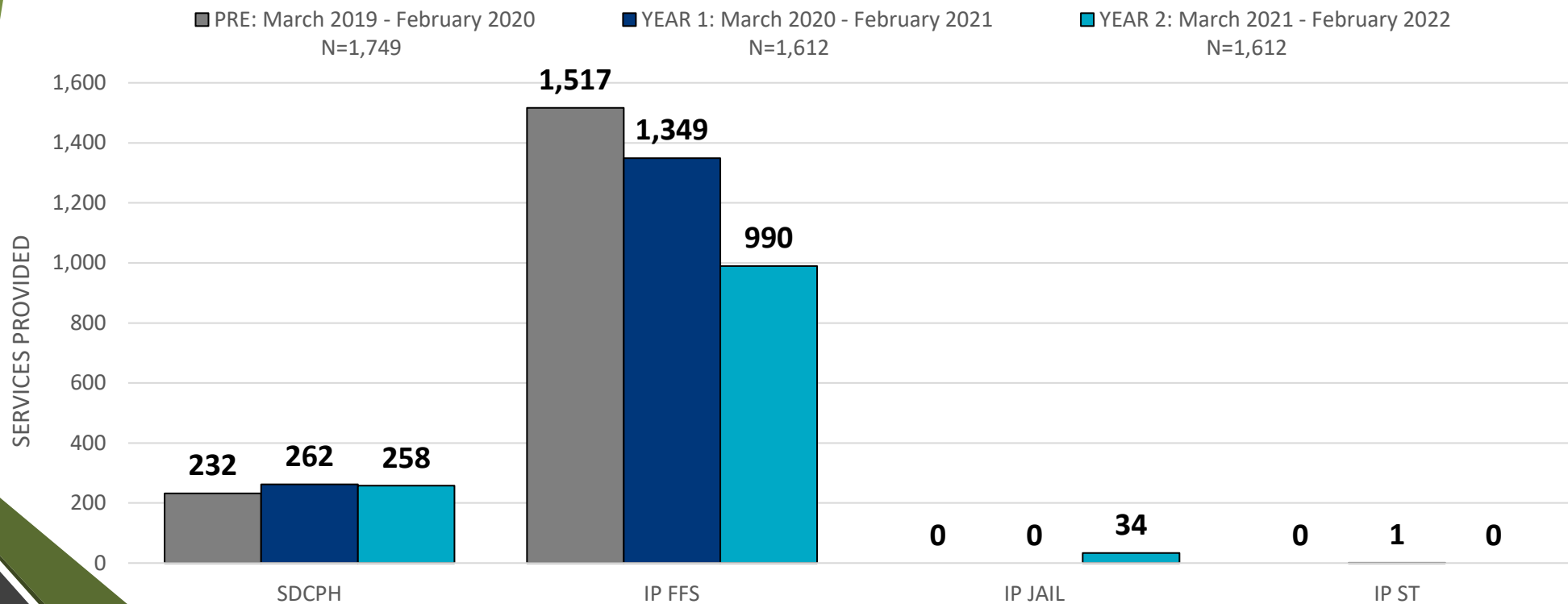
Month	Pre: March 2019 – Feb. 2020		Year 1: March 2020 – Feb. 2021			Year 2: March 2021- Feb. 2022		
	Contacts	% Change†	Contacts	% Change†		Contacts	% Change†	
March	1020	-	914	10.4%	↓	1,029	0.9%	↑
April	707	-	668	5.5%	↓	723	2.3%	↑
May	724	-	750	3.6%	↑	713	1.5%	↓
June	644	-	745	15.7%	↑	664	3.1%	↑
July	708	-	695	1.8%	↓	688	2.8%	↓
August	764	-	745	2.5%	↓	674	11.8%	↓
September	708	-	672	5.1%	↓	643	9.2%	↓
October	787	-	668	15.1%	↓	606	23.0%	↓
November	690	-	667	3.3%	↓	615	10.9%	↓
December	742	-	662	10.8%	↓	604	18.6%	↓
January	777	-	611	21.4%	↓	521	32.9%	↓
February	730	-	599	17.9%	↓	483	33.8%	↓
Total	9,001	-	8,396	6.7%	↓	7,963	11.5%	↓

†Percent change is calculated in comparison to the number of contacts during the year before the pandemic.

30-Day Inpatient Psychiatric Readmissions

Compared to the year before the pandemic, there was an **11% reduction** of **Fee-For-Service (FFS) inpatient readmissions** in the AOA SOC during the first year of the pandemic (1,349 versus 1,517 readmissions) and a **35% reduction** during the second year of the pandemic (990 versus 1,517 readmissions). Also, compared to the year before the pandemic, there was an **13% increase** of **San Diego County Psychiatric Hospital (SDCPH) inpatient readmissions** in the AOA SOC during the first year of the pandemic (262 versus 232 readmissions) and an **11% increase** during the second year of the pandemic (258 versus 232 readmissions).

30-Day Inpatient Psychiatric Readmissions Before and During Pandemic



San Diego County Psychiatric Hospital Admissions

Before the pandemic, there were **1,912 total inpatient admissions** at SDCPH. There was a **1% increase during year 1** and a **7% increase during year 2** in total inpatient admission at SDCPH when compared to the year prior to the pandemic. **The largest increases** in the numbers of inpatient admissions at SDCPH during the **first year** of the pandemic were observed in **June 2020** (33%) and **February 2021** (23%) relative to the corresponding month in the year before the pandemic. A **31% decrease** in inpatient admissions was observed in **April 2020**, relative to April 2019. During the **second year** of the pandemic, the **largest increases** in inpatient admission at SDCPH relative to the year before the pandemic was observed in **July 2021** (28%), **April 2021** (27%) and **June 2021** (26%).

Month	Pre: March 2019 – Feb. 2020		Year 1: March 2020 – Feb. 2021		Year 2: March 2021- Feb. 2022	
	Contacts	% Change†	Contacts	% Change†	Contacts	% Change†
March	224	-	187	16.5% ↓	242	8.0% ↑
April	151	-	105	30.5% ↓	191	26.5% ↑
May	168	-	175	4.2% ↑	177	5.4% ↑
June	136	-	181	33.1% ↑	171	25.7% ↑
July	145	-	167	15.2% ↑	186	28.3% ↑
August	181	-	170	6.1% ↓	194	7.2% ↑
September	157	-	136	13.4% ↓	173	10.2% ↑
October	168	-	150	10.7% ↓	159	5.4% ↓
November	130	-	156	20.0% ↑	143	10.0% ↑
December	152	-	181	19.1% ↑	145	4.6% ↓
January	163	-	152	6.7% ↓	141	13.5% ↓
February	137	-	169	23.4% ↑	117	14.6% ↓
Total	1,912	-	1,929	0.9% ↑	2,039	6.6% ↑

†Percent change is calculated in comparison to the number of contacts during the year before the pandemic.

Inpatient Psychiatric Admissions: Alvarado Parkway

Before the pandemic, there were **337 total inpatient admissions** at **Alvarado Parkway**. There was a **26% increase during year 1** and a **23% increase during year 2** in total inpatient admission at **Alvarado Parkway** when compared to the year prior to the pandemic.

Month	Pre: March 2019 – Feb. 2020		Year 1: March 2020 – Feb. 2021		Year 2: March 2021- Feb. 2022	
	Contacts	% Change†	Contacts	% Change†	Contacts	% Change†
March	44	-	45	2.3% ↑	54	22.7% ↑
April	27	-	42	55.6% ↑	42	55.6% ↑
May	22	-	38	72.7% ↑	32	45.5% ↑
June	17	-	25	47.1% ↑	30	76.5% ↑
July	28	-	27	3.6% ↓	53	89.3% ↑
August	23	-	39	69.6% ↑	25	8.7% ↑
September	18	-	31	72.2% ↑	36	100.0% ↑
October	32	-	33	3.1% ↑	30	6.3% ↓
November	18	-	37	105.6% ↑	26	44.4% ↑
December	27	-	46	70.4% ↑	28	3.7% ↑
January	38	-	36	5.3% ↓	27	28.9% ↓
February	43	-	27	37.2% ↓	31	27.9% ↓
Total	337	-	426	26.4% ↑	414	22.8% ↑

†Percent change is calculated in comparison to the number of contacts during the year before the pandemic.

Inpatient Psychiatric Admissions: Alvarado

Before the pandemic, there were **114 total inpatient admissions** at **Alvarado**. There was a **50% decrease during year 1** and a **22% decrease during year 2** in total inpatient admission at **Alvarado** when compared to the year prior to the pandemic.

Month	Pre: March 2019 – Feb. 2020		Year 1: March 2020 – Feb. 2021		Year 2: March 2021- Feb. 2022	
	Contacts	% Change†	Contacts	% Change†	Contacts	% Change†
March	10	-	15	50.0% ↑	19	90.0% ↑
April	11	-	6	45.5% ↓	5	54.5% ↓
May	13	-	7	46.2% ↓	6	53.8% ↓
June	10	-	6	40.0% ↓	4	60.0% ↓
July	5	-	1	80.0% ↓	5	0.0% =
August	8	-	0	100.0% ↓	10	25.0% ↑
September	12	-	0	100.0% ↓	3	75.0% ↓
October	5	-	0	100.0% ↓	8	60.0% ↑
November	9	-	5	44.4% ↓	8	11.1% ↓
December	6	-	6	0.0% =	13	116.7% ↑
January	10	-	5	50.0% ↓	4	60.0% ↓
February	15	-	6	60.0% ↓	4	73.3% ↓
Total	114	-	57	50.0% ↓	89	21.9% ↓

†Percent change is calculated in comparison to the number of contacts during the year before the pandemic.

Inpatient Psychiatric Admissions: Aurora

Before the pandemic, there were **52 total inpatient admissions** at **Aurora**. There was a **38% decrease during year 1** and a **25% decrease during year 2** in total inpatient admission at **Aurora** when compared to the year prior to the pandemic.

Month	Pre: March 2019 – Feb. 2020		Year 1: March 2020 – Feb. 2021		Year 2: March 2021- Feb. 2022	
	Contacts	% Change†	Contacts	% Change†	Contacts	% Change†
March	4	-	1	75.0% ↓	4	0.0% =
April	3	-	7	133.3% ↑	2	33.3% ↓
May	1	-	4	300.0% ↑	3	200.0% ↑
June	5	-	5	0.0% =	2	60.0% ↓
July	2	-	3	50.0% ↑	2	0.0% =
August	7	-	7	0.0% =	2	71.4% ↓
September	4	-	0	100.0% ↓	2	50.0% ↓
October	5	-	1	80.0% ↓	2	60.0% ↓
November	2	-	1	50.0% ↓	2	0.0% =
December	3	-	1	66.7% ↓	7	133.3% ↑
January	11	-	2	81.8% ↓	6	45.5% ↓
February	5	-	0	100.0% ↓	5	0.0% =
Total	52	-	32	38.5% ↓	39	25.0% ↓

†Percent change is calculated in comparison to the number of contacts during the year before the pandemic.

