

CHILDREN, YOUTH AND FAMILIES (CYF) BEHAVIORAL HEALTH SYSTEM OF CARE COUNCIL

MEETING AGENDA

May 14, 2018 – 9:00-10:30 A.M.

Scottish Rite Center-Shell Room-1895 Camino Del Rio South, San Diego, CA 92108

- | | |
|--|-------------------|
| I. Welcome and Introductions (Renee Cookson) | 5 minutes |
| II. Approval of Minutes (Violeta Mora) | 3 minutes |
| <ul style="list-style-type: none"> March 12, 2018 (Handout) Review action items from March 12, 2018 – See meeting minutes | |
| III. Business Items (Yael Koenig) | 15 minutes |
| <ul style="list-style-type: none"> Final HHSA/BHS Ten Year Roadmap (Handout) May is Mental Health Month Calendar- Link:
 https://www.sandiegocounty.gov/content/sdc/hhsa/programs/bhs.htm Annual School Summit- Save The Date October 12, 2018 (Handout) Council membership (co-chair & members effective July 2018) <ul style="list-style-type: none"> ✓ Orientation- August 13, 2018 (Handout) Updated CSOC Principles unveiling (Handout) Strategic Planning Meeting (Handout) Next FY meetings place/amenities | |
| IV. Mental Health Services Act (MHSA) Update (Marty Dare) | 10 minutes |
| <ul style="list-style-type: none"> Mental Health Services Oversight and Accountability Commission (MHSOAC) approval for Innovation development | |
| V. Sectors “Hot Topics” (Handouts) | 45 minutes |
| <ul style="list-style-type: none"> Educationally Related Mental Health Services (ERMHS) (Cara Schukoske) Accessing & Leveraging Families Rights to Education (AlfreEDU) presentation (Renee Cookson) | |
| VI. Sub-Committee Update Reports (Violeta Mora)- Handouts | 10 minutes |
| <ul style="list-style-type: none"> Early Childhood (Aisha Pope & Jennifer Kennedy) <ul style="list-style-type: none"> ✓ Supporting Caregivers- 3 minutes video Education Advisory (Heather Nemour) QI-Performance Improvement Team (PIT) (Liz Miles) CYF Liaison (Renee Cookson) <ul style="list-style-type: none"> ✓ 4th Annual Children's Mental Health Well-Being Celebration | |
| VII. Announcements (Renee Cookson) | 2 minutes |
| <ul style="list-style-type: none"> BHETA training topic or conference topic suggestions to Rose Woods at rwoods@sdsu.edu | |
| VIII. Director's Report (Alfredo Aguirre) | 10 minutes |

Next Executive Committee Conference Call:

Date: Monday, May 24, 2018

Time: 11:30 A.M.-12:00 P.M.

Location: Via Conference Call

Next Council Meeting

Date: Monday, June 11, 2018

Time: 9:00-10:30 A.M.

Location: Scottish Rite- Shell Room

Sub-Committees/Sectors/Workgroups Meetings Information:

CCRT: Meets the 1st Friday of the month-3851 Rosecrans St.-Coronado Room, San Diego, CA 92110 from 10:00 to 11:30 A.M.

CSOC Academy: Meets the 1st Wednesday of the month-6505 Alvarado Road, Suite 107, San Diego, CA 92120 from 9:00 to 10:00 A.M.

CYF CADRE: Meets quarterly 2nd Thursday of the month- 5095 Murphy Canyon Rd, San Diego 92123- Suite 320 from 1:30 to 3:00 P.M.

Early Childhood: Meets the 2nd Monday of the month- 3160 Camino Del Rio South Suite 101, San Diego, CA 92108-at 10:45 A.M. to 12:15 P.M.

Education Advisory Ad Hoc: Meets as needed.

Family and Youth As Partners: Meets the 3rd Thursday of the month- Del Mar Room from 2:00 to 3:30 P.M.

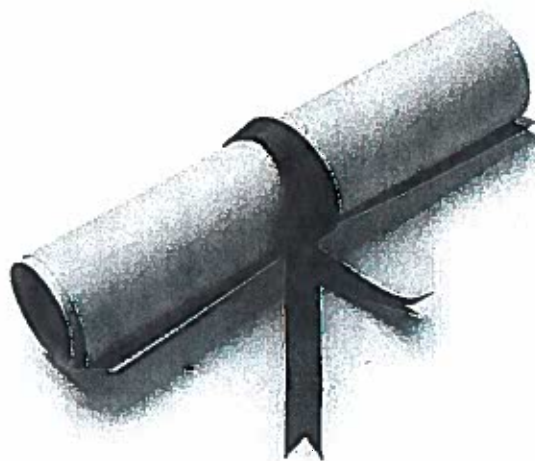
Family/Youth Sector: Meets quarterly on 4th Thursday of the month at 8964 N Magnolia St, Santee, CA 92071 from 6:30 to 8:00 P.M.

Outcomes: Meets the 1st Tuesday of the month-La Vista Room from 11:30 A.M. to 1:00 P.M.

Private Sector: Meets as needed.

TAY Council: Meets the 4th Wednesday of the month-3860 Calle Fortunada, San Diego, CA 92123 from 3:00 to 4:30 P.M.

Unveiling of
Children, Youth and Families
Behavioral Health
System of Care Council
Mission, Vision and Principles
at today's meeting



CHILDREN, YOUTH AND FAMILIES (CYF) BEHAVIORAL HEALTH SYSTEM OF CARE COUNCIL

MEETING MINUTES

March 12, 2018 – 9:00-10:30 A.M.

