



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

MEETING AGENDA

February 10, 2020 - 9:00-10:30 A.M.

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

I. Welcome and Introductions (Minola Clark Manson)

2 minutes

II. Approval of Minutes (Dori Gilbert)

3 minutes

- January 13, 2020 minutes-Handout-Pages 3-11
- Review Action Items from January 13, 2020

III. Business Items (Yael Koenig)

10 minutes

- Update on Advancing the Behavioral Health Continuum of Care Through Regional Collaboration and Innovation Board of Supervisors (BOS) Letter-January 28, 2020 Handout-Pages 13-26
- Mental Health Services Oversight and Accountability Commission (MHSOAC) Vision for Mental Health Student Services Act Grant-Handout-Page 27
- Family First Prevention Services Act-Handout Pages 29-30
- Meth and Families Newsletter-Handout-Page 31

IV. Mental Health Services Act (MHSA) Update (Dr. Danyte Mockus-Valenzuela)

10 minutes

Community Engagement Forums Update

V. Sectors "Hot Topics" (Minola Clark Manson)

60 minutes

Bi-Annual Sub-Committees'	Updates/Reports-Handouts
January 13, 2020 Meeting	February 10, 2020 Meeting
 ✓ Executive-Completed ✓ Early Childhood-Completed ✓ Education-Completed ✓ CADRE-Completed 	 ✓ TAY Council-Pages 33-34 ✓ Family and Youth-Pages 35-42 ✓ CCRT-Pages 43-45 ✓ Outcomes-Pages 47-51 ✓ Private-Page 53 ✓ Training-Pages 55-56

Announcements (Dori Gilbert) VI.

2 minutes

- Working Together Training-Handout-Page 57
- Critical Issues in Child and Adolescent Mental Health Conference-March 12-13, 2020. Register at https://cicamh.com/-Handout-Page 58
- Brain XP Day 2020: Teens Helping Teens- Scheduled for April 4, 2020-Handout-Page 59
- Save the Date: April 13, 2020 Combined Councils-Handout-Page 60
- Save the Date: May 8, 2020: Youth Mental Health Well Being Celebration-Handout-Page 39

Director's Report (Luke Bergmann) VII.

3 minutes

Next Executive Committee Conference Call:

Date: February 24, 2020 Time: 10:00 to 10:30 A.M.

Location: Via Conference Call

Next CYF Council Meeting:

Date: Monday, March 9, 2020 Time: 9:00 to 10:30 A.M.

Location: Shell Room- Scottish Rite Center

Sub-Committees/Sectors/Workgroups Meetings Information:

CCRT: Meets the 1st Friday of the month-6367 Alvarado Court Ste. 105, San Diego, CA 92120 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 from 10:45 A.M. to 12:15 P.M. **Education**: Meets as needed.

Family and Youth As Partners: Meets the 3rd Thursday of the month at 5095 Murphy Canyon Rd – Suite 320, San Diego, CA 92123 from 1:30 to 3:00 P.M. Family/Youth Sector: Meets quarterly the 4th Thursday of the month at 5095 Murphy Canyon Rd - Suite 320, San Diego, CA 92123 from 6:30 to 8:00 P.M. Outcomes: Meets the 1st Tuesday of every other month-La Vista Room from 11:30 A.M. to 12:30 P.M. Next meeting is April 7, 2020

Private Sector: Meets as needed.

TAY Council: Meets the 4th Wednesday of the month-National University,9388 Lightwave Ave. Room #118, San Diego, CA 92123 from 3:00 to 4:30 P.M.

County of San Diego Children, Youth and Families Behavioral Health System of Care Council Vision, Mission, and Principles

Council Vision:

Wellness for children, youth and families throughout their lifespan.

Council Mission:

Advance systems and services to ensure that children and youth are healthy, safe, lawful, successful in school and in their transition to adulthood, while living in nurturing homes with families.

Council Principles:

- 1. <u>Collaboration of four sectors</u>: Coordination and shared responsibility between child/youth/family, public agencies, private organizations and education.
- 2. <u>Integrated</u>: Services and supports are coordinated, comprehensive, accessible, and efficient.
- 3. <u>Child, Youth, and Family Driven</u>: Child, youth, and family voice, choice, and lived experience are sought, valued and prioritized in service delivery, program design and policy development.
- 4. <u>Individualized</u>: Services and supports are customized to fit the unique strengths and needs of children, youth and families.
- 5. **Strength-based:** Services and supports identify and utilize knowledge, skills, and assets of children, youth, families and their community.
- 6. <u>Community-based</u>: Services are accessible to children, youth and families and strengthen their connections to natural supports and local resources.
- 7. <u>Outcome driven</u>: Outcomes are measured and evaluated to monitor progress and to improve services and satisfaction.
- 8. <u>Culturally Competent</u>: Services and supports respect diverse beliefs, identities, cultures, preference, and represent linguistic diversity of those served.
- 9. <u>Trauma Informed</u>: Services and supports recognize the impact of trauma and chronic stress, respond with compassion, and commit to the prevention of re-traumatization and the promotion of self-care, resiliency, and safety.
- 10. <u>Persistence</u>: Goals are achieved through action, coordination and perseverance regardless of challenges and barriers.









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

MEETING MINUTES

January 13, 2020 – 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

	+=IVIember in A			==EXCUSEO	
	CONSTITUENCY	MEMBER	STATUS	ALTERNATE	STATUS
		PUBLIC SECT	1		
1	Behavioral Health Advisory Board (BHAB)	Rebecca Hernandez	0	Bill Stewart	+
2	Behavioral Health Services (BHS)	Dr. Laura Vleugels	+	VACANT	
3	Public Safety Group/ Probation	Dr. Geoff R. Twitchell	O	Chrystal Sweet	0
4	Child Welfare Services (CWS)	Kimberly Giardina	0	Norma Rincon represented by Steven Wells	+
5	HHSA Regions	Dori Gilbert	+	Jennifer Sovay	0
6	Public Health	Dr. Thomas R. Coleman	+	Adrienne Yancey	0
7	Juvenile Court	H. Judge Kimberlee Lagotta	0	Beth Brown +	
8	First 5 Commission	Alethea Arguilez	0	Dulce Cahue- Aguilar	Е
		EDUCATION SE	CTOR		
9	Special Education Local Plan Area (SELPA)	Cara Schukoske	0	Jamie Tate - Symons	0
10	Regular Education Pupil Personnel Services	Violeta Mora	+	Heather Nemour	0
11	School Board	Barbara Ryan	0	VACANT	
12	Special Education	Yuka Sakamoto	+	Aidee Angulo	+
		PRIVATE SEC	TOR		
13	San Diego Regional Center (SDRC) for Developmentally Disabled	Peggy Webb	E	Therese Davis	+
14	Alcohol and Drug Service Provider Association (ADSPA)	Angela Rowe	+	VACANT	+
15	Alcohol and Drug Service Provider Association (ADSPA)	Marisa Varond	+	VACANT	
16	Mental Health Contractors Association	Julie McPherson	Е	Minola Clark Manson	+
17	Mental Health Contractors Association (MHCA)	Michelle Ly	+	Michelle Hogan	0
18	Fee- For-Service (FFS) Network	Dr. Sherry Casper	0	VACANT	
19	Managed Care Health Plan	George Scolari	+	Kathleen Lang	0