Inpatient Psychiatric Admissions: Bayview

Before the pandemic, there were **1,535 total inpatient admissions** at **Bayview**. There was a **17% decrease during year 1** and a **35% decrease during year 2** in total inpatient admission at **Bayview** when compared to the year prior to the pandemic.

Month	Pre: March 2019 – Feb. 2020		Year 1: March 2020 – Feb. 2021		Year 2: March 2021- Feb. 2022	
	Contacts	% Change†	Contacts	% Change†	Contacts	% Change†
March	186	-	141	24.2% ↓	127	31.7% ↓
April	145	-	117	19.3% ↓	96	33.8% ↓
May	127	-	116	8.7% ↓	90	29.1% ↓
June	93	-	125	34.4% ↑	91	2.2% ↓
July	130	-	118	9.2% ↓	73	43.8% ↓
August	122	-	126	3.3% ↑	93	23.8% ↓
September	118	-	121	2.5% ↑	87	26.3% ↓
October	115	-	109	5.2% ↓	78	32.2% ↓
November	115	-	74	35.7% ↓	81	29.6% ↓
December	116	-	75	35.3% ↓	63	45.7% ↓
January	137	-	78	43.1% ↓	49	64.2% ↓
February	131	-	75	42.7% ↓	67	48.9% ↓
Total	1,535	-	1,275	16.9% ↓	995	35.2% ↓

†Percent change is calculated in comparison to the number of contacts during the year before the pandemic.

Inpatient Psychiatric Admissions: Palomar

Before the pandemic, there were **638 total inpatient admissions** at **Palomar**. There was a **17% decrease during year 1** and a **57% decrease during year 2** in total inpatient admission at **Palomar** when compared to the year prior to the pandemic.

Month	Pre: March 2019 – Feb. 2020		Year 1: March 2020 – Feb. 2021		Year 2: March 2021- Feb. 2022	
	Contacts	% Change†	Contacts	% Change†	Contacts	% Change†
March	63	-	76	20.6% ↑	47	25.4% ↓
April	41	-	53	29.3% ↑	19	53.7% ↓
May	44	-	46	4.5% ↑	18	59.1% ↓
June	35	-	47	34.3% ↑	25	28.6% ↓
July	58	-	42	27.6% ↓	26	55.2% ↓
August	65	-	41	36.9% ↓	20	69.2% ↓
September	43	-	42	2.3% ↓	20	53.5% ↓
October	66	-	42	36.4% ↓	16	75.8% ↓
November	55	-	49	10.9% ↓	25	54.5% ↓
December	53	-	33	37.7% ↓	25	52.8% ↓
January	52	-	35	32.7% ↓	12	76.9% ↓
February	63	-	24	61.9% ↓	22	65.1% ↓
Total	638	-	530	16.9% ↓	275	56.9% ↓

†Percent change is calculated in comparison to the number of contacts during the year before the pandemic.

Inpatient Psychiatric Admissions: Paradise Valley

Before the pandemic, there were **752 total inpatient admissions** at **Paradise Valley**. There was a **18% decrease during year 1** and a **21% decrease during year 2** in total inpatient admission at **Paradise Valley** when compared to the year prior to the pandemic.

Month	Pre: March 2019 – Feb. 2020		Year 1: March 2020 – Feb. 2021		Year 2: March 2021- Feb. 2022	
	Contacts	% Change†	Contacts	% Change†	Contacts	% Change†
March	90	-	85	5.6% ↓	73	18.9% ↓
April	16	-	62	287.5% ↑	55	243.8% ↑
May	52	-	67	28.8% ↑	52	0.0% =
June	66	-	50	24.2% ↓	44	33.3% ↓
July	64	-	47	26.6% ↓	56	12.5% ↓
August	61	-	63	3.3% ↑	43	29.5% ↓
September	57	-	26	54.4% ↓	52	8.8% ↓
October	65	-	47	27.7% ↓	56	13.8% ↓
November	60	-	55	8.3% ↓	52	13.3% ↓
December	81	-	47	42.0% ↓	46	43.2% ↓
January	70	-	29	58.6% ↓	35	50.0% ↓
February	70	-	39	44.3% ↓	31	55.7% ↓
Total	752	-	617	18.0% ↓	595	20.9% ↓

†Percent change is calculated in comparison to the number of contacts during the year before the pandemic.

Inpatient Psychiatric Admissions: Scripps Mercy

Before the pandemic, there were **677 total inpatient admissions** at **Scripps Mercy**. There was a **9% decrease during year 1** and a **34% decrease during year 2** in total inpatient admission at **Scripps Mercy** when compared to the year prior to the pandemic.

Month	Pre: March 2019 – Feb. 2020		Year 1: March 2020 – Feb. 2021		Year 2: March 2021- Feb. 2022	
	Contacts	% Change†	Contacts	% Change†	Contacts	% Change†
March	80	-	76	5.0% ↓	65	18.8% ↓
April	44	-	60	36.4% ↑	47	6.8% ↑
May	66	-	67	1.5% ↑	44	33.3% ↓
June	48	-	66	37.5% ↑	48	0.0% =
July	44	-	40	9.1% ↓	45	2.3% ↑
August	59	-	54	8.5% ↓	35	40.7% ↓
September	53	-	63	18.9% ↑	29	45.3% ↓
October	55	-	32	41.8% ↓	29	47.3% ↓
November	50	-	41	18.0% ↓	27	46.0% ↓
December	61	-	44	27.9% ↓	30	50.8% ↓
January	59	-	36	39.0% ↓	22	62.7% ↓
February	58	-	37	36.2% ↓	28	51.7% ↓
Total	677	-	616	9.0% ↓	449	33.7% ↓

†Percent change is calculated in comparison to the number of contacts during the year before the pandemic.

Inpatient Psychiatric Admissions: Sharp Grossmont

Before the pandemic, there were **861 total inpatient admissions** at **Sharp Grossmont**. There was a **12% decrease during year 1** and a **5% decrease during year 2** in total inpatient admission at **Sharp Grossmont** when compared to the year prior to the pandemic.

Month	Pre: March 2019 – Feb. 2020		Year 1: March 2020 – Feb. 2021		Year 2: March 2021- Feb. 2022	
	Contacts	% Change†	Contacts	% Change†	Contacts	% Change†
March	96	-	77	19.8% ↓	113	17.7% ↑
April	67	-	57	14.9% ↓	83	23.9% ↑
May	54	-	61	13.0% ↑	65	20.4% ↑
June	63	-	62	1.6% ↓	73	15.9% ↑
July	72	-	50	30.6% ↓	61	15.3% ↓
August	63	-	61	3.2% ↓	65	3.2% ↑
September	84	-	70	16.7% ↓	65	22.6% ↓
October	90	-	64	28.9% ↓	55	38.9% ↓
November	69	-	64	7.2% ↓	71	2.9% ↑
December	68	-	59	13.2% ↓	64	5.9% ↓
January	66	-	70	6.1% ↑	63	4.5% ↓
February	69	-	65	5.8% ↓	43	37.7% ↓
Total	861	-	760	11.7% ↓	821	4.6% ↓

†Percent change is calculated in comparison to the number of contacts during the year before the pandemic.

Inpatient Psychiatric Admissions: Sharp Mesa Vista

Before the pandemic, there were **1,359 total inpatient admissions** at **Sharp Mesa Vista**. There was a **4% increase during year 1** and a **4% decrease during year 2** in total inpatient admission at **Sharp Mesa Vista** when compared to the year prior to the pandemic.

Month	Pre: March 2019 – Feb. 2020		Year 1: March 2020 – Feb. 2021		Year 2: March 2021- Feb. 2022	
	Contacts	% Change†	Contacts	% Change†	Contacts	% Change†
March	139	-	149	7.2% ↑	136	2.2% ↓
April	132	-	101	23.5% ↓	112	15.2% ↓
May	105	-	104	1.0% ↓	142	35.2% ↑
June	112	-	109	2.7% ↓	107	4.5% ↓
July	98	-	139	41.8% ↑	101	3.1% ↑
August	99	-	118	19.2% ↑	107	8.1% ↑
September	118	-	115	2.5% ↓	110	6.8% ↓
October	113	-	122	8.0% ↑	102	9.7% ↓
November	126	-	119	5.6% ↓	107	15.1% ↓
December	111	-	117	5.4% ↑	99	10.8% ↓
January	117	-	111	5.1% ↓	99	15.4% ↓
February	89	-	104	16.9% ↑	82	7.9% ↓
Total	1,359	-	1,408	3.6% ↑	1,304	4.0% ↓

†Percent change is calculated in comparison to the number of contacts during the year before the pandemic.

Inpatient Psychiatric Admissions: UC San Diego

Before the pandemic, there were **372 total inpatient admissions** at **UC San Diego**. There was an **11% decrease during year 1** and a **21% decrease during year 2** in total inpatient admission at **UC San Diego** when compared to the year prior to the pandemic.

Month	Pre: March 2019 – Feb. 2020		Year 1: March 2020 – Feb. 2021		Year 2: March 2021- Feb. 2022	
	Contacts	% Change†	Contacts	% Change†	Contacts	% Change†
March	45	-	31	31.1% ↓	36	20.0% ↓
April	37	-	29	21.6% ↓	21	43.2% ↓
May	29	-	33	13.8% ↑	17	41.4% ↓
June	28	-	37	32.1% ↑	23	17.9% ↓
July	32	-	27	15.6% ↓	29	9.4% ↓
August	36	-	27	25.0% ↓	19	47.2% ↓
September	21	-	33	57.1% ↑	18	14.3% ↓
October	36	-	29	19.4% ↓	25	30.6% ↓
November	23	-	22	4.3% ↓	17	26.1% ↓
December	28	-	22	21.4% ↓	37	32.1% ↓
January	30	-	23	23.3% ↓	26	13.3% ↓
February	27	-	17	37.0% ↓	26	3.7% ↓
Total	372	-	330	11.3% ↓	294	21.0% ↓

†Percent change is calculated in comparison to the number of contacts during the year before the pandemic.



Client Outcomes

Client Outcomes: RMQ and IMR

- **The Recovery Markers Questionnaire (RMQ)** measures client perception of individual recovery. The RMQ is included in the Integrated Self-Assessment, and it is completed by all clients who are capable of doing so. The RMQ is a 26-item questionnaire that is comprehensive and recovery-oriented and includes items related to occupational activities and stage of recovery. In total, this assessment contains 35 items.
 - All new clients should complete the RMQ at intake (baseline). Clients should also complete the RMQ at their six-month follow-up and at discharge.
- **The Illness Management and Recovery Questionnaire (IMR)** is completed by clinical staff members and is used to measure their perception of client recovery. The IMR has 15 items, each addressing a different aspect of illness management and recovery. Each item may function as a domain for improvement.
 - The IMR is completed by clinicians at intake, whenever there is expectation of outcomes follow-up (which tends to be every six months), and at discharge.
 - IMR scores range from 1 to 5, with 5 representing the highest level of recovery. Scores can be reported as both an overall score and by using three subscales which combine individual items to represent illness recovery, management, and substance abuse dimensions of treatment outcomes.