Scottish Rite – Shell Room -1895 Camino del Rio South, San Diego CA 92108

+ = Member in Attendance O = Absent E = Excused

CONSTITUENCY		MEMBER	STATUS	ALTERNATE	STATUS
PUBLIC SECTOR					
1	Behavioral Health Advisory Board (BHAB)	Rebecca Hernandez		VACANT	
2	Behavioral Health Services	Dr. Laura Vleugels	+	Dr. Jeffrey Rowe	+
3	Public Safety Group/ Probation	VACANT		Tim Hancock	+
4	Child Welfare Services (CWS)	Cathi Palatella	O	Barry Fox Alice Kennedy is the new alternate effective April 2018	+
5	HHSA Regions	Dori Gilbert	+	Jennifer Sovay	+
6	Public Health	Dr. Tom Coleman	+	Rhonda Freeman	+
7	Juvenile Court	H. Judge Kimberlee Lagotta	O	Michelle Johnson	O
8	First 5 Commission	Alethea Arguilez	O	Jennifer Wheeler	O
EDUCATION SECTOR					
9	Special Education Local Plan Area (SELPA)	Cara Schukoske	+	VACANT	
10	Regular Education Pupil Personnel Services	Heather Nemour	+	Mara Madrigal-Weiss	O
11	School Board	Barbara Ryan	+	Sharon Whitehurst-Payne	+
12	Special Education	Aidee Angulo	O	Yuka Sakamoto	+
PRIVATE SECTOR					
13	San Diego Regional Center (SDRC) for Developmentally Disabled	Carlos Flores	O	Peggy Webb	O
14	Alcohol and Drug Service Provider Association (ADSPA)	Angela Rowe	+	Marisa Varond	+
15	Mental Health Contractors Association	Steve Jella (Jamie Thomas)	O	Barent Mynderse	+
16	Mental Health Contractors Association	Angela Chen	+	Delrena Swaggerty	+
17	San Diego Nonprofit Association (SDNA)	Margaret Iwanaga Penrose	O	Rosa Ana Lozada	+
18	Fee- For-Service Network	Dr. Sherry Casper	+	VACANT	
19	Managed Care Health Plan	George Scolari	+	Rogelio Lopez	O
20	Healthcare/ Pediatrician	Dr. Pradeep Gidwani	+		

FAMILY AND YOUTH SECTOR					
21	Family and Youth Liaison	Renee Cookson	E	VACANT	
22	Caregiver of child/youth served by the Public Health System	Debbie Stolz	O		
23	Youth served by the Public Health System (up to age 26)	Emma Rodriguez	+	Oniric Cirino	O
24	Youth served by the public health system (up to age 26)	Travis Webster	O	Micaela Cunningham	O
SUB-COMMITTEES (Non-voting members unless a member of the Council)					
-	Outcomes Committee	Angela Chen	+		
-	Executive Committee	Violeta Mora	+		
-	Early Childhood Committee	Aisha Pope/ Jennifer Kennedy	+/*		
-	Education Committee	Heather Nemour	+		
-	CYF CADRE	Julie McPherson/ Marisa Varond	+/*		
-	Family and Youth as Partners	Renee Cookson	E		

CYF Council Staff: Grisel Ortega and Darwin Espejo

I. Welcome and Introductions (Violeta Mora)

II. Approval of Minutes (Violeta Mora)

- Review of action items.
- The January 8, 2018 meeting minutes were approved.

III. Business Items (Yael Koenig)

- Suzette Southfox provided a summary of of Senate Bill 906. The bill proposes certification program as part of the California comprehensive mental health and substance use disorder delivery system and the Medi-Cal program. A handout and a link was provided for more information: <http://bit.ly/PeerPartner-SB-906>.
- On behalf of the NAMI San Diego, Children, Youth and Family Liaison, Suzette Southfox announced the 4th Annual Children's Mental Health Well-Being Celebration scheduled for May 2, 2018 in Azalea park in City Heights. Numerous activities are being planned for the event. Registration for the event is available at: <https://www.eventbrite.com/e/national-childrens-mental-health-awareness-day-tickets-44240721188>.
- Rose Woods provided an overview of proposed BHETA training topics for Fiscal Year 2018-19 with the following handouts:
 - Proposed training topics for feedback.
 - List of the current BHETA available trainings.
- Delrena Swaggerty announced the next CYF System of Care Principles Ad Hoc subcommittee's meeting, scheduled for March 23, 2018. The goal is to present the final document at the May 14, 2018 CYF Council meeting.
- Barry Fox and Celia Engleman will be retiring from County service. Yael Koenig presented plaques to them in recognition and appreciation for their service and contributions to the residents of San Diego County and the CYF Council.

IV. Mental Health Services Act (MHSA) (Adrienne Yancey)

- MHSA funding overview
 The MHSA budget for Fiscal Year 2017-18 is approximately \$181.5M which is approximately 34.4% of the BHS budget.
- State Audit
 The California State Auditor completed an MHSA audit and reported:

- ✓ The Department of Health Care Services (DHCS) and Mental Health Services Oversight and Accountability Commission (MHSOAC) could better ensure that the 59 county and local mental health agencies effectively use the MHSA funds they receive.
- ✓ A review was completed in Alameda, Riverside, and San Diego counties and it was determined that funds are allocated appropriately, and that MHSA funded projects are monitored effectively.
- ✓ There were no findings for San Diego County.

V. Sectors "Hot Topics"

Drug Medi- Cal (DMC) Organized Delivery System (ODS)-Presentation highlights (Dr. Nicole Esposito) (Handout)

- DMC overview
 - ✓ Substance Use Disorders (SUD)
 - Methamphetamine and Opioid related deaths continue to rise.
 - SUD is a major health and public safety concern.
 - Impacts families and communities in San Diego County.
 - ✓ San Diego County's adoption of DMC
 - Federal dollars will be leveraged to supplement local funding in order to effectively transform and improve the county's SUD treatment system effective July 1, 2018.
 - The goal is to increase services offered, network capacity, local oversight and also ensure efficient care coordination.
 - ✓ Changes in Medi-Cal Covered Services
 - Offer Medication Assisted Treatment (MAT), Withdrawal Management, Case Management, Recovery Support Services and physician consultations.
 - ✓ SUD treatment methods
 - American Society of Addiction Medicine's (ASAM) assessment criteria for clinicians.
 - MAT evidence-based practice.
 - ✓ Outcomes of Implementation
 - Timely access.
 - Reduce criminal recidivism and alcohol/drug use.
 - Successful and timely care transitions.
 - Quality of Life measures
 - Reduction of homelessness.
 - Increase in employment and educational activities.
 - Social supports.
 - ✓ Access to Services
 - OPTUM Access and Crisis Line.
 - Direct program level assessments.