20	Healthcare/ Pediatrician	Dr. Pradeep Gidwani	0	VACANT	
	FAN	ILY AND YOUT	H SECTO	R	
21	Family and Youth Liaison	Renee Cookson	0	Valerie Hebert	+
22	Caregiver of child/youth served by the Public Health System	Debbie Dennison	+	Sue McCoy	Е
23	Youth served by the Public Health System (up to age 26)	Micaela Cunningham	+	Emma Eldredge	0
24	Youth served by the public health system (up to age 26)	Travis Webster	0	Christine Frey	+
,	SUB-COMMITTEES (Non-v	oting members	unless a	member of the Co	ouncil)
-	Executive Sub-Committee	Dori Gilbert/ Minola Clark Manson	+/+		
-	Cultural Competence Resource Team (CCRT)	Rosa Ana Lozada	+		
-	CYF CADRE	Julie McPherson/ Marisa Varond	E/+		
-	Early Childhood Sub- Committee	Aisha Pope/ Autumn Weidman	+/E		
-	Education Sub-Committee	Heather Nemour/Violeta Mora	+/+		
-	Family and Youth as Partners Sub-Committee	Renee Cookson/ Valerie Hebert	O/+		
-	Outcomes Sub-Committee	Emily Trask/Eileen Quinn-O'Malley	O/+		
-	Training Sub-Committee	Rose Woods	+		

CYF Council Staff: Yael Koenig, Edith Mohler, and Darwin Espejo

I. Welcome and Introductions (Minola Clark Manson)

II. Approval of Minutes (Dori Gilbert)

- December 9, 2019 meeting minutes Approved
- Review of action items from the December 9, 2019 meeting by Yael Koenig. See meeting minutes.

III. Business Items (Yael Koenig)

- Board of Supervisors (BOS) Letter-December 10, 2019-Agenda Item 08: Strong Families, Thriving Communities-Handout
 - ✓ The Strong Families Thriving Communities Coalition represented by The San Diego Foundation (TSDF), HHSA, and the Clinton Health Matters Initiative (CHMI), was created in 2017 to address disproportionalities in the child welfare and juvenile justice systems
 - ✓ Recommendation for implementation are due in 90 days
 - ✓ Discussion/Recommendations/Next Steps
 - o How do we support youth coming out of juvenile detention?
 - District Attorney will host the Juvenile Health and Justice Symposium on March 17, 2020-Mapping the Intersection of Youth and the Juvenile Justice System
 - Look at the Bold Action Steps identified in the Strong Families, Thriving Communities Blueprint for Action Executive Summary





- As strategy, need to pay attention to prevention activities
- o The CYF Executive Sub-Committee will initiate conversations on how to support these efforts
- 5th Critical Issues in Child and Adolescent Mental Health Conference (CICAMH): Managing Change in a Changing World-March 12-23, 2020-Dr. Jeff Rowe and Dr. Anoop Karippot (conference chair)-Handout ✓ CYF is one of the partners of this annual conference
 - ✓ Conference highlights
 - o Thursday, March 12, 2020 from 5:00 to 9:00 P.M. Cost is \$65.00. Three CE's provided.
 - Advancing Interdisciplinary Coordinated Care for Children and Families at Risk
 - Friday, March 13, 2020 from 7:00 A.M. to 5:30 P.M. Cost is \$100.00. Six CE's provided
 - Plenary 1(morning): Long Term Impacts of Family Separation and Reunification: Lessons from El Salvador
 - Plenary 2 (morning): Sleep Disorders in Children and Adolescents, Impact on Mental Health, Suicide Risks, and Benefits of Late School Start Law
 - Plenary 3 (afternoon): Substance Use Treatment in Adolescents-The New Frontier (Will address vaping)
 - Breakouts
 - Using Child-Centered Play Therapy with children who have experienced Adverse Childhood Experience (ACEs)
 - School Based Treatment for depression and suicide risk in children with disruptive behaviors and disabilities
 - Cognitive Behavioral Therapy for Insomnia (CBT-I) for Sleepless: Hands on training for the management of disrupted sleep
 - > System response to high risk behavior: A multidisciplinary approach to a complex case
 - Impact of military service on the family dynamics
 - > Eating disorders: Special focus on Dialectical Behavior Therapy (DBT)
 - > The youth mental health imperative: Expanding early access to mental health care for out young people and families
 - > Gender Affirming Care: An introduction of the Gender Management Services Clinic
 - Aggression and Bullying in 2020: Youth experience and clinical considerations
 - ✓ Attendance is encouraged. More information and registration at: https://cicamh.com/
- Combined Councils meeting is tentatively scheduled for April 13, 2020

IV. Mental Health Services Act (MHSA) Updates (Dr. Danyte Mockus-Valenzuela)

- Fiscal Year 2019-20 Community Forums:
 - ✓ Focus on Mental Health and Substance Use Disorder Prevention, Innovation, and Meaningful Engagement
 - ✓ Community forums are being held in the evening and on Saturdays to facilitate attendance, and for efficiency, the length of the forums was revised from 2.5 to 1.5 hours
 - ✓ The January 22, 2020 forum will be rescheduled. Information will be sent once the date and place is confirmed
 - ✓ Added one forum for a total of 7. The additional forum is scheduled for January 29, 2020 and will take place at the North Inland Live Well Center
 - ✓ Fliers are available in all threshold languages
 - Translation is coordinated in the registration process
 - ✓ Oceanside Forum Highlights
 - o Held on Saturday, January 11, 2020 at the Country Club Senior Center in Oceanside
 - Attended by approximately 60 individuals, of which, approximately 90% were high school students
 - Highlights of the input and feedback at the Oceanside Forum
 - Students communicated the need to have available information that will help them understand concepts like depression vs. normal day to day anxiety/normal sadness
 - ✓ In addition to the forums, Focus groups are being held:
 - Hosted a Youth Transitioning or who have transitioned from the Foster Youth System (held)
 - Another forum is being scheduled with High School Students and coordinated with SDCOE to discuss Substance Use prevention
 - o Will meet on January 14, 2020 with BHAB members to plan additional forums
 - ✓ Input/Feedback/Questions
 - Additional feedback was provided regarding the need of anticipating the need of translation and have it available at the forums. Feedback will be forwarded to the consultant coordinating the forums





- ✓ A final report of the forums will be prepared and made available
- ✓ Additional information about the Community forums and to register can be found at: http://www.listentosandiego.org/

V. Sector "Hot Topics" (Dori Gilbert)-Handouts

- Biannual updates
 - ✓ Executive (Yael Koenig)
 - CYF Council Co-Chairs and CYF Council Sub-Committees Co-Chairs are members of the Executive Committee. The CYF Deputy Director and administrative staff provide support to this sub-committee and activities of the Council. Input to enhance the Council is welcome
 - The main focus of this sub-committee is to ensure the Council is relevant and meets the needs of all participants
 - The CYF Council has four sector representation
 - ✓ Early Childhood (Aisha Pope, Autumn Ginger Beal, Eva Melendez, Shelly Paule)
 - Update focused on Resiliency and Building Resiliency
 - Context: Early Childhood matters
 - Research reveals that it is very difficult to recognize behavioral and emotional needs under the age of 3
 - When needs are not recognized timely, or go undetected -there will be negative consequences for this child, including attachment and success in school to make a better assessment
 - The Child and Adolescent Needs and Strengths (CANS) assessment tool was Implemented in San Diego CWS in October 2018, and for children age 0-5 in January 2019
 - The CANS allows to see needs of the child and caregiver, along with the areas of strength that can build upon to increase resiliency
 - Early Childhood-CANS Strengths Domain-Categories
 - Family Strengths
 - Interpersonal Strengths
 - > Talents and Interests
 - Natural Supports
 - Resiliency
 - Relationship Permanence
 - Playfulness
 - Curiosity
 - Family Spiritual/Religious
 - Early Childhood-CANS Strengths Domain Action Levels
 - 0-Well-developed centerpiece strength
 - > 1-Identified and useful strength
 - 2-Strengths have been identified but require strength-building efforts before they can be effectively utilized as part of a plan
 - 3- An area in which no current strength is identified
 - The implementation of CANS in CWS has shown that allows for a more sensitive assessment of children needs and faster services engagement
 - CANS strengths are Evidence based; scores of zero or 1 indicate higher resilience However,
 absence of a strength it does not mean there is a need
 - Resilience: Video presented: InBrief: What is Resilience?:

https://www.youtube.com/watch?v=cqO7YoMsccU

- "Resilience is defined as a good outcome in the face of adversity" Some children face more challenges than others, some children do well despite of challenges,
- Resiliency: ability to keep things in balance despite of the challenges/adversity
- It is behavioral services providers' responsibility to help children to build resiliency
- Resilience is built over time; according to Ken Ginsburg, MD, the 7 Crucial Cs to build Resilience are:
 - Competence
 - Confidence
 - Connection
 - Character
 - Contribution
 - Coping
 - Control