Client Outcomes: RMQ and IMR

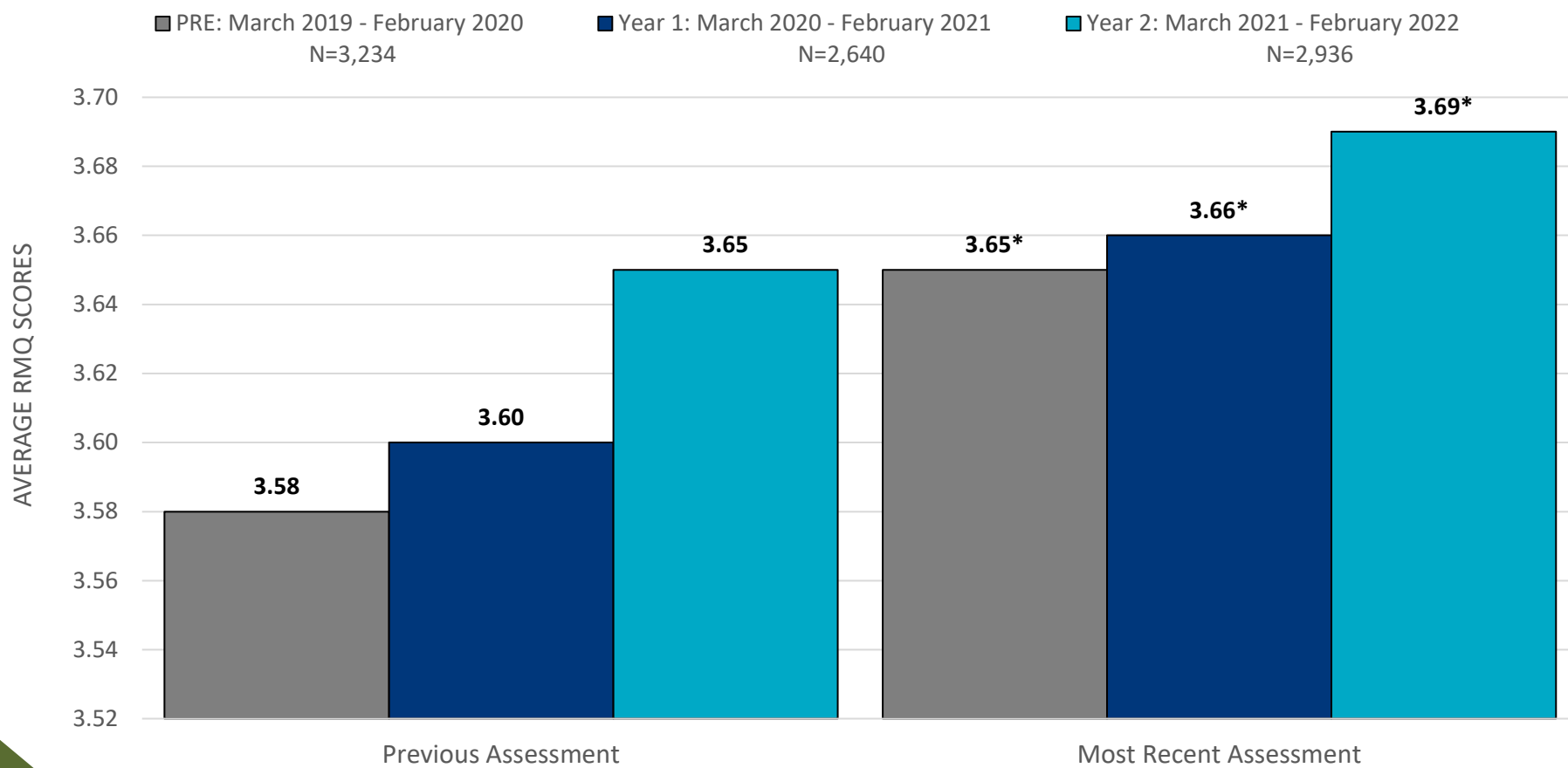
Outcomes are analyzed for all clients and new clients

- **All Clients** include every individual served by SDCBHS during the defined time periods who had at least one follow-up RMQ and/or IMR assessment completed within the fiscal year (Most Recent Assessment) and a RMQ and/or IMR assessment completed four to eight months prior (Previous Assessment), regardless of how long they have been receiving services.
- **New Clients** are individuals who meet the following criteria:
 - 1) have a RMQ and/or IMR assessment during the defined date range of time periods being examined (Most Recent Assessment)
 - 2) have a corresponding RMQ and/or IMR assessment four to eight months prior to their most recent assessment (Intake Assessment)
 - 3) have a first service date within 30 days of their first assessment

RMQ Means for All Clients

The **average RMQ scores** for **all clients** during the **first** and **second year** of the pandemic were **higher** at previous assessment and most recent assessment when compared to the **average RMQ scores** for clients the year before the pandemic. There was a **statistically significant change** in **RMQ scores** for all three time periods between the previous assessment and the most recent assessment suggesting that, on average, **all clients perceived they made progress towards recovery**.

Average RMQ Scores for Clients During the Pandemic

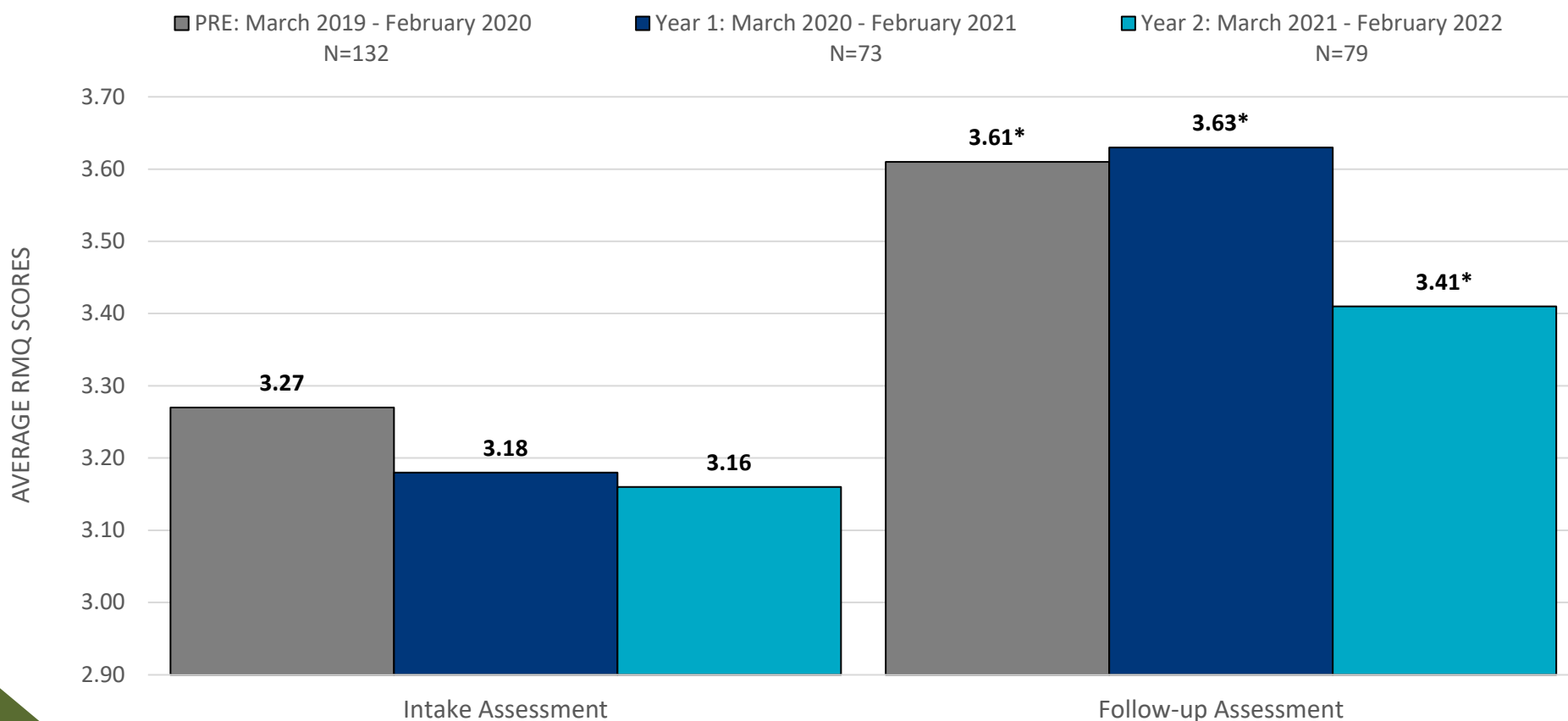


*Indicates statistical significance ($p < .001$)

RMQ Means for New Clients

The **average RMQ scores** for **new clients** during the **first** and **second year** of the pandemic were **lower** at previous assessment when compared to the **average RMQ scores** for clients the year before the pandemic. There was a **statistically significant change** in RMQ scores for all time periods between the intake assessment and the most recent assessment suggesting that, on average, **new clients perceived they made progress towards recovery**.