VI. Subcommittee update Reports (See meeting handouts for full report) (Violeta Mora)

- CADRE (Shannon Jackson).
- Quality Improvement (QI).
- Quality Management (QM) (Steven Jones).
- Management Information Systems (MIS) (AnnLouise Conlow).
- Cultural Competence Resource Team (CCRT) (Edith Mohler).
- Trauma Informed System Integration (TISI) (Shannon Jackson).
- Outcomes (Angela Chen).

VII. Announcements (Renee Cookson) (Handouts included in the meeting packet)

- Family Support Partner Coaching Meeting-Every 4th Friday of the month (Handout).
- 3rd Annual Critical Issues in Child and Adolescent Mental Health Conference:
 Hidden in Plain Sight: Adolescent Brain and Identity Development is scheduled for March 23-24, 2018 at the Town and Country Convention Center in Mission Valley. More information at: <http://cicamh.com/> (Handout).
- Supplemental Security Income (SSI) for Children Eligibility Training- March 27, 2018 (Handout).
- 2018 CYF CSOC Conference: Unpacking Hope-Understanding the Unique Needs of Homeless Children, Youth and Families Experiencing Homelessness is scheduled for April 12, 2018 at Crowne Plaza Mission Valley. More information at <https://theacademy.sdsu.edu/programs/bheta/cyfsoc-conference-2018/> (Handout).

- Save the Date- Combined Council's Meeting, April 9, 2018 from 11 A.M.-12:30 P.M. at Scottish Rite- Claude Morrison (CYF Council hosting) (Handout).
- Save the Date- Friday, June 1, 2018 for the 32nd Annual Behavioral Health Recognition Dinner (Handout).

VIII. Director's Report (Alfredo Aguirre)

• Local Level

DMC-ODS

- ✓ Submission of the DMC-ODS Board Authority Letter to the Board of Supervisors (BOS) was postponed to March 27, 2018.

• National Level

Alfredo Aguirre recently attended the National Association of County Behavioral Health and Developmental Disability Directors (NACBHDD) Legislative Policy Conference highlights:

- ✓ The NACBHDD is affiliated with the National Association of Counties (NACo)
- ✓ NACBHDD renewed its commitment to preserve the Substance Abuse and Mental Health Services Administration's (SAMHSA) grants for both Mental Health and Substance Abuse (20% is allocated for Prevention).
- ✓ NACBHDD's strives to preserve the existing Medicaid system for health care coverage. Related legislation includes :
 - Advancing Care for Exceptional Kids (ACE Kids Act of 2017) is a congressional proposal to improve how care is delivered to children with complex medical conditions receiving Medicaid in the United States. The ACE Kids Act was introduced in the United States Senate as S.428 and in the House of Representatives as H.R. 3325.
 - The Family-Based Care Services Act of 2017 increases access to quality care by clarifying Medicaid policy that directly affects children, including foster children, with special behavioral health needs and/or medical disabilities, as well as vulnerable children living with kinship and biological caregivers. The act proposes to amend Medicaid to allow a standardized definition of family therapeutic care services. The Family Based Care Services Act was introduced in the United States Senate as S. 1357 and in the House of Representatives as H.R. 2290.
 - Youth Opioid Use Treatment Help Act of 2017, introduced in the House of Representatives as H.R. 3382, amends the Public Health Services Act's substance abuse program provisions to include access to opioid prevention and treatment for children, adolescents, and young adults.
 - Children's Health Insurance Program (CHIP) Mental Health Parity Act would ensure access to mental health services for children under CHIP. The CHIP Mental Health Parity Act was introduced in the United States House of Representatives H.R. 3192.
 - Ensuring Children's Access to Specialty Care Act of 2017 is a Senate Bill that amends the Public Health Services Act to include pediatric subspecialties in primary health services for purposes of the National Health Service Corps (NHSC). This bill would add Pediatric subspecialties like child psychiatry to roster positions and able to participate in the National Health Service Corps program (NHSC) with relevant loan forgiveness.
- ✓ Children with Multiple Challenges (CMC) was addressed at the February 1, 2018 issue of the NACBHDD publication, "Under the Microscope". CMC terminology pertains to children facing cross-system challenges. The article researched and written by Dennis Grantham includes the following statistics:
 - The United States has 78 million children that are under 18 years old.
 - About 18 million (23%) have an Adverse Childhood Experiences (ACE) score of 2 or more.
 - 16 million (20.5%) will or will have a diagnosable mental health disorder.
 - 14 million (18%) live in poverty, a common characteristic among CMC children.
 - 8 million (10%) live with at least one substance abusing parent.
 - 6 million (7%) have records with Child Welfare.
 - 700,000 (1%) experience separation from their parents or are in the foster care system.
 - 400,000 (less than 1%) children and young adults will experience homelessness. Some after fleeing abuse from their homes.
- ✓ Sandy Hook PROMISE-The STOP School Violence Act
 - Would re-authorize the 2001-2009 Bipartisan Secure our Schools Act.
 - Allows Department of Justice (DOJ) to give states grants for training and technical assistance to stop school violence.
 - Focus on treatment for the entire school ecosystem (including school personnel) and local law enforcement interventions with violent/unlawful activities.
 - Employs a funding strategy for grants.
 - Does not speak of firearms nor recommends arming educators.

IX. Action Items

Action Items	Action By	Action Due
DMC ODS Overview presentation to the Council by Dr. Esposito.	• Nicole Esposito, MD	Completed March 12, 2018.
Send 2018 External Quality Review (EQR) report to the CYF Council e-distribution lists.	• Grisel Ortega	Completed April 20, 2018. Report can also be found at: http://www.sandiegocounty.gov/hsa/programs/bhs/technical_resource_library.html .
CYF System of Care Principles Update		
<ul style="list-style-type: none"> Schedule a meeting with Yael Koenig to present the revised CYF System of Care Principles document. Finalize the proposed updated CYF System of Care Principles and send to the Behavioral Health Director for review and approval. Present the revised CYF System of Care Principles to the CYF Council. 	<ul style="list-style-type: none"> Grisel Ortega Yael Koenig Yael Koenig 	<ul style="list-style-type: none"> Completed. Meeting scheduled for April 25, 2018. April 2018. May 14, 2018 CYF Council meeting.
<ul style="list-style-type: none"> Provide an update on the GOALS MOU. Educationally Related Mental Health Services (ERMHS) presentation. Accessing & Leveraging Families Rights to Education (AlfredU) SchoolLink preview. Project Cal Well Update. 	<ul style="list-style-type: none"> Mara Madrigal-Weiss Cara Schukoske Renee Cookson Aidee Angulo and Julie McPherson Heather Nemour 	<ul style="list-style-type: none"> TBD. May 14, 2018 CYF Council meeting. May 14, 2018 CYF Council meeting. June 11, 2018 (tentative) CYF Council meeting. June 11, 2018 CYF Council meeting.
Provide the NACBDD the February 1, 2018 "Under the Microscope" issue on GMC and the Sandy Hook PROMISE The STOP the School Violence Act document.	• Grisel Ortega	Completed. Email sent May 10, 2018.