- o Challenge from the Early Childhood Sub-Committee to CYF Council participants: Have teams at their programs self-assess on resilience building practices and make changes as appropriate
- o Input/Feedback
 - Incorporate the Resilience presentation/concepts presented into the Accessible Depression and Anxiety PeriPartum Treatment (ADAPT) program
 - Ways the Council could support Adverse Childhood Experiences (ACE) screening
 - Creation of Resilience Tool Kit to share with partners including:
 - SchooLink
 - Public Health nurses
 - School Nurses
 - Effective January 1, 2020, and subject to obtaining the federal approvals, the Department of Health Care Services (DHCS), requires, Medi-Cal managed care health plans (MCPs) to comply with a minimum, fee schedule of \$29.00 for each qualifying ACEs screening. More information can be found at:

https://www.dhcs.ca.gov/formsandpubs/Documents/MMCDAPLsandPolicyLetters/APL2019/APL19-018.pdf

- Healthy San Diego will develop a tool to provide clarification to providers regarding this requirement
- ✓ Education (Violeta Mora and Heather Nemour)
 - o The Education Sub-Committee meets as needed
 - Debbie Dennison and Christine Frey representing the Family Sector joined this sub-committee recently, and now the Education Sub-Committee, has four sector representation
 - As the Substance Abuse and Mental Health Services Administration (SAMHSA) Project Cal-Well-5-year grant ended, SDCOE has been able to sustain efforts to continue with the mental health in schools team in the Student Wellness and Positive School Climate unit. This team supports the county's 42 school districts and charter schools by:
 - Increasing awareness of student mental health issues among school staff, parents, students, and communities
 - Providing trainings for school staff, parents, and community partners to identify and support students that may be experiencing emotional distress, and mental illness
 - Improving school climate
 - Connecting students to appropriate mental health services
 - o Specific/current activities include
 - Mental health and wellness, positive school climate, and suicide trainings
 - 32 Trainings with 696 participants have been held from July through December 2019
 - Cultural Competence and resilience are incorporated in all trainings
 - Mental Health in Schools Collaborative; a workgroup created to facilitate exchange of information and determine gaps in mental services. One of their projects is the updating of the Suicide Prevention Resource Guide. The revised version is expected to be released by the end of January 20 or early February 2020
 - Promoting the viewing of the documentaries by Dr. Delaney Ruston: "Screenagers: Growing Up in the Digital Age", a documentary that explores the impact of screen technology on children and youth and offer parents and families proven solutions; and "Screenagers Next Chapter", a documentary that addresses the emotional struggles of teenagers and offers strategies to overcome mental health challenges. More information at: https://www.screenagersmovie.com/
 - SDCOE has built a strong Suicide Prevention infrastructure and was awarded a grant from the California Department of Education to lead the coordination of an online Suicide Prevention training for students 13 years and older (middle and high schools) and schools' staff statewide. This training is expected to be launched at the end of January 2020
 - SDCOE received a grant to pilot the Trauma Sensitive School initiative
 - Have been implementing it in SDCOE's Juvenile Court and Community Schools, and Early Education Department for the past one and a half years
 - A Trauma Informed Training Continuum was developed by SDCOE
 - > The initiative goes beyond training and includes changing policies and practices in schools
 - ➤ It takes 3-5 years to become a Trauma Sensitive school
 - Trauma Sensitive schools promotes staff wellness as educators need to be well to support students well.
 - A Five-Year Brief of the Cal Well grant is being finalized and it will be shared with the Council.
 It includes suicide related data within the San Diego school districts





- o Input/Feedback
 - HHSA East and North Central Regions have facilitated Screenagers showings (about 45 minutes)/conversations (about 60 minutes). Dori Gilbert is available to facilitate additional showings of Screenagers. The events are usually scheduled at 6:00 P.M.
 - SDCOE is working on different projects regarding suicide prevention, including but not limited to
 - Working on policies related to AB 1767 (Pupil Suicide Prevention policies)
 - Collecting suicide related data through anonymous monthly suicide risk assessment at schools (including at elementary schools) to learn about mental health needs. SDCOE collected the data for half of the last school year and has been collecting data in the current school year
 - SDCOE works in partnership with the Ninth District Parent Teacher Association (PTA) to ensure that the information, education/trainings they provide reach parents
- ✓ TAY Council-Rescheduled to February 10, 2020
- ✓ CYF Change Agents Developing Recovery Excellence (CADRE) UP (Marisa Varond)
 - O CYF CADRE is an extension of CADRE. This Sub-Committee meets quarterly. The goal of CYF CADRE is to further the Comprehensive, Continuous, Integrated System of Care (CCISC) model for designing systems change to improve outcomes within the CYF System of Care. One of the focus areas for CYF CADRE in Fiscal Year 2019-20 include educational presentations and discussions regarding medication for dually diagnosed youth, increase awareness of Substance Use Disorder (SUD) programs and SUD trends at their quarterly meetings:
 - July 2019: The Center for Child and Youth Psychiatry (CCYP) provided a presentation at the and explored:
 - How to increase access to medication services
 - How to fill gaps and enhance the capacity of SUD programs, most of which are not able to prescribe
 - The October 2019: Understanding and treating Cannabinoid Addictions. The Sub-Committee discussed:
 - New trends and prevalence of youth cannabis use and best intervention practices
 - Interactions between cannabis and mental health conditions
 - Challenges around drug screening in mental health programs and opportunities to collaborate with SUD programs
 - January 2020: Vaping presentation by the Public Health Department. The highlights of the discussion include:
 - Trends of Vaping and how CYF programs can work with youth
 - Drug screening within the programs
 - January 2020: Personal Experience Screening Questionnaire (PESQ) discussion
 - The PESQ is a screening tool currently being used to assess drug use, but it has been observed that this may not be an appropriate tool for youth at risk. Nevertheless, programs would like to have a standardized tool to assess drug use. The conversation on this item will continue
 - Input/Feedback
 - Mental Health providers can provide testing. It is not a Medi-Cal billable service. However, the County of San Diego allows it as a budget line item. It can be used a family intervention. The testing is flexible like instant test or a strip.