Average RMQ Scores for New Clients During the Pandemic

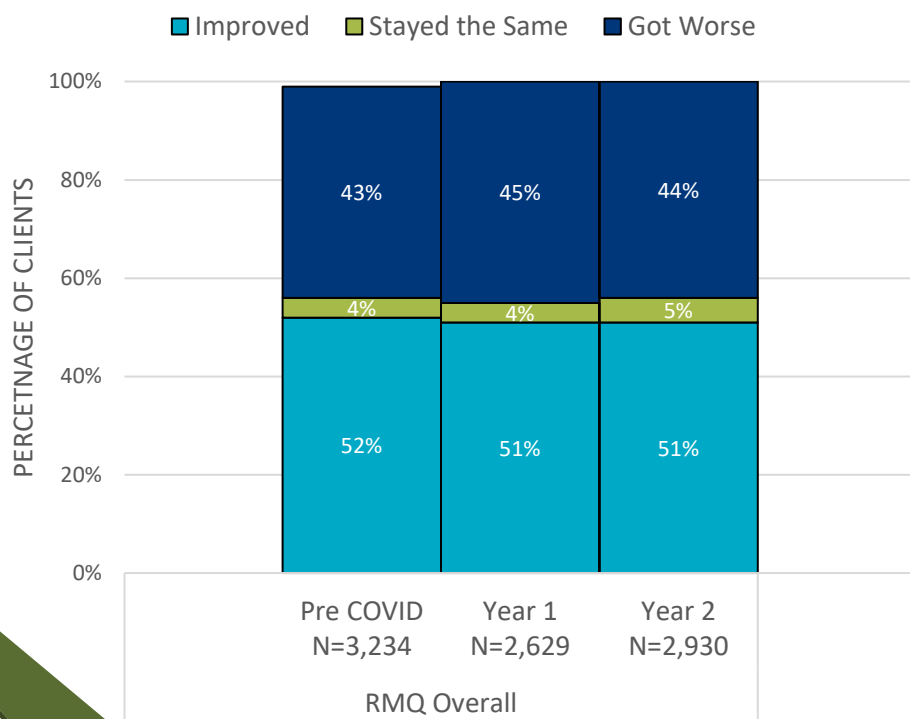


*Indicates statistical significance ($p < .001$)

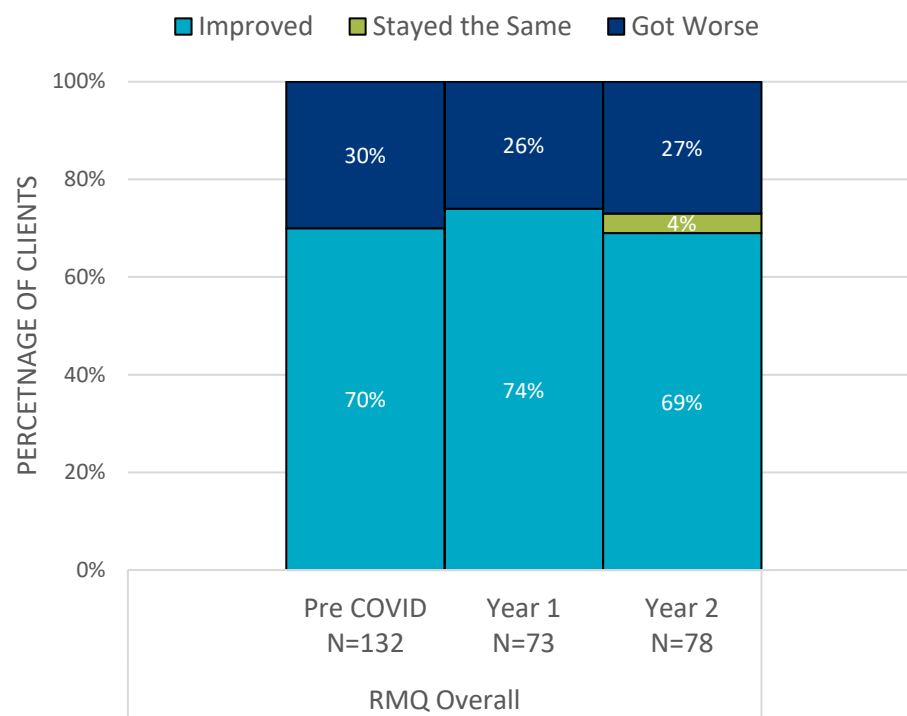
RMQ Improvement for All and New Clients

During the **first year** and **second year** of the pandemic, there was a **slightly smaller proportion of all clients (51%)** who had **improvements in overall RMQ scores** from previous assessment to the most recent assessment compared to **all clients (52%)** in the year prior to the pandemic. During **first year** of the pandemic there was a **greater proportion of new clients (74%)** who had **improvements in overall RMQ scores** and during **second year** of the pandemic there was a **slightly smaller proportion of new clients (69%)** who had **improvements in overall RMQ scores** from intake to the most recent assessment compared to **new clients (70%)** prior to the pandemic.

IMR Improvement of Clients Before and During the Pandemic



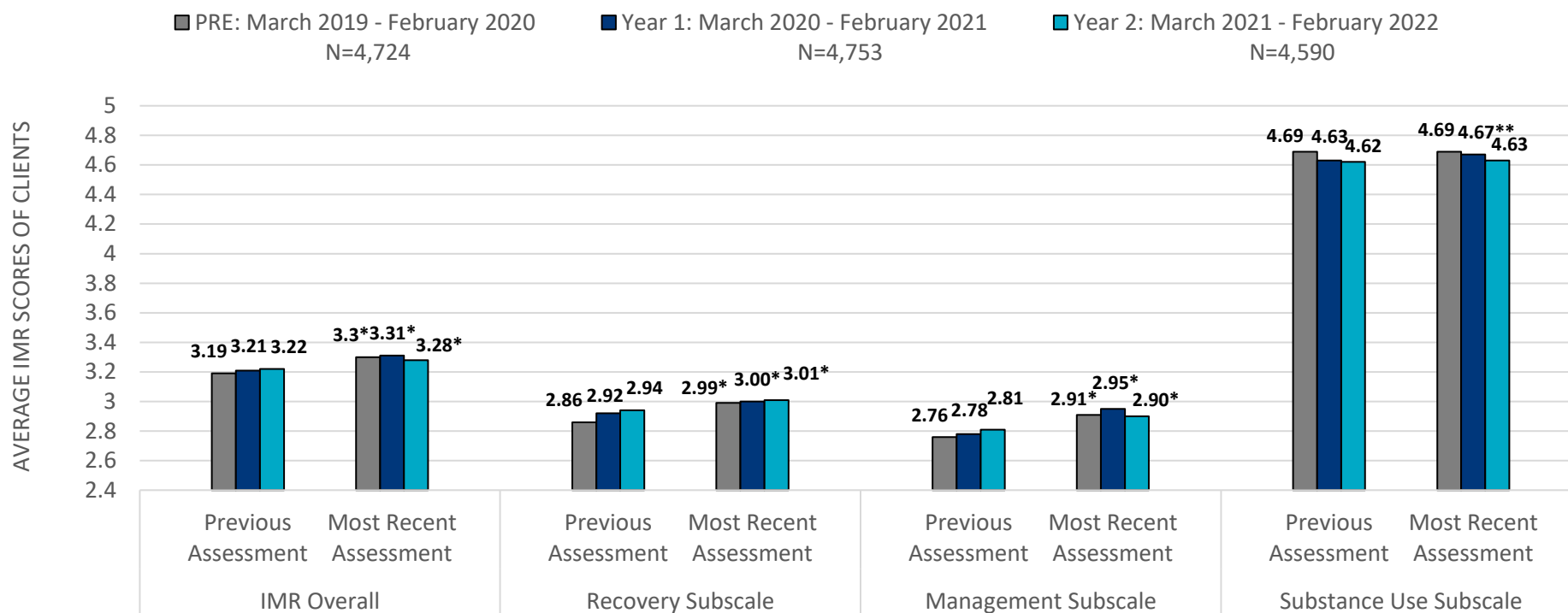
IMR Improvement of New Clients Before and During the Pandemic



IMR Means for All Clients

The **Overall IMR, IMR Recovery, and IMR Management subscale scores for all clients** during **first and second year** of the pandemic were **higher** compared to the previous year of the pandemic but were **lower** in the previous assessment for the **Substance Use subscale** compared to prior to the pandemic. There were **statistically significant changes in the Overall IMR, IMR Recovery, and IMR Management subscale scores** for all three time periods and **the Substance Use Subscale score for the first year of the pandemic** between the previous assessment and the most recent assessment suggesting that, on average, **clients perceived they made progress towards recovery.**

Average IMR Scores of Clients Before and During the Pandemic



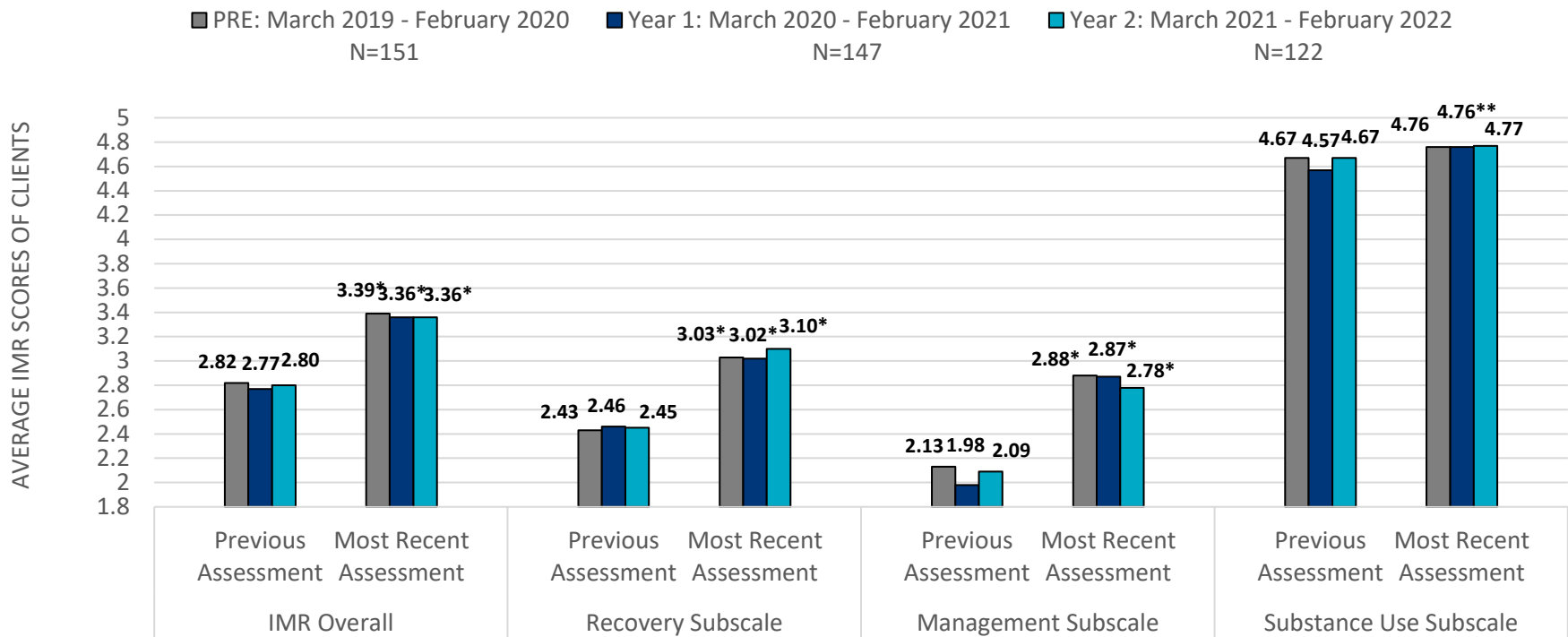
*Indicates statistical significance ($p < .001$)