Sub-Committees/Sectors/Workgroups Meetings Information:

Outcomes: Meets the 1st Tuesday of the month- 3255 Camino del Rio South, San Diego CA 92108 in La Vista Room- from 11:30 A.M. to 1:00 P.M.

Early Childhood: Meets the 2nd Monday of the month- 3160 Camino Del Rio South, San Diego, CA 92108- Suite 101 from 10:45 A.M to 12:15 P.M.

Education Advisory Ad Hoc: Meets As Needed.

TAY Council: Meets the 4th Wednesday of the month-3860 Calle Fortunada, San Diego, CA 92123 (Directions at: <https://binged.it/29lQQ4W>) from 3:00 to 4:30 P.M.

CYF CADRE: Meets quarterly the 2nd Thursday of the month at NAMI San Diego, 5095 Murphy Canyon Road, Suite 320, San Diego, CA 92123 from 1:30 to 3:00 P.M.

CCRT: Meets 1st Friday of the month at the Health Services Complex-3851 Rosecrans Street, San Diego, CA 92110 from 10:00 to 11:30 A.M.

Family and Youth Sector: Meets the 4th Thursday of the month at 8964 N Magnolia Street, Santee, CA 92071 from 6:30 to 8:00 P.M.

Family and Youth as Partners: Meets the 3rd Thursday of the month at 3255 Camino del Rio South, San Diego CA 92108 in Del Mar Room from 2:00 to 3:30 P.M.

Private Sector: Meets As Needed.

HHSA TEN YEAR ROADMAP BEHAVIORAL HEALTH SERVICES



In July 2016, Health and Human Services Agency (HHSA)/Behavioral Health Services (BHS) presented the Ten Year Roadmap – a major endeavor which seeks to address the most serious behavioral health issues affecting San Diego County over the next ten years. The goal of the Roadmap is to guide BHS planning to provide quality behavioral health services and to empower individuals with behavioral health needs to live healthy, safe and thriving lives. The Roadmap is a dynamic, living document, updated annually to incorporate new priorities from our community partners and HHSA/BHS leadership.

OUR VISION, MISSION AND VALUES	OUR GUIDING PRINCIPLES	OUR COMMITMENT
<p>Vision: <i>Live Well San Diego</i> – A region that is Building Better Health, Living Safely and Thriving</p> <p>Mission: To efficiently provide public services that build strong and sustainable communities</p> <p>Values: Integrity – Stewardship – Commitment</p>	<p>Promote Recovery, Resiliency, Discovery and Well-Being; Provide Trauma-Informed and Culturally Competent Services; Collaborate with Partners, Stakeholders and the Community; Maximize Funding; Make Data Driven Decisions; Ensure Regulatory Compliance; Utilize Evidence Based/Informed Practices; Embrace Diversity and Inclusion</p>	<p>Work in partnership with our communities to provide quality behavioral health services that empower individuals with behavioral health needs to live healthy, safe and thriving lives.</p>

The table below outlines the 12 Priorities for Year Two (Fiscal Year 2017-18) which are listed in alphabetical order. Each Priority is guided by a Ten Year Vision with clear Strategies that outline our efforts to accomplish that Vision.

BHS TEN YEAR ROADMAP PRIORITIES * VISION STATEMENTS * STRATEGIES Fiscal Years 2016-2026	
<p>Aging Population</p> <ul style="list-style-type: none"> ○ Vulnerable older adults with serious mental illness receive integrated, geographically accessible, age-appropriate services to address their complex needs. <ul style="list-style-type: none"> ◆ Support caregivers in their role and prevent the onset or progression of their mental health conditions by educating and connecting them to resources. ◆ Continue and expand training of geriatric specialist staff to include early identification of cognitive deficits in older adults receiving treatment in mental health programs. <p>Care Coordination</p> <ul style="list-style-type: none"> ○ Persons with serious mental health and/or substance use disorders have all needs met in a timely manner through an integrated continuum of care. <ul style="list-style-type: none"> ◆ Apply whole person-centered principles to intensify and further develop care coordination models that are tailored to the needs and level of care for the individual. ◆ Promote integration of Whole Person Wellness by advancing relationships with the community to support health, housing and human services, including private, public, family, consumer and education partners. ◆ Utilize and broaden the use of various IT systems, including ConnectWellSD and San Diego Health Connect, to promote care coordination and to offer those in need of services innovative platforms including digital solutions. 	<p>Children and Youth Population</p> <ul style="list-style-type: none"> ○ Children and youth are healthy, safe, lawful, successful in school and in their transition to adulthood, while living in nurturing homes with families. <ul style="list-style-type: none"> ◆ Ensure a full continuum of care through family-centered and youth-informed services that are compassionate and sensitive to the unique developmental needs of children and youth. ◆ Provide services that empower children and youth to build a healthy sense of self and have confidence to make sound decisions so they thrive in an ever-changing world. ◆ Strengthen partnerships with children/youth's circle of influence to create a supportive environment. <p>Crisis Services</p> <ul style="list-style-type: none"> ○ All persons experiencing a psychiatric emergency have access to timely and appropriate services to ensure their safety and that of the community. <ul style="list-style-type: none"> ◆ Develop a service model that ensures timely, trauma-informed, culturally-competent crisis intervention services while considering the unique needs across the lifespan. ◆ Utilize community-based, peer-driven and family-informed crisis intervention models to reduce the reliance on law enforcement intervention and emergency department utilization. ◆ Ensure all crisis centers can serve as a point of entry in the full continuum of care. <div> <p>Priority</p> <ul style="list-style-type: none"> ○ Ten Year Vision ◆ Strategy </div>

Strategies will be continuously refined with input from the annual BHS Community Engagement Forums, as well as other Stakeholder meetings, and are dependent on funding availability and/or new and changing laws and regulations.