VI. Announcements (Minola Clark Manson)

- 5th Annual Critical Issues in Child and Adolescent Mental Health (CICAMH) "Managing Change in a Changing World" Conference is scheduled for March 12-13, 2020 at the Double Tree Hotel. Register at: http://cicamh.com/
- Save the Date: May 8, 2020: Youth Mental Health Well Being Celebration

VII. Director's Report (Yael Koenig on behalf Dr. Luke Bergmann)

- Governor's proposed budget highlights
 - ✓ More than \$1 billion to fight homelessness
 - \$750 million to launch the California Access to Housing and Services Fund as an initial investment
 - o Immediately makes available camp trailers that can be used as temporary housing
 - ✓ Establishment of a Behavioral Health Task Force to review existing policies and programs and coordinate system changes to prevent and respond to the impacts of mental illness and substance





use in the state. The administration will consider updates to MHSA to serve persons with mental illness who are experiencing homelessness, justice-involved populations, and early intervention of children

More information at https://www.dhcs.ca.gov/Pages/Governor%E2%80%99s-2020-21-Budget-Proposal.aspx

- Cal Healthier California for All link is the new name for California Advancing and Innovating Medical (CalAIM), a is a multi-year initiative by the Department of Health Care Services (DHCS) to improve the quality of life and health outcomes of the population served
 - It addresses Whole Person Care, Health Homes, and the Coordinated Care Initiative, among other initiatives
 - o More information can be found at: https://www.dhcs.ca.gov/provgovpart/pages/medi-calhealthiercaforall.aspx
- CYF in partnership with SDCOE submitted an intent to apply to the Mental Health Services Oversight and Accountability Commission (MHSOAC) Mental Health Student Services Act grant-
- A Board of Supervisors (BOS) Letter is scheduled for January 28, 2020: Advancing the Behavioral Health Continuum of Care through Regional Innovation and Collaboration. It will include:
 - ✓ Rady Children's Hospital Hub
 - ✓ Psychiatric Emergency Response Team (PERT) in schools. CYF Council advocated for whenever possible have a clinician led response whenever appropriate
 - ✓ Threat Assessments Evaluations
 - ✓ School Safety program
 - Input/Feedback
 - Consider additional funding for SUD Recovery residences
 - Ensure that CYF Council documents and tracks recommendations at meetings for input to the BHS Director

VIII.Action Items

Action Item(s)	Action By	Action Due
Submit "Food Security" language change to "Nutrition Security" recommendation to the Live Well Office	CYF Leadership	Completed by CYF Deputy Director on February 7, 2020
2. Review the CHMI-Strong Families Thriving Communities-Blueprint for Action Bold items for potential CYF Council areas of focus, including: ✓ Disparities ✓ Available Supports for youth released from Juvenile Justice detention	CYF Council Executive Sub- Committee discussed having a future Council focus on this as a Hot Topic	Completed January 27, 2020
Update CYF Council on the March 2020 District Attorney's Office Symposium	CYF Council staff	 May 11, 2020 post March 17, 2020 Symposium
 4. How can the Council support ACE screening? ✓ Creation of Resilience Tool Kit to share with partners including: ○ SchooLink ○ Public Health nurses ○ School Nurses 	CYF Council Executive Sub- Committee discussed having a future Council focus on ACEs as a Hot Topic; tentatively scheduled for March 9, 2020	Completed January 27, 2020





Forward the Early Childhood presentation handouts: The Resilience-based Philosophy The 7 C's: The Essential Building Blocks of Resilience	CYF Council staff	Completed via e-mail January 24, 2020
Incorporate the Early Childhood Resilience PowerPoint presentation in the ADAPT program ✓ Aisha Pope will be the Early Childhood point of contact	CYF Council Staff/Dr. Coleman	Completed. Connection between Aisha Pope and ADAPT Program Manager initiated
Share suicide trends data currently being collected at San Diego school districts	• SDCOE	• TBD
Send Governor's Proposed California Budget for 2020-21	CYF Council staff	Completed via e-mail to the CYF Council's e-distribution lists on January 15, 2020 Link: https://www.dhcs.ca.gov/Pages/Governor%E2%80%99s-2020-21-Budget-Proposal.aspx
Send the Med-Cal Healthier California for All link	CYF Council staff	Completed via e-mail to the CYF Councils' e-distribution lists on January 15, 2020 Link: https://www.dhcs.ca.gov/provg_ovpart/pages/medi-calhealthiercaforall.aspx
Provide CYF related updates to CYF Council on Continuum of Care Update: January 28, 2020 Advancing the Behavioral Health Continuum of Care Through Regional Collaboration and Innovation BOS Letter	Yael Koenig	Update to be provided at the February 10, 2020 CYF Council meeting. See handout on pages 13-26 of the February 10, 2020 CYF Council meeting packet
Provide update on Mental Health Services Oversight and Accountability Commission (MHSOAC) will be releasing Mental Health Student Services Act grant	Yael Koenig	Update to be provided at the February 10, 2020 CYF Council meeting. See handout on page 27 of the February 10, 2020 meeting packet

Next CYF Council Meeting: February 10, 2020 Scottish Rite Center, Shell Room 9:00 to 10:30 A.M.





Sub-Committees/Sectors/Workgroups Meetings Information:

Outcomes: Meets the first Tuesday of every other month at- 3255 Camino del Rio South, San Diego CA 92108 in La Vista Room- from 11:30 A.M. to 12:30 P.M.

Early Childhood: Meets the second Monday of the month- at the San Diego Center for Children-FFAST office located at 8825 Aero Drive, Suite 110, San Diego, CA from 11:00 A.M. to 12:00 P.M.

Education Advisory Ad Hoc: Meets As Needed.

TAY Council: Meets the fourth Wednesday of the month 3:00 to 4:30 P.M. at National University, 9388 Lightwave Ave. Room 118, San Diego, CA 92123.

CYF CADRE: Meets quarterly on the second 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 the first Friday of the month at the Health Services Complex- 6367 Alvarado Ct. Ste. 105, San Diego, CA 92120 from 10:00 to 11:30 A.M.

Family and Youth Sector: Meets quarterly -Contact CYFLiaison@namisd.org for schedule.

Family and Youth as Partners: Meets every third Thursday of the month at NAMI San Diego, 5095 Murphy Canyon Road, Suite 320, San Diego CA 92123 1:30 to 3:00 P.M.

Private Sector: Ad Hoc/Meets As Needed.





COUNTY OF SAN DIEGO

AGENDA ITEM

BOARD OF SUPERVISORS

GREG COX First District

DIANNE JACOB Second District

KRISTIN GASPAR

NATHAN FLETCHER

JIM DESMOND

DATE:

January 28, 2020

03

TO:

Board of Supervisors

SUBJECT

UPDATE ON ADVANCING THE BEHAVIORAL HEALTH CONTINUUM OF CARE THROUGH REGIONAL COLLABORATION AND INNOVATION (DISTRICTS: ALL)

OVERVIEW

In response to community need, the Board of Supervisors (Board) has taken several actions to enhance, expand and innovate the array of behavioral health programs and services in the region – broadly referred to as the Behavioral Health Continuum of Care. These actions have brought together justice partners, hospitals, community health centers, and other community-based providers to create system-wide changes to ensure people have access to the appropriate level of psychiatric services to meet their immediate needs and support their long-term recovery. Updates on Behavioral Health Continuum of Care progress are brought before the Board on a quarterly basis per Board direction on December 11, 2018 (25). Updates are provided within the domains of hubs, networks, and bridge planning strategies.

- **Hubs** defined as integrated care environments designed to accelerate transition from behavioral health crisis to sustainable continuous chronic care management; and
- Networks defined as a broad array of outpatient services and housing opportunities linked through a regional care coordination system designed to remain continuously connected to service recipients and to reduce episodes of crisis.
- Bridge planning strategies defined as strategies to address local needs in the nearer term which includes re-establishing critical services in North County and a continued commitment to increase the availability of step-down and long-term care capacity to ensure clients are placed in the most appropriate levels of care during and after psychiatric crisis.

Overarching activities in support of Behavioral Health Continuum of Care efforts are also reported today including new care coordination efforts to ensure clients stay engaged and connected to appropriate services; ongoing prevention activities; stakeholder engagement; and progress on the development of data infrastructure and governance to support a shared community understanding of behavioral health needs throughout the region.

As part of these efforts, on March 27, 2019 (09), the Board directed the Chief Administrative Officer (CAO) to conduct a feasibility study to determine if the vacant, County of San Diego

(County)-owned parcel of land located on Third Avenue, San Diego could be developed for a variety of mental health services including: crisis stabilization, inpatient, residential, rehabilitation, intensive outpatient, and other related services and programs. On October 29, 2019 (31), the CAO returned to the Board with a determination that development of this site was feasible and requested the Board direct staff to work with regional health care providers, including the University of California, San Diego Health System ("UCSD") and Scripps Health, to explore opportunities to operate and/or provide services at a Central Region Behavioral Health Hub (located on Third Avenue, San Diego) and, as appropriate, provide interim services at the San Diego County Psychiatric Hospital. In a related Board item, also presented on October 29, 2019 (05), a recommendation was approved to report back on collaborative efforts to develop this hub.