**Indicates statistical significance ($p < .05$)

IMR Means for New Clients

The **IMR Recovery subscale scores for new clients** during **first** and **second year** of the pandemic were **higher** at previous assessment and most recent assessment compared to the **new clients** before the pandemic. The **Overall IMR and IMR Management subscale scores for new clients** during **first** and **second year** of the pandemic were **lower** at previous assessment and most recent assessment compared to the **new clients** before the pandemic. There were **statistically significant changes in the Overall IMR, IMR Recovery, and IMR Management subscale scores** for all three time periods and **the Substance Use Subscale score** for the first year of the pandemic between the previous assessment and the most recent assessment suggesting that, on average, **clients perceived they made progress towards recovery.**

Average IMR Scores of New Clients Before and During the Pandemic



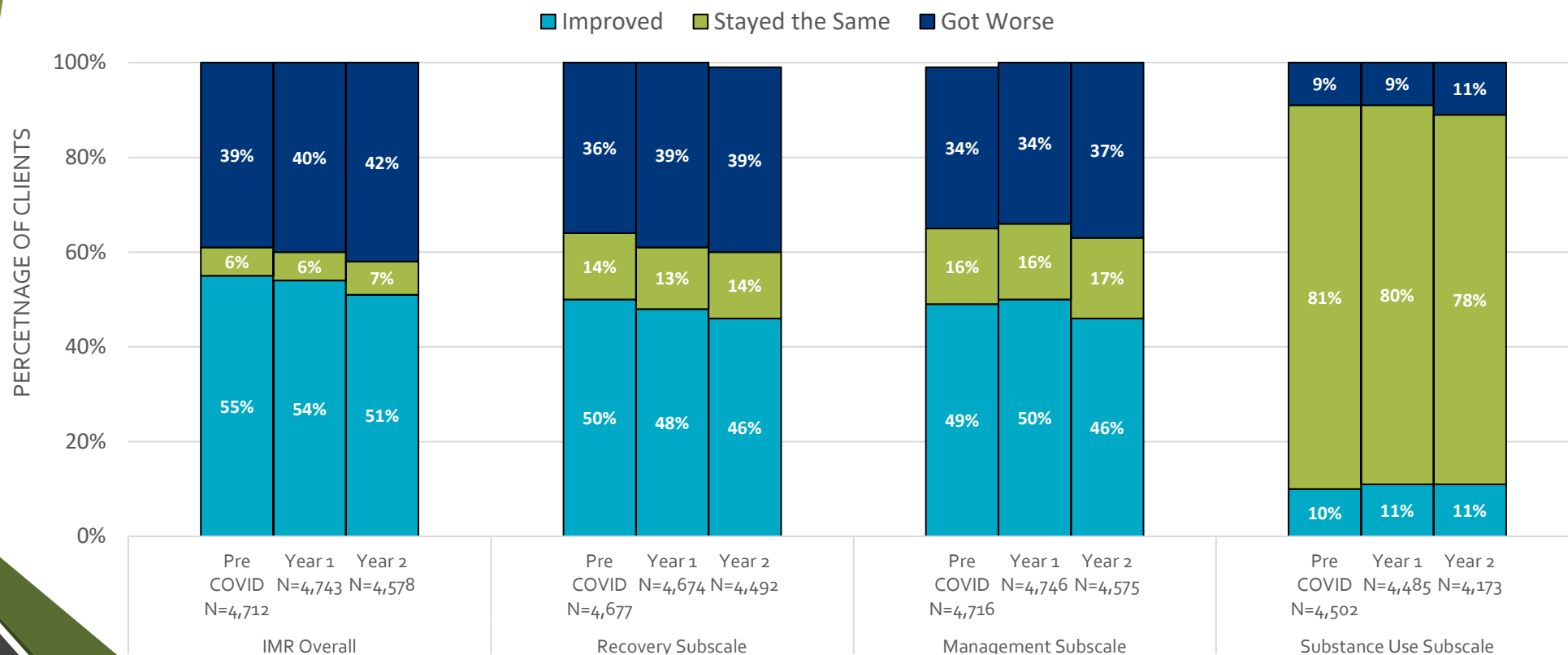
*Indicates statistical significance ($p < .001$)

**Indicates statistical significance ($p < .05$)

IMR Improvement for All Clients

Compared to the year before the pandemic, the proportion of **all clients** who had improvements in the **overall IMR and IMR Recovery Subscale scores** from intake to the most recent assessment **during the first and second year of the pandemic decreased** compared to all clients prior to the pandemic. Also, compared to the year before the pandemic, the proportion of **all clients** who had improvements in the **Substance Use Subscale scores** from intake to the most recent assessment during the **first and second year of the pandemic increased** compared to all clients prior to the pandemic. The **improvement in IMR Management subscale scores fluctuated for all clients** for the years before and during the pandemic.

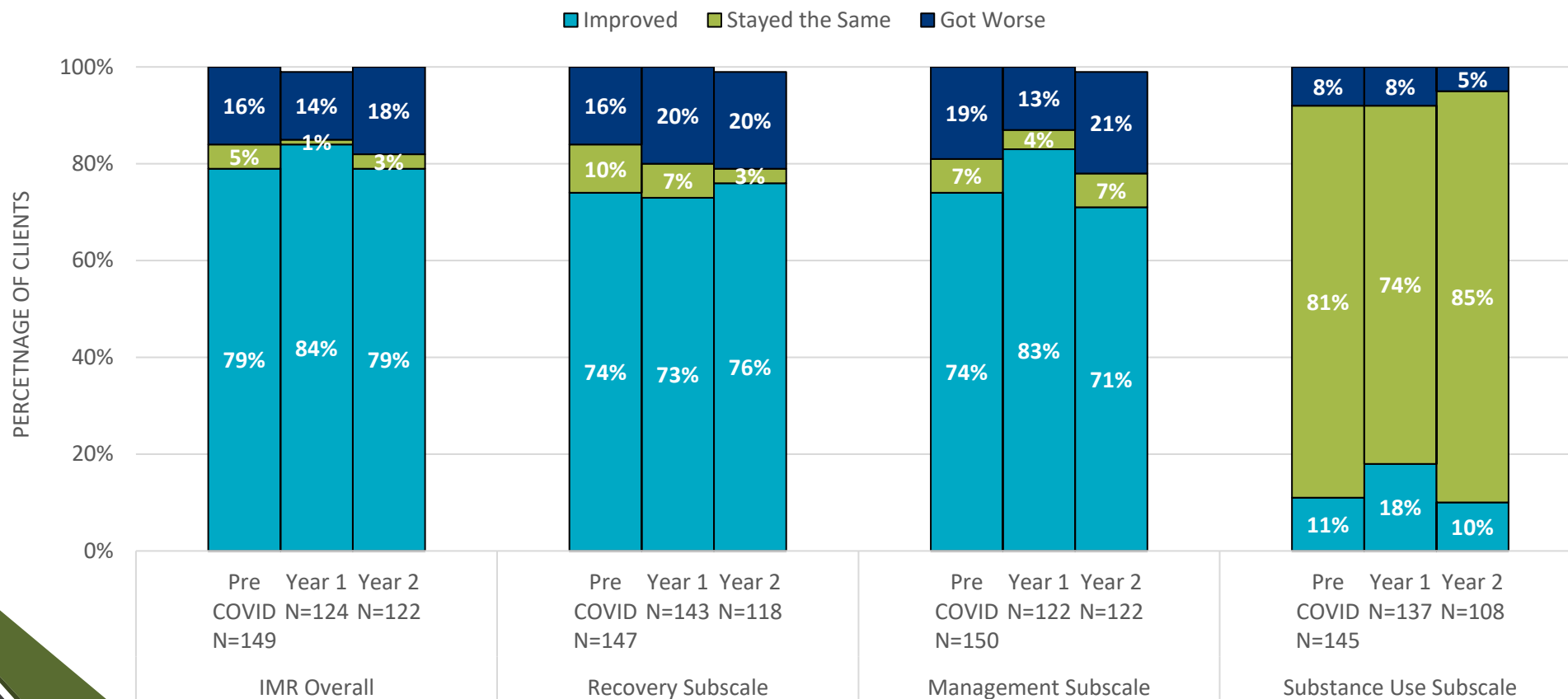
IMR Improvement of All Clients Before and During the Pandemic



IMR Improvement for New Clients

There was a **greater proportion of new clients** during the **first year** of the pandemic who had improvements in **IMR Overall, Management Subscale, and Substance Use Subscale scores** from previous assessment to the most recent assessment compared to **new clients prior to the pandemic**. During the second year of the pandemic, there was a **smaller proportion of new clients** who had **improvements in IMR Recovery Subscale, and Substance Use subscale scores** from intake to the most recent assessment compared to **new clients** prior to the pandemic.

IMR Improvement of New Clients Before and During the Pandemic





Satisfaction: Mental Health Statistical Improvement Program (MHSIP) Survey

MHSIP Satisfaction

The Mental Health Statistical Improvement Program (MHSIP) — Satisfaction By Domain

The Mental Health Statistical Improvement Program (MHSIP) is a biennial state-mandated survey administered to all mental health clients ages 18 and older and is used to rate client satisfaction with services and perception of outcomes using a 5-point scale (strongly disagree to strongly agree). The MHSIP was administered to clients during three 1-week periods within our study timeframe: May 2019 (pre-pandemic), June 2020 (during pandemic), and June 2021 (during pandemic). The May 2019 MHSIP surveys were administered entirely on paper and the June 2020 MHSIP surveys were administered entirely online due to the COVID-19 pandemic. The June 2021 MHSIP surveys were administered in a hybrid method with both online and on paper surveys available. Therefore, satisfaction results may not be directly comparable to previous years.