HHSA TEN YEAR ROADMAP BEHAVIORAL HEALTH SERVICES



Homeless Population

- All persons with serious mental health and/or substance use disorders who are experiencing homelessness have treatment and housing to support their recovery.
 - ◆ Ensure the appropriate level of care for persons experiencing homelessness and implement an array of housing options that promote community integration.
 - ◆ Work in partnership with housing authorities and developers to acquire permanent supportive housing.
 - ◆ Reduce stigma through education, as well as incentivize and collaborate with landlords to increase housing inventory.

Justice-Involved Population

- Persons with serious mental illness or substance use disorders who are justice-involved have access to integrated treatment and supportive services to increase public safety and reduce recidivism.
 - ◆ Increase access and connectivity between the justice system and behavioral health to ensure clients are receiving the appropriate level of care.
 - ◆ Deliver best practice services demonstrated to improve wellness and reduce recidivism for justice-involved individuals, including those transitioning from custody to the community.
 - ◆ Evaluate impact and pursue process improvement using standard data and definitions to improve outcomes and support recovery.

Long-Term Care

- Persons receiving treatment for serious mental illness in long-term care settings successfully reintegrate into the community.
 - ◆ Support recovery in the least restrictive level of care.
 - ◆ Strengthen existing transitional step-down care to maximize the individual's reintegration into the community.
 - ◆ Evaluate and develop preventative treatment and housing strategies to minimize the need for long-term care.

Organized Delivery System for Substance Use Disorders

- An integrated, whole person system of care that utilizes best practices based on an individual's specific needs and within the appropriate level of care to promote successful recovery.
 - ◆ Support those on the recovery journey by implementing best practices to increase access, ensure treatment effectiveness and improve outcomes.
 - ◆ Promote a culture of acceptance for persons needing services.
 - ◆ Advocate for federal legislative change to allow for appropriate, timely sharing of vital health information to optimize quality care.

Prevention

- All persons are connected within their community and empowered to take action before there is a need.
 - ◆ Pursue policy and community change to ensure all persons live in an environment free of substance use harm.
 - ◆ Champion efforts to train individuals to be able to recognize and support fellow community members impacted by mental health and/or substance use issues.
 - ◆ Foster communities free of stigma in which persons affected by mental health and/or substance use issues are able and willing to seek services.

Suicide Prevention

- There are zero suicides in San Diego County.
 - ◆ Foster an ongoing expectation of organizations to implement zero suicide strategies.
 - ◆ Advance goals consistent with the recommendations from the San Diego County Zero Suicide Strategic Plan.
 - ◆ Leverage innovative methods to measure the impact of prevention and intervention strategies.

Unserved and Underserved Populations

- Diverse unserved and underserved communities are aware, empowered and able to access services appropriate to their unique needs.
 - ◆ Recognize the impact of social determinants of health, disproportionality and health disparities to align prevention and systems of care strategies.
 - ◆ Foster an inclusive, accepting and culturally-competent environment that celebrates diversity.
 - ◆ Offer culturally relevant and accessible services to address the needs of diverse populations.

Workforce

- Our system of care has a skilled, adaptive and diverse workforce that meets the needs of those we serve.
 - ◆ Advocate for policies and processes that establish innovative recruitment, hiring and retention of a skilled and diverse workforce.
 - ◆ Pursue team based care and innovative workforce solutions to increase access, improve outcomes and increase efficiency.
 - ◆ Develop a career ladder for assisting individuals with lived experience in competitive employment as well as designated peer positions.

Priority

- Ten Year Vision
- ◆ Strategy

The Ten Year Roadmap can be found on the Behavioral Health Services Network of Care: www.sandiego.networkofcare.org/mh (click on Ten Year Roadmap)

Strategies will be continuously refined with input from the annual BHS Community Engagement Forums, as well as other Stakeholder meetings, and are dependent on funding availability and/or new and changing laws and regulations.



MAY IS MENTAL HEALTH MONTH 2018 CALENDAR OF EVENTS



April 28 **NAMI 5K Walk and HHSA Wellness Expo**

Walk to raise awareness and end stigma by encouraging others to learn about mental health. Liberty Station San Diego 7:30 a.m.-11:00 a.m.

April 30 **Send Silence Packing- Cal State San Marcos**

The exhibit is a powerful visual display to raise awareness and educate the public about student suicide

May 1-7 **Children's Mental Health Awareness Week**

A week dedicated to raising awareness about the mental health needs of America's children.

May 2 **National Children's Mental Health**

Awareness Day

Partnering for Health and Hope Following Trauma. Azalea Recreation Center; 2596 Violet St; San Diego 92105.

May 2 **Good Mental Health is Ageless**

This presentation dispels myths, stigma, and barriers surrounding older adults' mental health. Held at the Spring Valley Library, 836 Kempton St from 11:30 a.m. to 12:30 p.m.

May 9 **Send Silence Packing San Diego City College**

The exhibit is a powerful visual display to raise awareness and educate the public about student suicide

May 11 **East County Senior Health Fair**

Providing resources, health screenings, prescription consultation and fitness demonstrations and balance screenings. La Mesa Community Center 10:00 a.m. to 1:00 p.m.

May 17 **Send Silence Packing Palomar College**

The exhibit is a powerful visual display to raise awareness and educate the public about student suicide

May 19 **Sharp Changing Minds - Minds Matter**

A day of learning for those facing behavioral health challenges and their families and friends.

May 19 **The Fellowship Center- Walk for**

Recovery

Includes a Five-mile walk, resource fair, barbecue and music.

June 1 **Behavioral Health Recognition Dinner**

A dinner recognizing the people who work to support clients and family members in their efforts to achieve recovery without stigma and the unofficial close to May is Mental Health Awareness Month.