Today's action requests the Board receive an update on the Behavioral Health Continuum of Care, including an update on the collaborative efforts to develop the Central Region Behavioral Health Hub. In addition, today's action requests:

- Authorization to enter into a memorandum of understanding (MOU) describing proposed terms to be included in to-be negotiated final agreements between the County, UCSD, and Scripps Health to address behavioral healthcare needs in the Central Region including, but not limited to, the potential development of the Central Region Behavioral Health Hub, provision of services at the San Diego County Psychiatric Hospital, and implementation of new Care Coordination services.
- Authorization to enter into agreements to further the purposes of the MOU between the County, UCSD, and Scripps Health.
- Direction for the CAO to return to the Board at a future date with a final agreement between the three entities.

These actions will continue to complement the work across systems to provide optimal behavioral health resources that are regionally distributed and coordinated, thereby supporting the County's *Live Well San Diego* vision for a region where all residents have the opportunity to build better health, live safely, and thrive.

RECOMMENDATION(S) CHIEF ADMINISTRATIVE OFFICER

- 1. Find that today's actions are not approvals of projects as defined by the California Environmental Quality Act (CEQA) pursuant to Sections 15352 and 15378(b)(5) of the State CEQA Guidelines. Also find that the actions are exempt from CEQA pursuant to Section 15061(b)(3) because it can be seen with certainty that there is no possibility for the actions to have a significant effect on the environment.
- 2. Direct staff to begin programming and planning to identify the facility and staff requirements and initiate necessary environmental and entitlement processes for the behavioral health facilities. Staff will return to the Board for necessary approvals and funding.
- 3. Receive a quarterly update on Advancing the Behavioral Health Continuum of Care Through Regional Collaboration and Innovation.

- 4. Pursuant to California Government Code section 26227, authorize the Agency Director, Health and Human Services Agency to execute the memorandum of understanding between the County of San Diego, the University of California, San Diego Health Systems, and Scripps Health.
- 5. Authorize the Director, Department of Purchasing and Contracting, subject to successful negotiation and a determination of fair and reasonable price, to enter into new agreements and amend existing agreements to further the purposes of the memorandum of understanding between the County of San Diego, the University of California, San Diego Health Systems, and Scripps Health.
- 6. Direct the Chief Administrative Officer to return to the Board of Supervisors at a future date with a final agreement between the County of San Diego, the University of California, San Diego Health Systems, and Scripps Health to implement the terms of the memorandum of understanding, and environmental findings.

FISCAL IMPACT

There is no current year fiscal impact with today's recommendations. The preliminary estimate for Capital costs associated with the Central Region Behavioral Health Hub at Third Avenue is estimated to be approximately \$115 million, depending on final design. The potential capital project is anticipated to be funded with a combination of General Fund resources such as fund balance committed for Realignment and available General Fund fund balance as well as one time program revenues. The anticipated cost for the operations of the Central Region Behavioral Health Hub is subject to negotiations and final agreement. It is anticipated that the operational costs would be funded by program revenue. Through the operational collaboration with University of California, San Diego Health Systems at the San Diego County Psychiatric Hospital, the Institutes for Mental Disease (IMD) exclusion that currently applies would be eliminated, allowing for the draw-down of federal revenue currently prohibited under the exclusion. There will be no change in net General Fund cost and no additional staff years.

BUSINESS IMPACT STATEMENT

N/A

ADVISORY BOARD STATEMENT

On January 2, 2020, the Behavioral Health Advisory Board received this Board Letter as an informational item.

BACKGROUND

Behavioral Health Continuum of Care Updates

In response to community need, the Board of Supervisors (Board) has taken several actions to enhance, expand and innovate the array of behavioral health programs and services in the region. This body of work is broadly referred to as the Behavioral Health Continuum of Care. These actions bring together diverse stakeholders including justice partners, hospitals, community health centers and other community-based providers, to create system-wide changes to ensure San

Diegans can quickly access the appropriate level of psychiatric services to meet their immediate needs and support their long-term recovery.

These actions to date reflect, in their sum, the first implementation phases of an overarching vision for the future of behavioral health care which aims to achieve a transformational shift from a model of care driven by crises, to one driven by chronic or continuous care and prevention through the deliberate regional distribution and coordination of resources to keep people connected, stable and healthy.

Updates are reported to the Board on a quarterly basis and are provided within the domains of hubs, networks, and bridge planning strategies.

- Hubs are integrated care environments designed to accelerate transition from behavioral health crisis to sustainable, continuous, chronic care management. Key components of hubs include:
 - o Co-location and affiliation with a general acute care hospital.
 - o Access to inpatient acute psychiatric car.
 - o Outpatient step-down services; co-located crisis stabilization.
 - Linkage to care coordination that stays with the person for years into the future and through their engagement in other clinical and supportive services, and any justice system involvement.
- Networks are a broad array of outpatient services and housing opportunities that help keep
 people stable once care from the hub has completed. Networks are designed to remain
 continuously connected to those they serve.
- Bridge planning strategies address immediate, near-term needs which include:
 - o Re-establishing critical services in North County due to the recent bed suspension at Tri-City Medical Center, and in anticipation of the bed closures as Palomar Health leaves its downtown Escondido campus in less than a year.
 - A continued commitment to increase the availability of step-down and long-term care capacity to ensure clients are placed in the most appropriate levels of care during and after psychiatric crisis.

Today's action request the Board receive a quarterly update on Advancing the Behavioral Health Continuum of Care Through Regional Collaboration and Innovation. Updates are detailed in Attachment A.

Central Region Behavioral Health Hub and Care Coordination Services

On March 27, 2019 (09), the Board directed the Chief Administrative Officer (CAO) to conduct a feasibility study to determine if the vacant, County of San Diego (County)-owned parcel of land located on Third Avenue, San Diego could be developed for a variety of mental health services including: crisis stabilization, inpatient, residential, rehabilitation, intensive outpatient, and other related services and programs. On October 29, 2019 (31), the CAO returned to the Board with a determination that development of this site was feasible and requested the Board direct staff to work with regional health care providers, including the University of California, San Diego Health System (UCSD), and Scripps Health (Scripps), to explore opportunities to operate and/or provide

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services at a Central Region Behavioral Health Hub (located on Third Ave, San Diego) and, as appropriate, provide interim services at the San Diego County Psychiatric Hospital. In a related Board Letter, also presented on October 29, 2019 (05), a recommendation was approved to report back on collaborative efforts to develop this hub.

Over the last several months, County staff have been working with UCSD and Scripps leadership to develop a memorandum of understanding (MOU) which specifies numerous potential activities in the Central Region to address behavioral healthcare needs including:

- Establishment of the Central Region Behavioral Health Hub.
- Collaboration of operations at the San Diego County Psychiatric Hospital.
- Development of a collaborative legal entity to support multiple providers offering new Care Coordination services described below.

Care Coordination is a guiding principle in the Behavioral Health Continuum of Care body of work and is commonly defined as the communication between service providers to ensure a client is always engaged and connected to appropriate services.

Frequently, clients move between different levels of care and experience hand-offs from one provider to the next. This new Care Coordination service will support clients most in need of continuous services and aims to reduce this type of hand-off between providers by offering a single point of contact for the client. The MOU between the County, UCSD, and Scripps recommended for your approval today, lays the foundation for a collaborative legal entity to develop and operate this service and ensure the development of a technology platform to optimize the transfer of critical health information. As the Behavioral Health Continuum of Care body of work continues to evolve, the Care Coordination service can expand to serve the region more broadly.