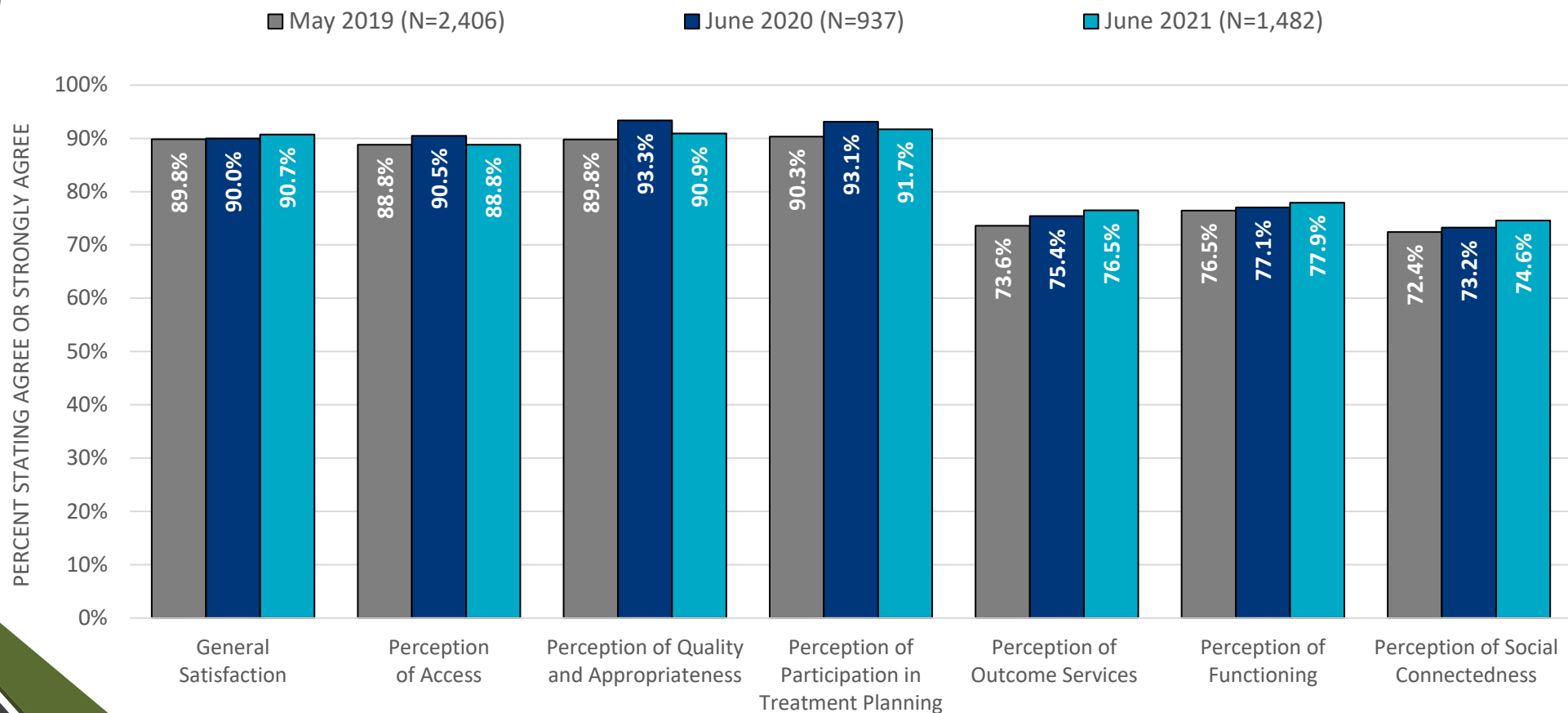
MHSIP Satisfaction questions were grouped into seven domains:

1. General Satisfaction
2. Perception of Access
3. Perception of Quality and Appropriateness
4. Perception of Participation in Treatment Planning
5. Perception of Outcomes of Services
6. Perception of Functioning
7. Perception of Social Connectedness

MHSIP Satisfaction Domains

During the **first year** of the pandemic (June 2020) **agreement in all seven domains** of the MHSIP **increased** compared to the year before the pandemic. During the **second year** of the pandemic (June 2021), agreement in **six domains** of the MHSIP **increased** relative to the year prior to the pandemic, along with agreement in the **Perception of Access domain remained the same** relative to the year prior to the pandemic.

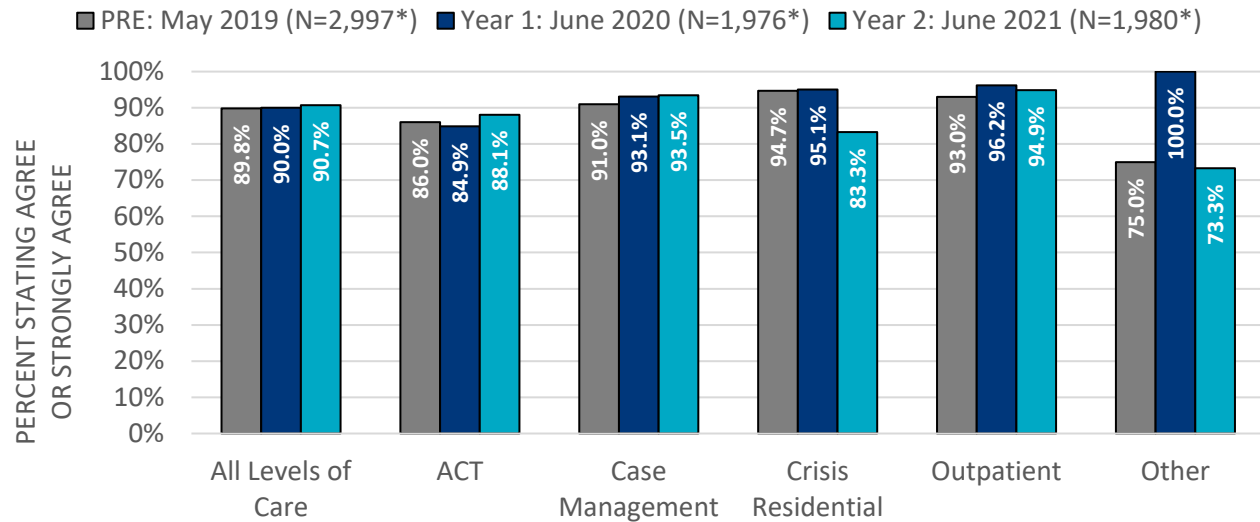
MHSIP Satisfaction Before and During the Pandemic



MHSIP Satisfaction Domains by Level of Care

During the **second year** of the pandemic, in the **crisis residential** level of care there was a **decrease** in the domain of **general satisfaction** when compared to the year prior to the pandemic. The proportions of the other levels of care by the general satisfaction domain **remained relatively stable with slight fluctuations** during both years of the pandemic.

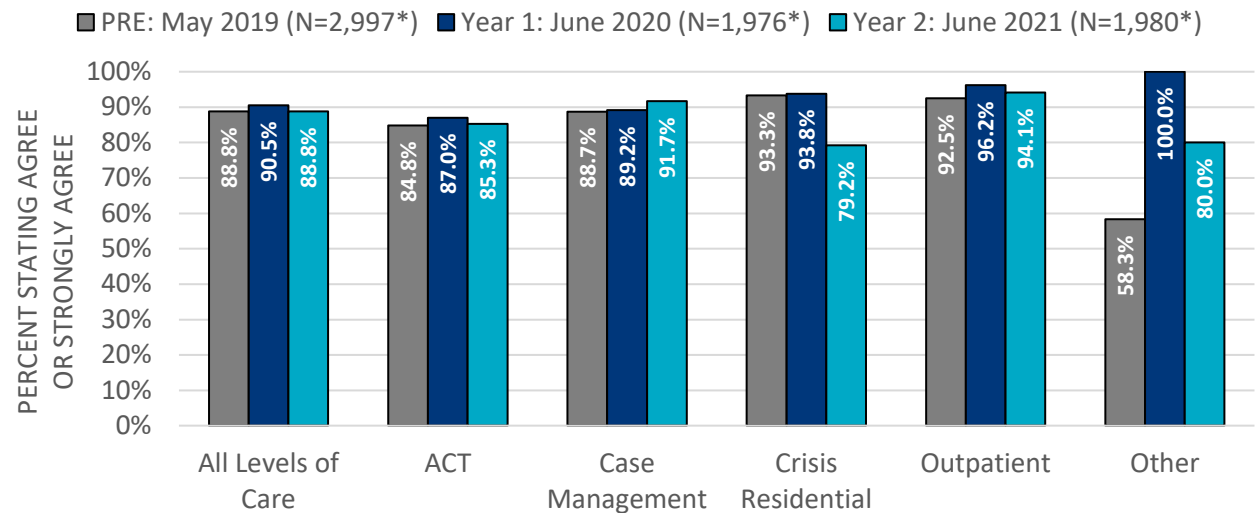
General Satisfaction Domain by Level of Care



*Not every adult completed responses for every domain.

During the **second year** of the pandemic, in the **crisis residential** level of care there was a **decrease** in the domain of **perception of access** when compared to the year prior to the pandemic. The proportions of the other levels of care by the perception of access domain **remained relatively stable with slight fluctuations** during both years of the pandemic.

Perception of Access Domain By Level of Care



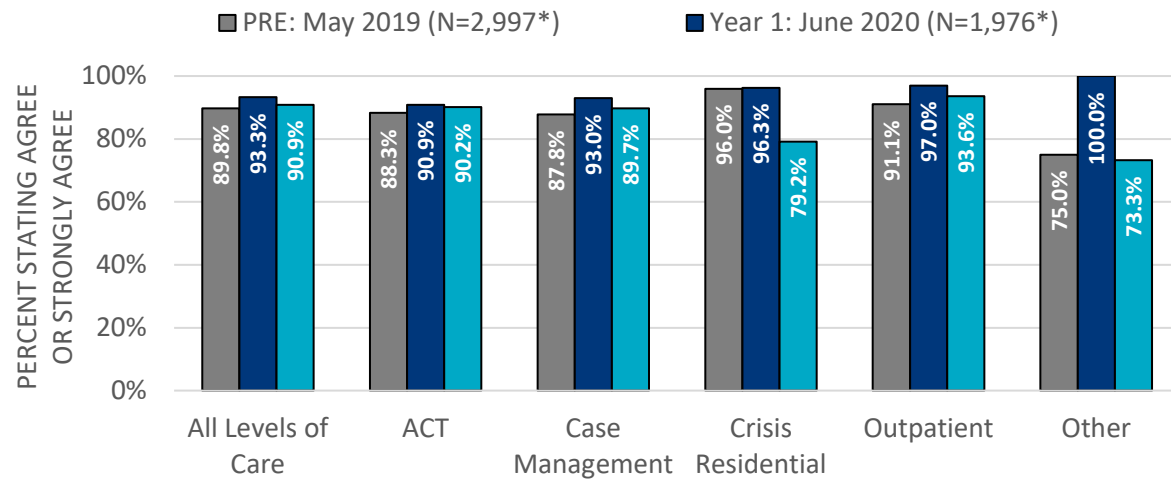
*Not every adult completed responses for every domain.

MHSIP Satisfaction Domains by Level of Care

During the **second year** of the pandemic, in the **crisis residential** level of care there was a **decrease** in the domain of **perception of quality and appropriateness** when compared to the year prior to the pandemic. The proportions of the other levels of care by the perception of quality and appropriateness domain **remained relatively stable with slight fluctuations** during both years of the pandemic.