People

experiencing a mental challenge can access

services by calling the County's 24 hour, multi-lingual Access and Crisis Line at (888) 724-7240.

Resources are also available at **NAMI San Diego** or the **It's Up to Us** website.



Up2SD.org

If you are aware of an upcoming event not listed here, please contact Nancy Page (nancy.page@sdcountry.ca.gov) or 619-563-2721 and we will add to the calendar.



ANNUAL SUMMIT

on Student Engagement and Attendance
EVERY STUDENT, EVERY DAY!

SAVE THE
DATE

OCT
12 2018

Marina Village Conference Center
1936 Quivira Way, San Diego
8 a.m. to 2 p.m.

RESOURCE FAIR
9 to 10 a.m.

EDUCATORS SCHOOLS CHARTER SCHOOLS

- Attendance staff
- Counselors
- Nurses
- Principals
- Psychologists
- School safety personnel
- School social workers
- Superintendents
- Wellness committee members
- Parent Leaders

Marco Gonzalez
858-292-3532
mgonzalez@sdcoe.net



Save the Date

**Children, Youth and Families (CYF)
Behavioral Health Systems of Care Council**

As Council representative or alternate appointed by the Behavioral Health Director we want to ensure that you have all the necessary information to be an informed and effective council member.

**All Council members and participants are welcomed to attend.
We encourage all new council members to participate.**

CYF Council Orientation

Monday, August 13, 2018 | 9:00 to 10:30 p.m.

Location TBD

Please RSVP to:

Grisel Ortega-Vaca (619) 563-2772 | Grisel.Ortega@sdcounty.ca.gov



**LIVE WELL
SAN DIEGO**

**Children, Youth and Families Behavioral Health System of Care Council
May 14, 2018**


Strategic Planning Meeting Input
(Tentatively scheduled for 6/11/18 or 7/9/18)

Input can also be submitted via email to Grisel Ortega-Vaca at: Grisel.Ortega@sdcounty.ca.gov

***Please write recommendations/Ideas/input for upcoming Strategic Planning Meeting
format/topics/etc.***


EDUCATIONALLY RELATED MENTAL HEALTH SERVICES

Cara Schukoske
Executive Director for Special Education Services
Student Services
May 14, 2018




What happened to AB 3632 mental health services?

- AB 114, the 2011-12 education budget trailer bill, eliminated all statute and regulations related to AB 3632 which had been the authority for providing mental health services to students in special education and who required mental health services in order to benefit from the free and appropriate public education (FAPE) to which they are entitled.
- The bill transferred responsibility and funding for educationally related mental health services from county mental health and child welfare departments to education.



ERMHS Assessments

- The scope of an ERMHS assessment is governed by its referral question. It requires the assessor to gather the child's history and interview educational staff, the child's therapist, if any, parents, and others. It requires an observation of the child in her educational environment. Then the assessor must write a report identifying what symptoms the child exhibits that may be interfering with her access to education, and make a suggestion to the child's IEP team about placement." (*San Mateo-Foster City School District v. Student* (2014) OAH Case No. 2014100402)



ERMHS Assessments continued...

- The determination of eligibility for ERMHS requires a nexus between unique needs and the requirement of supports of those needs to ensure access to education:
 - What is manifesting in the school setting?
 - How is performance in the school setting impacted by the mental health issues?
- The determination of whether a student is entitled to ERMHS as part of his / her FAPE might include consideration of needs in the school *and* home settings.



ERMHS Assessments continued...

- Generally, students qualify for special education first and later qualify for ERMHS.
- There is a duty to assess when there is a suspicion the student requires ERMHS.
- The scope of ERMHS is based on the student's emotional and mental health needs in order to access education.



Child Find Triggers for ERMHS

- Declining grades
- Substance abuse
- Disciplinary infractions
- Prescription medication
- Diagnosis
- Psychiatric hospitalization
- Suicide attempts or other self-harm
- Behavioral emergency/incident reports
- Absenteeism
- Excessive visits to nurse, counselor, psychologist, etc.



Where do the needs manifest?

- The ultimate connection for a student's need for ERMHS must be found in the school setting (after all, "educationally related" is in the name...)
- But, a student's educational performance might be affected at home — e.g., failure to complete homework; absences; tardy arrivals; etc. ...



Who refers?

- Anyone
- Parent/guardian must consent to assessment
- Districts have what is known as child find responsibilities, or the duty to assess when there is a suspicion the student requires ERMHS



Referral best practices for outside service providers:

- If appropriate, discuss concerns with the student's parent(s).
- If appropriate, ask parent to sign an exchange of information form.
- Call the school of attendance and request contact information for a program specialist or ERMHS coordinator.
- Contact the program specialist or ERMHS coordinator and say that you want to make an ERMHS referral.
- If appropriate, provide an exchange of information form signed by a parent.



Referral best practices for anyone:

- Call the school of attendance and request contact information for a program specialist or ERMHS coordinator.
- Contact the program specialist or ERMHS coordinator and say that you want to make an ERMHS referral.
- Keep in mind that, unless you're the parent, school staff will be unable to share student information with you without the proper authority.



Who is qualified to conduct an ERMHS assessment?

- School psychologist, with training or experience in counseling
- Psychologist with training and experience in counseling
- Credentialed counselor
- Licensed Clinical Social Worker
- Marriage and Family Therapist



How do districts provide ERMHS?

- Districts choose for themselves how to assess and provide services
- Some districts use in-house staff
- Some districts contract with outside agencies
- Some districts contract with SDCOE through the North Coastal Consortium for Special Education for case management of students in residential placements



What services are part of ERMHS?

- Psychological services,
- Social work services,
- School nurse services,
- Counseling services (20 U.S.C. § 1401(26)(A); Ed. Code § 56363), and
- Parent counseling and training. (34 C.F.R. § 300.34(a).)



Continuum of ERMHS

- General curriculum
- District-sited special education programs & services
- Counseling services
- Day treatment programs
- Residential treatment facilities



Counseling

- Counseling services means:
 - Services provided by qualified social workers, psychologists, guidance counselors and other qualified personnel. (34 C.F.R. § 300.34(c)(2).)
- Parent counseling means:
 - Assisting parents in understanding the special needs of their child; providing parents with information about child development, and helping parents to acquire the necessary skills that will allow them to support the implementation of their child's IEP or IFSP. (34 C.F.R. § 300.34(c)(8).)