Today's action requests the Board authorize the Agency Director, Health and Human Services Agency to enter into a MOU describing proposed terms to be included in to-be negotiated final agreements between the County, UCSD, and Scripps to address behavioral healthcare needs in the Central Region including, but not limited to, the potential development of the Central Region Behavioral Health Hub, provision of services at the San Diego County Psychiatric Hospital, and implementation of new Care Coordination services. In addition, authorization is sought to enter into agreements to further the purposes of the MOU between the three entities. The Board is further requested to direct the CAO to return on future date with a final agreement between the three entities.

ENVIRONMENTAL STATEMENT

The proposed actions – which authorize staff to execute a memorandum of understanding (MOU) clarifying anticipated and unenforceable terms between the County of San Diego (County), University of California, San Diego Health System (UCSD), and Scripps Health (Scripps) for behavioral services at the proposed locations, authorize staff to negotiate terms of agreements to facilitate the goals of the MOU, appropriate funds for the same, direct staff to negotiate draft agreements and return to the Board of Supervisors (Board) for approval, and direct staff to begin the environmental and entitlement process as soon as the proposed projects have sufficient

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specificity to review – are not approvals of a project under the California Environmental Quality Act (CEQA) pursuant to Sections 15352 and 15378(b)(5) of the State CEQA Guidelines because the actions do not commit the County to a definite course of action in regard to any project and only constitute organizational or administrative activities needed to begin negotiating project details and draft agreements that will return to the Board for approval. Today's actions are also exempt from CEQA pursuant to Section 15061(b)(3) of the State CEQA Guidelines because it can be seen with certainty that there is no possibility for the actions to have a significant effect on the environment. Staff will return to the Board with the appropriate environmental analysis before seeking approval of any project.

LINKAGE TO THE COUNTY OF SAN DIEGO STRATEGIC PLAN

Today's actions support the County's 2020-2025 strategic initiatives of Building Better Health by supporting the County of San Diego's goal of a fully optimized health and social service delivery system to make it an industry leader in efficiency, integration, and innovation. Additionally, today's item supports the Operational Excellence initiative making health, safety, and thriving a focus of all policies and programs through internal and external collaboration.

Respectfully submitted,

HELEN N. ROBBINS-MEYER Chief Administrative Officer

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ATTACHMENT(S)

Attachment A: January 28, 2020 Behavioral Health Continuum of Care Updates



UPDATE ON ADVANCING THE BEHAVIORAL HEALTH CONTINUUM OF CARE THROUGH REGIONAL COLLABORATION AND INNOVATION

January 28, 2020

In response to community need, the San Diego County Board of Supervisors (Board) has taken several actions to enhance, expand and innovate the array of behavioral health programs and services in the region – broadly referred to as the Behavioral Health Continuum of Care. Updates are provided to the Board on a quarterly basis and are provided into the domains of hubs, networks, and bridge planning strategies.

I. Hubs: Additional Key Updates

Central Region Behavioral Health Hub

On March 27, 2019 (09), the Board directed the Chief Administrative Officer (CAO) to conduct a feasibility study to determine if the vacant, County of San Diego (County)-owned parcel of land located on Third Avenue, San Diego could be developed for a variety of mental health services including: crisis stabilization, inpatient, residential, rehabilitation, intensive outpatient, and other related services and programs.

On October 29, 2019 (31), the CAO returned to the Board with a determination that development of this site was feasible and requested the Board direct staff to work with regional health care providers, including the University of California, San Diego Health System (UCSD), and Scripps Health (Scripps), to operate and/or provide services at a potential Central Region Behavioral Health Hub and, as appropriate, provide interim services at the San Diego County Psychiatric Hospital. In a related Board Letter, also presented on October 29, 2019 (05), a recommendation was approved to report back on collaborative efforts to develop this hub.

Update:

- County staff have been working with UCSD and Scripps leadership to develop a memorandum of understanding (MOU) which specifies numerous activities in the Central Region to address behavioral healthcare needs including:
 - Planning for the establishment of the Central Region Behavioral Health Hub,
 - Collaboration of operations at the San Diego County Psychiatric Hospital,
 - Development of a collaborative legal entity to support multiple providers offering new Care Coordination services.
- Board Authority is being requested today to enter into a memorandum of understanding (MOU) describing proposed terms subject to final negotiations between the three entities to address behavioral healthcare needs in the Central Region including, but not limited to, development of the Central Region Behavioral Health Hub, provision of services at the San Diego County Psychiatric Hospital, and implementation of new Care Coordination services. This new Care Coordination service will support clients most in need of continuous services and aims to reduce this type of hand-off between providers by offering

a single point of contact for the client. The proposed MOU lays the foundation for a collaborative legal entity to develop and operate this service and ensure the development of a technology platform to optimize the transfer of critical health information.

North Inland Region Behavioral Health Hub

On October 29, 2019 (05), the Board approved actions to pursue development of a behavioral health hub in the North Inland Region in Escondido with services provided in partnership with Palomar Health. An agreement between the County and Palomar Health for the development and operations of the North Inland Region Behavioral Health Hub will be brought before the Board in a future update.

Behavioral Health Hub for Children and Youth

Children are especially vulnerable to trauma and the impacts of childhood trauma can last a lifetime and have far-ranging health consequences. Children and youth who face a crisis need dedicated and specially designed resources. The County has been in planning conversations with Rady Children's Hospital to establish a hub for children and youth in the vicinity of Rady Children's Hospital main campus to address the unique behavioral health conditions among youth which can result from complex combinations of factors including: genetic, medical, developmental and environmental.

Update:

• The County continues to meet with Rady Children's Hospital leadership to determine clinical priorities, design and scope for innovative and value-based approaches to meet the needs of children and youth. An array of inpatient psychiatric services is being explored with an opportunity for enhancing traditional short-term care, creating new longer-term programming and specialized care for subgroups of clinical needs. New levels of care such as partial hospitalization and care coordination programs are being explored to offer a broader range of services for children and youth.

Behavioral Health Hub in South and East Regions

In order to ensure regionwide services, staff continue to explore the feasibility of developing behavioral health hubs in other geographic areas of San Diego County, including South Region and East Region.

II. Networks: Key Updates

Tri-City Psychiatric Health Facility

In 2018, Tri-City Healthcare District (Tri-City), suspended its Behavioral Health Unit (BHU), which provided adult inpatient psychiatric services, and its Crisis Stabilization Unit (CSU), which provided adult crisis stabilization services. Since then, meeting the urgent and emergent behavioral health needs of North San Diego County has become increasingly challenging. On June 25, 2019 (23), the Board directed the CAO to negotiate an agreement with Tri-City Healthcare District (Tri-City), or related entity, to provide funding for construction of a psychiatric health facility (PHF) in order to meet the urgent and emergent behavioral health needs of North San Diego County.

Update:

 On January 14, 2020 (11), the Board approved final agreements between the County of San Diego and Tri-City for the development and operation of a 16-bed PHF on vacant land located at the Tri-City Medical Center campus in Oceanside.

Integrated Behavioral Health and Wellness Center

On October 29, 2019 (05), the Board approved authority to issue two Requests for Information (RFIs) for service design and build a facility for an integrated behavioral health and wellness center on the corner of East Valley Parkway and Fig Street in Escondido. When completed, this facility will offer outpatient behavioral health services and primary care for those with serious mental illness, to include integrated substance use disorder treatment, mental health treatment, and housing (consistent with board and care supports) for those with combinations of physical and behavioral health needs. Community access and utilization will be a priority. Ancillary services to include specialized support for homeless and an opportunity for business enterprises.

Update:

 In order to determine interest and ability from prospective service providers, a Request for Information (RFI) for services was issued and completed on January 21, the results of which will inform an RFI for facility design and build to be issued based upon the service design of the program.