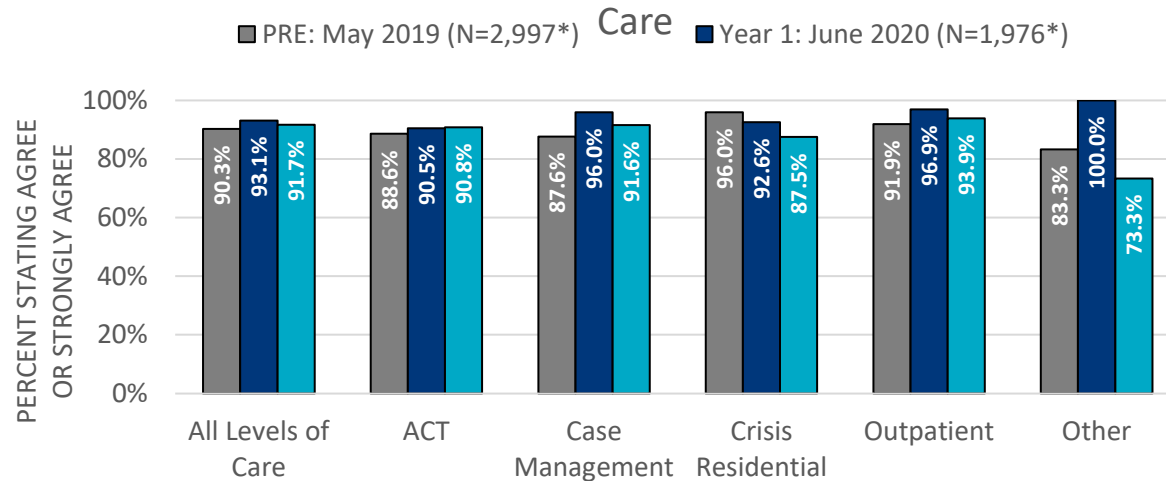
During the **second year** of the pandemic, in the **crisis residential** level of care there was a **decrease** in the domain of **perception of participation in treatment planning** when compared to the year prior to the pandemic. The proportions of the other levels of care by the perception in treatment planning domain **remained relatively stable with slight fluctuations** during both years of the pandemic.

Perception of Quality and Appropriateness Domain by Level of Care



*Not every adult completed responses for every domain.

Participation in Treatment Planning Domain by Level of Care



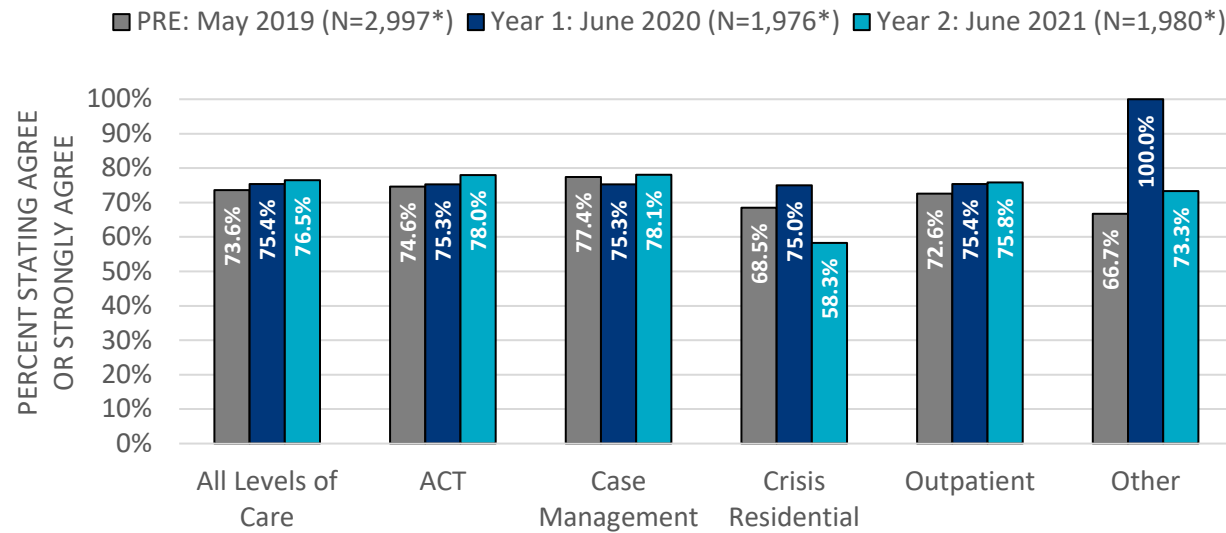
*Not every adult completed responses for every domain.

MHSIP Satisfaction Domains by Level of Care

During the **second year** of the pandemic, in the **crisis residential** level of care there was a **decrease** in the domain of **perception of outcome services** when compared to the year prior to the pandemic. The proportions of the other levels of care by the perception of outcome services domain **remained relatively stable with slight fluctuations** during both years of the pandemic.

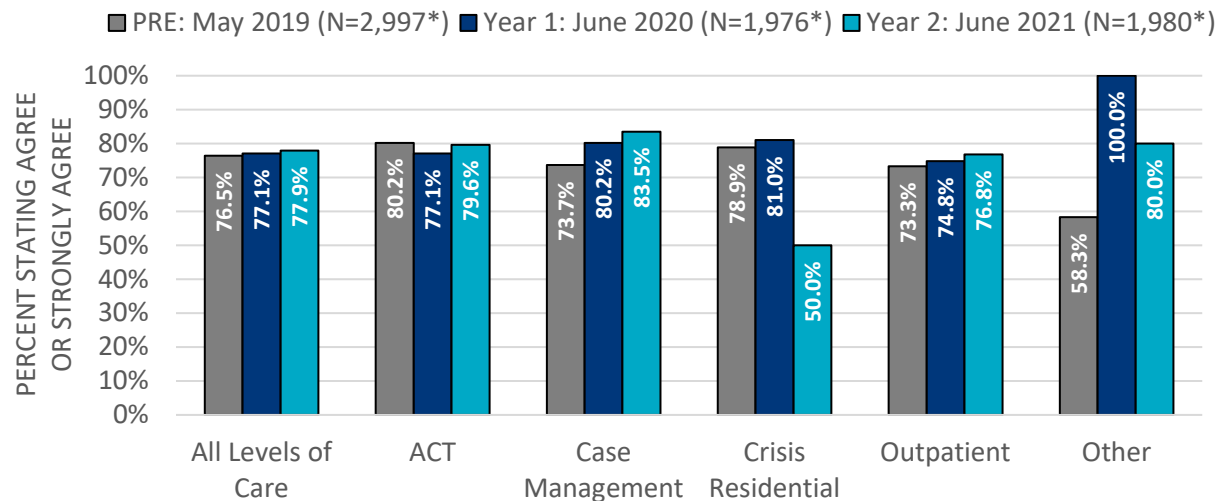
During the **second year** of the pandemic, in the **crisis residential** level of care there was a **decrease** in the domain of **perception of functioning** when compared to the year prior to the pandemic. The proportions of the other levels of care by the perception of functioning domain **remained relatively stable with slight fluctuations** during both years of the pandemic.

Perception of Outcome Services Domain by Level of Care



*Not every adult completed responses for every domain.

Perception of Functioning Domain by Level of Care

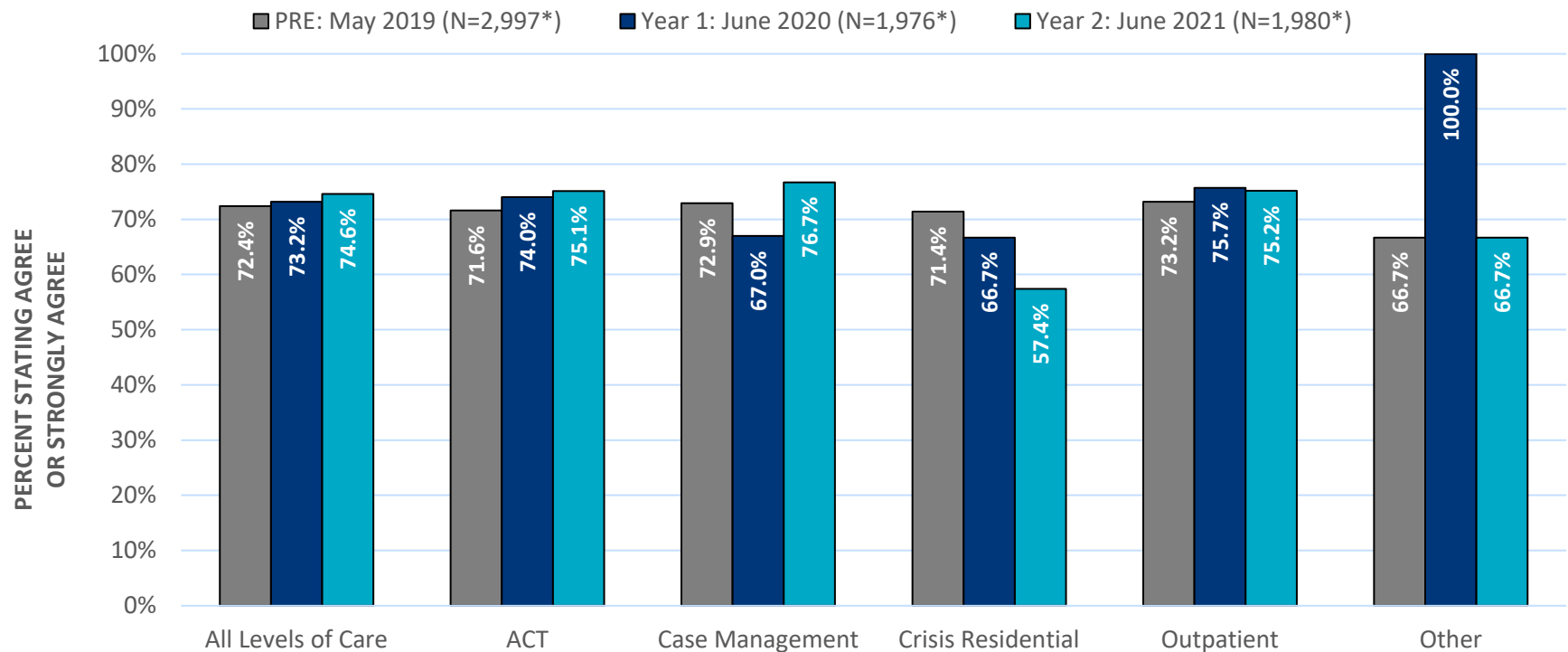


*Not every adult completed responses for every domain.

MHSIP Satisfaction Domain by Level of Care

During the **second year** of the pandemic, in the **crisis residential** level of care there was a **decrease** in the domain of **perception of social connectedness** when compared to the year prior to the pandemic. During the **first year** of the pandemic, in the **case management** level of care there was a **decrease** in the domain of **perception of social connectedness** when compared to the year prior to the pandemic. The proportions of the other levels of care by the perception of social connectedness domain **remained relatively stable with slight fluctuations** during both years of the pandemic.

Perception of Social Connectedness Domain by Level of Care



*Not every adult completed responses for every domain.