Counseling continued...

Counseling may include:

- Educational counseling in which the pupil is assisted in planning and implementing his or her immediate and long-range educational program;
- Career counseling in which the pupil is assisted in assessing his or her aptitudes, abilities, and interests in order to make realistic career decisions;
- Personal counseling in which the pupil is helped to develop his or her ability to function with social and personal responsibility; and/or
- Counseling and consultation with parents and staff members on learning problems and guidance programs for pupils. (5 C.C.R. § 3051.9 (b))



Psychological Services

Psychological Services may include:

- Counseling provided to an individual with exceptional needs by a credentialed or licensed psychologist or other qualified personnel;
- Consultative services to parents, pupils, teachers, and other school personnel;
- Planning and implementing a program of psychological counseling for individuals with exceptional needs and parents; and/or
- Assisting in developing positive behavioral intervention strategies. (5 C.C.R. § 3051.10(a).)



Social Work Services

Social Work Services may include:

- Preparing a social or developmental history on a child;
- Group and individual counseling with the child and family;
- Working in partnership with parents and others on those problems in a child's living situation that affect the child's adjustment in school;
- Mobilizing school and community resources to enable the child to learn as effectively as possible in his or her educational program; and/or
- Assisting in developing positive behavioral intervention services. (34 C.F.R. § 300.34(i)(14).)



School Nurse Services

- School nurses oversee the administration of medication that is necessary to be taken at school



Does ERMHS include drug treatment?

- "A child's unique educational needs include the child's academic, social, health, emotional, communicative, physical, and vocational needs, but do not include medical needs and drug treatment." (*Santa Monica-Malibu Unified School District v. Student* (2014) OAH Case No. 2014100025.)



Residential Treatment continued...

- Generally, a student requires a residential placement when necessary to meet the student's *educational needs*. (*Ashland School District v. R.J.* (9th Cir. 2009) 588 F.3d 1004; *Clovis Unified School District v. California Office of Administrative Hearings* (9th Cir. 1990) 903 F.2d 635.)
- The Individuals with Disabilities Education Act does not authorize residential care merely to enhance an otherwise sufficient educational program. (*Burke County Bd. of Educ. v. Denton* (4th Cir. 1990) 895 F.2d 973, 980 quoting *Abrahamson v. Hershman* (1st Cir. 1983) 701 F.2d 223, 227.)



Residential Treatment continued...

- "If residential placement is necessitated by medical, social, or emotional problems that are segregable from the learning process, then the local education agency need not fund the residential placement." (*Denton, supra*, 895 F.2d 980; cf. *Clovis, supra*, 903 F.2d 635)



Questions?




**alfred**
Assessing & Leveraging Families' Rights to Education

Designed to help families, caregivers, and school-based professionals
navigate the often confusing special education system.

For families who have a child with a disability, navigating
the public education system is very hard.

Sifting through legal jargon, trying to understand education
codes and how they apply to their child, navigating the IEP
meeting process without any guidance. With existing resources,
assessing and understanding ones rights is a difficult if not
demoralizing process that leaves many feeling helpless.

**alfred**
Assessing & Leveraging Families' Rights to Education

A Modern Solution

- alfred is a companion app that
addresses a familiar unique
situation, and helps them
understand and leverage their
rights.
- alfred is customized to include
key resources and laws that are
specific to your school district or
greater region.
- All the information that a family
could need is finally clearly
organized and easily accessible
for all.

Clear Guidance

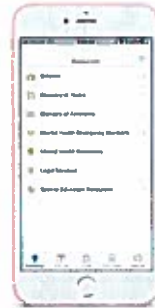
alfREDU walks you through the entire process, starting with assessing your families situation. Key questions about diagnostic categories, procedural rights, and title II are answered right off the bat. It's easy for the user to navigate to a question that is relevant to them. There is also an extensive section on due process, mediation, and hearings, as well as a glossary of legal and technical terms that makes it easy for people to understand their rights in any situation.



Organized Resources

alfREDU will not only help you understand and assess your situation, but it is also packed with resources to help you take the next steps.

- Overview of Special Education Procedures
- Glossary of Terms and Acronyms
- Examples of Legal Services
- Answering the 10 Tips
- School Schedules
- Find a Counselor for SP Services



- Free mobile app!
- English, Spanish, and Arabic
- Search 'alfREDU' or 'NAMI San Diego'



**Sub-Committee Update Report to CYFBHSOC Council
May 14, 2018**

Sub-committee: Early Childhood

Lead: Aisha Pope and Jennifer Kennedy (Co-Chairs)

Update

- Expanded ECMH subcommittee membership to include regular participation by BHETA/SOC and Early Care and Early Childhood Education partners.
- Provided recommendations and feedback for Fall 2017 and Fall 2018 We Can't Wait Conferences related to overall conference themes, break-out session topics, and subject matter experts.
- Reviewed Diversity Informed Infant Mental Health tenets published by Irving Harris Foundation and discussed how current practices align with tenets. ECMH subcommittee will revisit topic at a future date vis a vis the work of BHS Cultural Competency efforts.
- Subcommittee membership participated in several learning opportunities to strengthen the regional system and provide recommendations to BHS SOC on potential future opportunities for the region, where appropriate:
 - Zero To Three National Conference held in San Diego in December;
 - Training on DC:0-5™ Diagnostic Classification of Mental Health and Developmental Disorders of Infancy and Early Childhood
 - The Ripple Effect: Enhancing Trauma Informed Practice one day workshop in December.
- Initiated small group discussions for three goal areas:
 - Identify and share best practices for 0-5 population related to assessment, intervention, and service delivery models
 - Improve how we engage and support complex families including promoting best practices in care coordination/case management
 - Make recommendations on best practices and trauma informed methods to support healthy transitions for 0-5 youth in foster care
- Small groups currently identifying scope of goals, short and long term outcomes for goals, and a timeline for achieving actionable goals.