North Coastal Community-Based Crisis Stabilization Unit with Law Enforcement Drop-off On March 26, 2019 (02) the Board approved, in partnership with District Attorney Summer Stephan and Sheriff Bill Gore, a recommendation to establish regional mental health crisis stabilization units (CSUs) that can provide 24/7 walk-in mental health and substance use disorder services, including law enforcement drop-offs as a safe alternative to a jail or hospital. Services in these CSUs include psychiatric services, medication, peer support, and transition planning, with stays of less than 24 hours, for those in behavioral health crisis. CSUs can be located within a hospital or community-based.

The CSUs would be open to the public, capable of serving persons with co-occurring disorders, and include a protocol for rapid law enforcement drop-off of clients to enable officers to quickly return to service in the community. This was one of the recommendations that came from two symposiums where nearly 200 stakeholders mapped the intersection of mental health and the criminal justice system in order to identify gaps, needs, and solutions. The symposiums were hosted by District Attorney Summer Stephan and resulted in several recommendations which are outlined in the District Attorney's Blueprint for Mental Health Reform: A Strategic New Approach Addressing the Intersection of Mental Health, Homelessness and Criminal Justice in San Diego County.

As a follow up to this direction, on June 25, 2019 (01), the Board approved to establish these services in North San Diego County to address immediate needs, while concurrently working to add community-based CSUs in other regions. A proposed site in Vista is being evaluated.

Update:

An application for a Conditional Use Permit (CUP) was submitted to the City of Vista.
 Upon the City's approval, tenant improvements to enhance the proposed facility to provide community-based crisis stabilization services will move forward.

North Coastal Live Well Health Center Crisis Stabilization Unit

Crisis services are a critical component of behavioral health networks and support the management of mental health conditions via continuous care, similar to other chronic health conditions. On October 29, 2019 (05), the Board approved funding for planning, design of building improvements, and authority to competitively procure community-based crisis stabilization services at the North Coastal Live Well Health Center in Oceanside.

Update:

 The clinical program design and conceptual architectural design phases for the communitybased crisis stabilization unit on the first floor of the North Coastal Live Well Health Center are being finalized.

Strengthening Psychiatric Emergency Response Team (PERT) Services

Launched in 1995, PERT is a County-contracted program which consists of specially trained law enforcement officers paired with licensed mental health professionals who provide on-scene responses to incidents involving individuals with mental illness. While PERT plays an important role in supporting the region's behavioral health continuum of care, there have been challenges in attracting and retaining clinicians. On September 24, 2019 (05), the Board approved a recommendation to launch a contracted PERT clinician development and retention incentive initiative to strengthen the pipeline of contracted clinicians for psychiatric emergency response services.

Update:

• In order to achieve the objectives for this initiative, the PERT contract was amended and executed on November 4, 2019. Additionally, the contractor has provided a recruitment and retention plan for County review and has created a tracking matrix as a tool to provide monthly updates on progress.

Mobile Crisis Response Teams

On March 26, 2019 (02) the Board approved, in partnership with District Attorney Summer Stephan and Sheriff Bill Gore, a recommendation to develop timely follow-up care to connect a person to appropriate services after a mental health crisis involving law enforcement. This recommendation also stemmed from the District Attorney's stakeholder symposiums on the intersection of mental health, homelessness, and the criminal justice system. In response, the County developed solutions with the goal to provide the best clinical care in the field for those in need and find innovative ways to decrease the extent of which law enforcement is called upon to manage behavioral health needs without clinical resources. One of those solutions is the establishment of non-law enforcement Mobile Crisis Response Teams (MCRT) which would be deployed to help individuals who need additional crisis intervention in the field, but who may not require transport to jail or a hospital, approved by the board on June 25, 2019 (01).

On October 29, 2019 (05), the Board was provided an update noting continued collaboration among Health and Human Services Agency (HHSA), Public Safety Group, the Sheriff's Department and the District Attorney's (DA) office to develop strategies for these and other services where behavioral health and justice intersections occur. Additionally, development of a MCRT pilot was announced, which will embed non-law enforcement crisis response into the crisis stabilization centers that are coming online with this component. While these efforts are initially focused in North County, future efforts will see similar developments in east, south, and central parts of the county.

Update:

Behavioral Health Services (BHS) staff have been meeting with the Sheriff and DA's office
to develop the program design. Additionally, BHS continue to explore the Access and
Crisis Line as a mechanism to dispatch non-law enforcement response teams and recently
conducted a tour of the Sheriff call-in center to ensure appropriate coordination and triaging
of calls.

Youth and Young Adult Supports

On March 26, 2019 (02) the Board approved, in partnership with District Attorney Summer Stephan and Sheriff Bill Gore, a recommendation to work with school districts and the County Office of Education to develop enhanced school-based crisis response, including possible expansion of the existing PERT program for threats or crisis situations involving school youth. Since then, in order to expand upon this Board direction to also include students who have entered early adulthood, this body of work is now referred to as Youth and Young Adult Supports.

Building upon existing efforts, including the DA's School Threat Assessment Team (STAT) launched in 2018, key stakeholders have convened to discussed future work in this area. Preliminary input indicated the need for specialized workforce and programming equipped to provide comprehensive school threat evaluations and follow-up specialized treatment for students; reported June 25, 2019 (01). Continued research and development of new services to offer specialized care for students who have displayed school safety threats. In addition to strengthened collaboration, efforts included key stakeholder engagement to identify gaps, areas of strength and opportunities for innovation; enhanced communication with the County Office of Education including formalizing a crisis response protocol. HHSA and the DA's office have also worked with the Courts and Public Defender's Office to identify a team of forensic trained evaluators and created a Threat Assessment Evaluation Clinical Specialty Criteria.

Update:

- Collaboration has continued with the DA's office and Law Enforcement partners to finalize the programmatic design of Youth and Young Adult Crisis Response, specifically the expansion of PERT.
- Additionally, as part of initial research and planning efforts in implementing a School Safety Program, BHS staff met with and reviewed the programmatic elements of the Los Angeles Department of Mental Health's (LADMH) existing School Threat Assessment Response Team (START).
- Representatives from BHS and the DA's office attended a Targeted Violence Prevention training in November 2019, instructed by an FBI Special Agent and the former Deputy Director of LADMH Emergency Outreach Bureau.
- The Courts, DA's office, Public Defender's office, Optum and BHS have created guidelines and a standardized reporting template for Treatment and Evaluation Resources Management (TERM) evaluators to use when completing juvenile threat assessments through the TERM process that is currently being finalized. The DA's office has engaged BHS in identifying key stakeholders for the upcoming Juvenile Health and Justice Symposium scheduled for March 17, 2020.

III. Bridge Planning Strategies: Key Updates

North Inland Crisis Residential Services Along the 78 Corridor

Crisis residential services offer an alternative to voluntary hospitalization and facilitate the step-down from acute inpatient care for adults with serious mental illness in a home-like setting for stays on average of nine days. In tracking the number of mental health-related calls to law enforcement dispatch along the north county 78 corridor in 2018, Escondido had the most, followed by Vista, followed by Oceanside. On October 29, 2019 (05), the Board approved actions to competitively procure crisis residential services in North Inland Region. In addition to the other North County efforts to meet this demand, a geographically targeted Request for Proposals for crisis residential services was issued which, when operational, will have up to 16 beds and will add to the existing crisis residential programs located in other parts of the County.

Update:

• Proposals were submitted by January 15, 2020, and the contract is expected to be awarded in the fourth quarter of Fiscal Year 2019-20.

IV. Additional Updates in Support of Continuum of Care Efforts

Stakeholder Engagement

Stakeholder engagement is a vital component to the Behavioral Health Continuum of Care and have been incorporated across all activities.