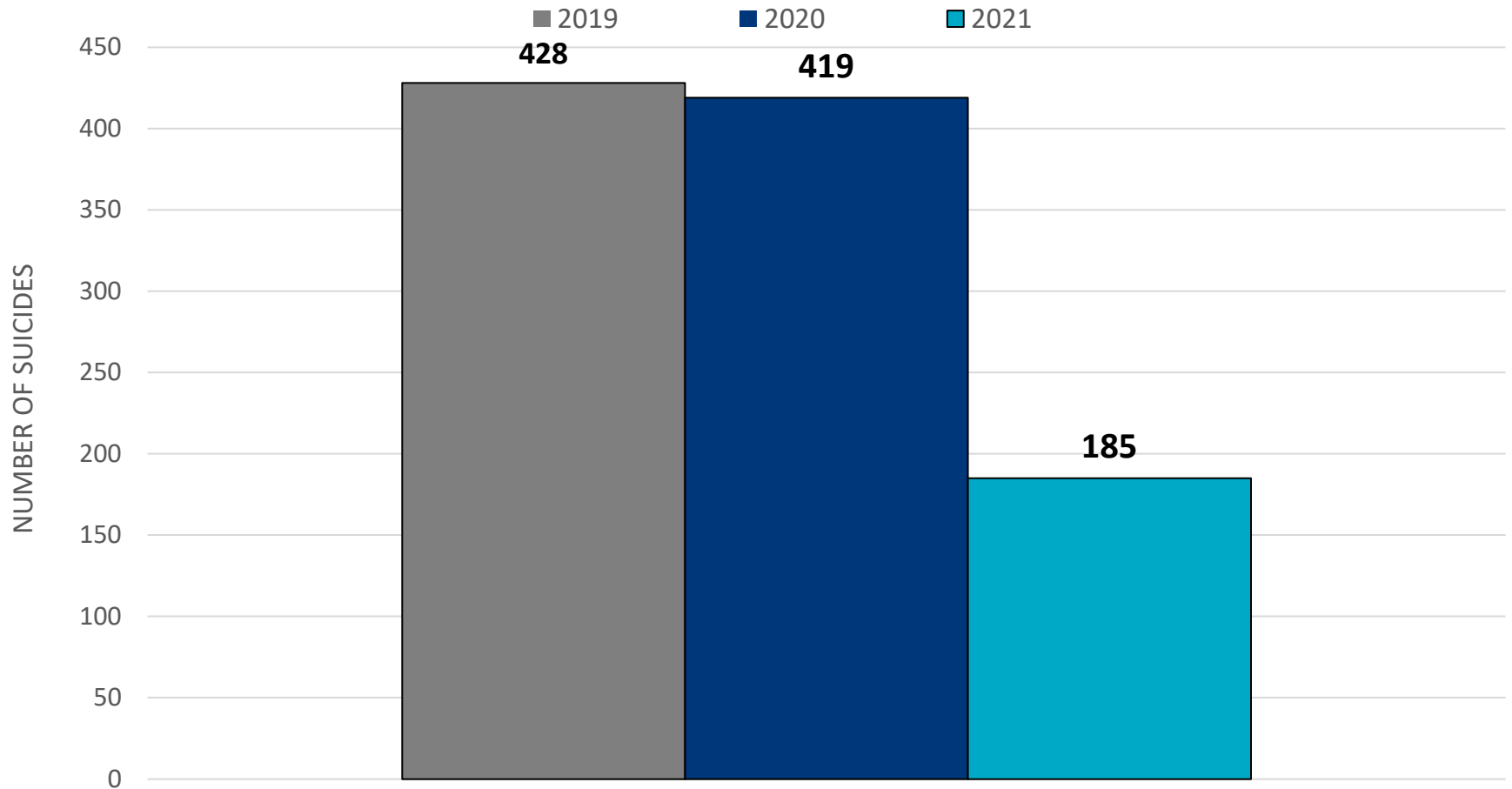


Additional Outcomes

Deaths by Suicide

When compared to 2019, the number of **adult and older adult death by suicide slightly decreased in 2020** and has **significantly decreased in 2021**.

AOA Suicides Before and During the Pandemic*

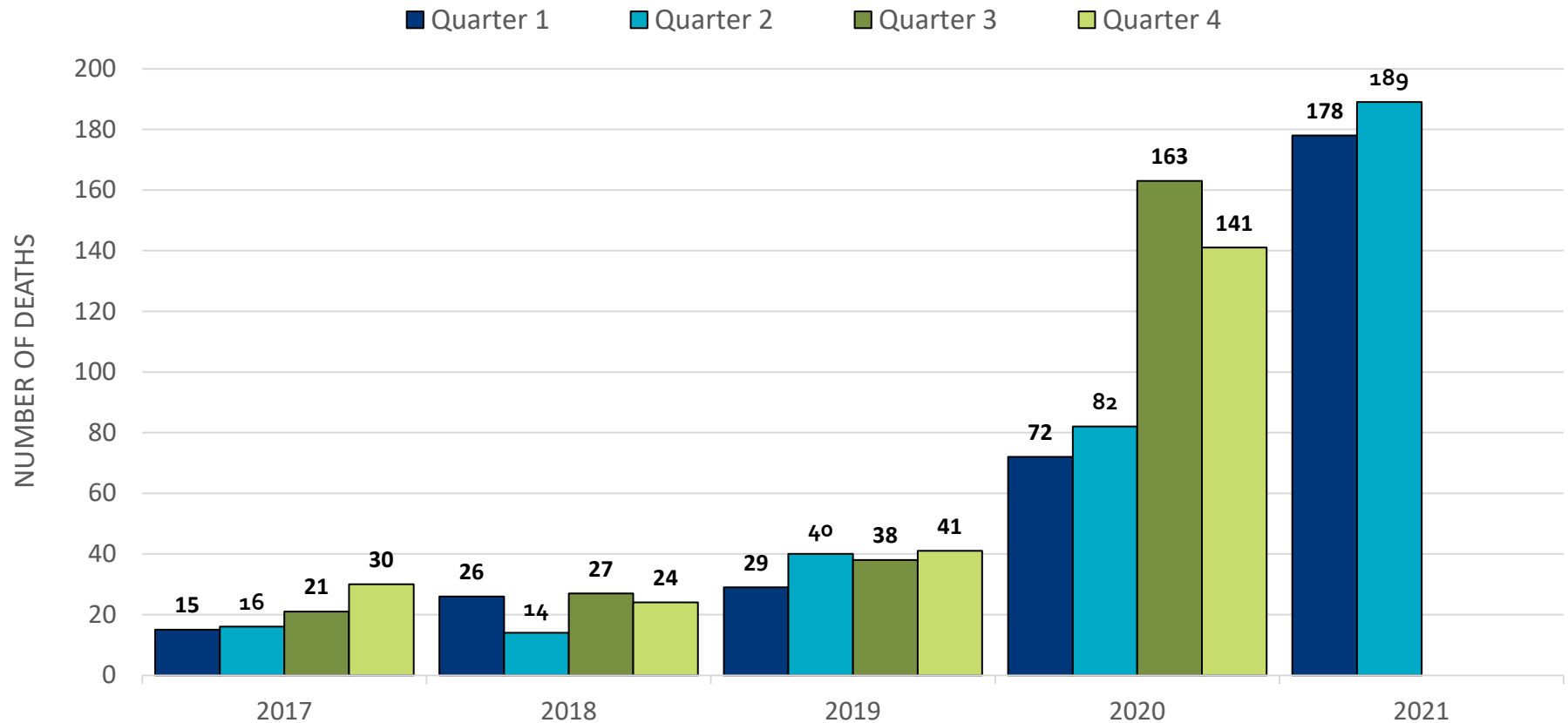


*Adult is defined as age 18 and over, where the cause of death from the medical examiner is listed as suicide.

Fentanyl Caused Accidental Drug-Medication Deaths

The number of **fentanyl caused accidental deaths** of **adult and older adults** of all of San Diego County has increased over time. The number of **accidental fentanyl caused deaths nearly doubled** in **Quarter 3 of 2020** and has seen the **highest** recorded numbers in **Quarter 1 and 2 of 2021**.

Fentanyl Caused Accidental Drug-Medication Deaths Before and During the Pandemic*



*Adult is defined as age 18 and over, where the cause of death from the medical examiner is listed as fentanyl caused accidental drug-medication deaths.

Conclusions

Conclusions

- There was a **6.2% reduction** in the number of clients served by the AOA SOC **during the first year of the pandemic**, along with a **reduction of 5.2%** clients served during the **second year of the pandemic** compared to the year before the pandemic.
- During the pandemic, the proportion of **face-to-face services provided decreased**, and the proportion of **telephone and telehealth services provided drastically increased** compared to the proportion of type of services provided prior to the pandemic.
- During the pandemic, the proportion of clients diagnosed with **Depressive Disorder, Schizophrenia and other psychotic disorders decreased and Hispanic clients slightly increased** compared to the proportion of clients prior to the pandemic.
- During both years of the pandemic, there was a **greater proportion of jail services utilized** compared to **jail services utilized** before the pandemic. Also, during the pandemic there was a **slight decrease in outpatient service utilization** compared to **outpatient utilization** before the pandemic.
- There was a **greater proportion of new clients** during the pandemic receiving their **first service** in SDCBHS through **Crisis Services** and **Forensic Services** compared to before the pandemic.
- There was a **7% decrease during year 1 and an 12% decrease during year 2 in total inpatient admissions** when compared to the year prior to the pandemic. Also, there was a **9% increase during year 1 and a 2% increase during year 2 in total admissions to inpatient from crisis stabilization** when compared to the year prior to the pandemic.

Conclusions

- The **average RMQ scores** were **higher** for **all clients** and **lower** for **new clients** during the **first** and **second year** of the pandemic at previous assessment and most recent assessment when compared to the **average RMQ scores** for clients the year before the pandemic.
- The **Overall IMR, IMR Recovery, and IMR Management subscale scores for all clients and the IMR Recovery subscale scores for new clients** during **first** and **second year** of the pandemic were **higher** compared to the previous year of the pandemic but were **lower** in the previous assessment for the **Substance Use subscale** compared to prior to the pandemic.
- For both all and new clients there were **statistically significant changes** in the **RMQ score, Overall IMR, IMR Recovery, and IMR Management subscale scores** for all three time periods and the **Substance Use Subscale score** for the **first year** of the pandemic between the previous assessment and the most recent assessment suggesting that, on average, **clients perceived they made progress towards recovery.**
- During the **first and second year** of the pandemic (June 2020 and June 2021) **agreement in nearly all domains** of the MHSIP **increased** relative to the year prior to the pandemic.
- In all seven domains, the **crisis residential** level of care **decreased** during the **second year** of the pandemic when compared to the year before the pandemic. The proportions of the **other levels of care** by all domains **remained relatively stable with slight fluctuations** during both years of the pandemic.
- The number of **fentanyl caused accidental deaths** of **adult and older adults** of all of San Diego County has increased over time. The number of **accidental fentanyl caused deaths nearly doubled** in **Quarter 3 of 2020** and has seen the **highest** recorded numbers in **Quarter 1 and 2 of 2021.**