FY17/18 Goals/Focus Areas

- Maintain inclusion of BHETA/SOC Training related member on ECMH to ensure ready communication of identified ECMH related training topics
- Have ECMH representative attend TAY and Adult Councils and advocate for essential parenting/dyadic services to pregnant and parenting clients
- Offer training needs, trainer suggestions, and feedback for annual We Can't Wait Conference
- Identify and share best practices for 0-5 population related to assessment, intervention, and service delivery models



- Improve how we engage and support complex families including promoting best practices in care coordination/case management
- Make recommendations on best practices and trauma informed methods to support healthy transitions for 0-5 youth in foster care
- Strengthen partnership between Early Childhood Education (ECE) and ECMH subcommittee

☒ Sub-Committee has 4 sector representation

☐ Sub-Committee is recruiting for 4 sector representation and specifically looking for committee members to represent:

- ☐ Private Sector
- ☐ Public Sector
- ☐ Education Sector
- ☐ Family/Youth Sector

To join the sub-committee please contact Aisha Pope at apope@centerforchildren.org or Jennifer Kennedy at jkennedy@aapca3.org

Sub-Committee meets:

Second Monday of the month 10:45am-12:15pm

AAP Offices – 3160 Camino Del Rio South First Floor Suite 101 – San Diego, CA

**Sub-Committee Update Report to CYFBHSOC Council
May 14, 2018**

Sub-committee: Education Advisory
Lead: Heather Nemour

Update

-

Update: 2017/18 Goals/Focus:

- SDCOE will continue to provide guidance, consultation, and technical assistance to all 42 school districts to ensure they meet the requirements of AB2246 (Legislation passed in 2016-17 that states every school district needs to have a comprehensive suicide prevention policy in place that includes prevention, intervention and postvention).
- SDCOE will continue to provide trainings in Youth Mental Health First Aid in an effort to train K-12 educators, school personnel and parents among the 42 school districts.
- SDCOE will continue to collaborate with CHIP to co-host ASIST: (Applied Suicide Intervention Skills Training), QPR: ("Question, Persuade, and Refer") Gatekeeper Training and GLSN (Gay, Lesbian, and Straight Network) in an effort to train K-12 educators and school personnel among the 42 school districts in suicide prevention and positive school climate.
- SDCOE will partner with the County of San Diego Health and Human Services Agency, LIVE WELL San Diego on SDCOE's Annual Summit on Student Engagement and Attendance. Understanding the value and power of relationships is essential in the work with youth. Connections made in and out of the classroom are directly tied to attendance. Attendees will learn about best practices, latest trends, and strategies for building and maintaining engagement with youth and families.

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- ☐ Family/Youth Sector

To join the sub-committee please contact Heather Nemour at heather.nemour@sdcoe.net

Sub-Committee meets- Ad-Hoc as needed



**Sub-Committee Update Report to CYFBHSOC Council
May 14, 2018**

Sub-committee: Quality Improvement- Performance Improvement Team
Lead: Liz Miles

Update

- The Performance Improvement Team would like to thank all of the providers that collaborated in the efforts to complete California's new network adequacy requirements. Although challenging, we foresee this process becoming easier as we move forward. We are currently working with our reporting partners Optum Healthcare to streamline the data collection process.
- We recently received approval to move forward on our clinical and non-clinical Performance Improvement Projects (PIPs). Our clinical PIP addresses the issue of low parent engagement in therapy effecting client outcomes while our non-clinical PIP focuses on the main reasons clients discharge from outpatient services and further service utilization after discharge. If any programs are interested in participating, please contact Dasha.dahdouh@sdcounty.ca.gov.

**Sub-Committee Update Report to CYFBHSOC Council
May 14, 2018**

Sub-committee: CYF Liaison

Lead: Renee Cookson

Update

- 4th Annual Children's Mental Health Well-Being Celebration-Partnering for Health and Hope Following Trauma

FY17/18 Goals/Focus Areas

NAMI San Diego Children Youth & Family Liaison along with the collaboration of Behavioral Health Services Children System of Care (BHSCSOC), San Diego Youth Services (SDYS), Transitional Age Youth (TAY), and the San Diego Center for Children successfully coordinated and delivered the 4th Annual Children's Mental Health Well-Being Celebration on May 2, 2018 with Family (MC-TAY), Public (EM, DE), Private (SD, LK) and Education Sector (through collaboration of the Prevention Early Intervention Program, which is a school-based program) representatives on the planning committee. We expanded outreach and promotion of event to include digital platforms (Facebook Live) in addition to making sure event was represented throughout BHS & HHSA calendar network.

- The 4th Annual May Celebration included two performances from the TAY community, over 100 give-a-ways, 17 resource tables for Children, Youth & Families, Stigma Busting Basketball (where youth could take home a basketball after discussing stigma), food for all, UCSD interactive dance, hula hoops, face painting, Sundiata Kata drum circle and an interactive art project for our final product.
- In attendance were families, youth, children and providers. 47 total signed in; 37 from registration, 10 volunteers, plus all the vendors on site.
- Costco sandwiches, chips and water were donated from SDYS-GROWS (Greater Recruitment and Outreach for Workforce Services-OSHPD grant).
- Online satisfaction survey for vendors was created, we will document outcome for better services next year
- Achieve Four Sector [Family, Public, Private, and Education] representation on this subcommittee. We are always looking to grow subcommittee in all sectors. We are reaching out to school counselors, teachers and more to achieve school representation on subcommittee. But all are welcome!
- April 19th subcommittee "Ear to the Ground" outcomes-Parent partners looking for ways to talk to parents about their own MH, that gets in the way of child's progress, more access to elementary school programs so parents can find the education, resources and support for early BHS or MHS for children, SDOEDU summit event for teachers and counselors planning is underway. Will follow up to see if CYFL can be part of by presenting and having outreach booth.



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- ☒ Public Sector
- ☒ Education Sector
- ☒ Family/Youth Sector

To join the sub-committee please contact Renee Cookson at
ReneeCookson@namisd.org

Family and Youth As Partners:

Sub-Committee meets the 3rd Thursday of the each month from 2:00 to 3:30 P.M.
in the Del Mar Room- 3255 Camino Del Rio South, San Diego, CA 92108

Family and Youth Sector:

Meets quarterly the 4th Thursday of the month
at 8964 N Magnolia St, San tee, CA 92071 from 6:30 to 8:00pm