Update:

- Additional stakeholder interviews were conducted with representatives of the City of San Diego and additional analysis of stakeholder feedback was completed to inform the design and development of Care Coordination services.
- To support a person-centered approach to behavioral health program development, a survey of those with lived experience and their family members was developed over November and December. Behavioral Health Advisory Board (BHAB) members were invited to inform the approach and distribution methods for the survey. In January and February 2020, site visits will take place to further enhance our understanding of the unmet need within the County.
- As the Continuum of Care design elements come online into the BHS systems of care, stakeholder engagement will occur through the existing channels, such as the Mental Health Services Act annual update, BHAB and other BHS councils.

<u>Data Landscape</u> and Governance

The County continues to build a plan to provide a systematic way to collaborate and identify common themes in improving the behavioral health system. Within this body of work, Data Landscape and Governance are key focus areas to shape and inform the priority areas of service interventions.

Updates:

- In July and September 2019, workshops were held with key stakeholders to inform the early development of data infrastructure and governance needed to support a shared community understanding of the community's behavioral health need. Data received from these workshops has been assessed and, in combination with the current data landscape, will help inform the creation of a data platform intended to integrate cross-sector data. In addition to the collected data, development of a framework is in process in order to build data dashboards that both host data collection tools, such as surveys, and generate reports for various types of users, such as analysts and stakeholders.
- The governance model for the development of a Behavioral Health Data Dashboard will include enterprise data governance lead by the County Chief Data Officer and a Behavioral Health Indicator Advisory Group comprised of cross-sector subject matter experts to advise on data management practices. This Behavioral Health Data Dashboard governance structure will partner with County Behavioral Health Services staff to continue open-forum community data workshops to increase data transparency and community responsiveness. BHAB will again be invited to provide input on the design and cadence of the ongoing data workshop as improved data transparency is aligned with recommendations from BHAB members.

Ongoing Prevention Efforts

While the Continuum of Care work expands the array of care services provided for individuals impacted by behavioral health conditions, the model itself is also preventative in nature. One of the fundamental components of Continuum of Care work is redesigning the system to thread prevention activities throughout the entire system of care. In addition to this prevention-based redesign, specific, targeted prevention activities continue.

Update:

- BHS continues to support suicide prevention efforts through the Suicide Prevention Council and its work to annually update the San Diego County Five Year Suicide Prevention Action Plan and publication of the Annual Report to the community each September. Additionally, the recently implemented means reduction campaign focused on safe gun storage continues to expand outreach to gun stores and ranges throughout San Diego County. Stigma and discrimination reduction efforts are continuously supported through a countywide media campaign, It's Up to Us, and numerous prevention and early intervention contracts.
- In addition to mental health prevention and early intervention efforts, BHS continues to expand substance use disorder prevention efforts, including activities related to the Centers for Disease Control and Prevention Opioid Data to Action (OD2A) grant to prevent overdose deaths through surveillance and prevention. Both BHS and PHS have brought on additional staff through the grant to support enhanced data surveillance and expanded prevention activities. BHS is also in the process of amending the Prescription Drug Abuse Task Force (PDATF) contract and regional substance use disorder prevention contracts to incorporate grant activities regarding outreach to the community on opioid risks.

ATTACHMENT A

- In alignment with the leadership provided by the Board in the Strategic Plan to Address Opioid and Prescription Drug Misuse presented July 23, 2019 (05), PDATF released the annual Prescription Drug Abuse Task Force Report Card on October 24, 2019. Another activity related to misuse prevention through limiting access, the fall Prescription Drug Take Back Day was held on October 26, 2019, in conjunction with law enforcement and prevention coalitions, collecting a total of 8,345.5 pounds of unneeded medications across the County.
- On December 9, 2019, the annual Methamphetamine Strike Force Report Card was released highlighting the increase in deaths related to methamphetamine overdose. As implementation of the OD2A grant continues, design of surveillance systems related to opioid overdose can be leveraged to support surveillance of all substances including methamphetamine. Improved surveillance will also inform identification of risk behaviors, support prevention activities, and enable linkages to care and outreach.





Vision for Mental Health Student Services Act Grant

Background: The Mental Health Services Oversight and Accountability Commission (MHSOAC) has released a competitive bid process for County Behavioral Health departments to create and strengthen school based mental health services for children and youth across the state. The grant application is due February 28, 2020. The County of San Diego Behavioral Health (BHS) Children Youth and Families (CYF) has partnered with the San Diego County Office of Education (SDCOE) in applying for the grant. If awarded, BHS will be the fiscal administrator and SDCOE will coordinate the program delivery.

San Diego Goals:

- 1. Preventing suicide, decreasing suicide ideation, depression and anxiety among K-12 students.
- 2. Reducing prolonged suffering of students experiencing mental health challenges and increasing help seeking behaviors by reducing stigma and identifying school & community referral pathways.

Why Focus on Suicide Prevention: On average, a young person dies by suicide every hour and 25 minutes in the U.S. (Centers for Disease Control and Prevention, 2015). For every young person who dies by suicide, an estimated 100-200 youth make suicide attempts (Centers for Disease Control and Prevention, 2016). Youth suicide is preventable, and educators and schools are key to prevention.

Proposed Approach: According to the National Strategy for Suicide Prevention, preventing suicide depends not only on suicide prevention policies. The SDCOE intends to use a multi-layered approach to build and/or enhance school districts and charter school's internal capacity to support the emotional and behavioral well-being of students based on recommendations by suicide prevention experts that include the following:

- 1. Support districts and charter schools to implement suicide prevention policies to ensure there is consistent school protocols and practices. Identify key district/charter liaisons to work closely with SDCOE staff to plan activities, collect data and coordinate mental health referral pathways for students.
- 2. Provide training and suicide awareness education for key staff, administrators, and site-based partners.
- 3. Educate parents on suicide prevention & mental health.
- 4. Educate and involve students in mental health promotion and suicide prevention efforts.
- 5. Screen students for suicide risk, as appropriate, and create referral pathways for students to access mental health services not limited to SchooLink, that allow leveraging of Medi-Cal.
- 6. Respond appropriately to a suicide death through proactive use of postvention toolkits and checklists.

Data Informed Programming: Intent is to offer some universal district services and interventions while offering additional resources based on identified needs as indicated in the California Healthy Kids Survey district data around mental health and school climate. The proposed plan will require participating school districts and charter schools to collect data on the number of suicide risk assessments completed each month along with demographic information. This data is currently not collected and will provide critical information on district trends and inform grant programming for the future

After Action Suicide Response Team: Through the established partnership between SDCOE and BHS, a joint team will be created to conduct social autopsies to support school communities after a student has died by suicide. The findings will help inform and influence local suicide prevention practices, policies and systems change. The team will be made up of in-kind BHS and SDCOE staff, clinicians and subject matter experts.

Last revised: January 22, 2020

Family First Prevention Services Act:

A Summary for Child Welfare and Probation Partners

Changing the Foster Care System

Historically, Child Welfare Services (CWS) and juvenile probation jurisdictions received Title IV-E funds from the federal government for placement costs of youth in care. Jurisdictions were also required to determine if families met Aid to Families with Dependent Children (AFDC) income criteria to be eligible for reimbursement.

The Family First Prevention Services Act (FFPSA) was signed into law on February 9, 2018, and changed the landscape of Title IV-E funding distribution.

FFPSA allows jurisdictions up to 50% cost reimbursement by the federal government for the provision of preventative services to families assisted by CWS and Probation, and eliminates income tests, creating additional opportunities. Funding is also available for any pregnant or parenting youth currently in foster care, allowing for preventative measures to discontinue the cycle of involvement with the foster care system.

This new form of funding distribution allows jurisdictions to provide more services to families in need. Eligible services include: substance use disorder services, mental health services, and in-home parenting programs. Services can be provided for up to 12 months. Initial eligibility based on candidacy must be met, and a redetermination must occur once at six months to confirm services are still necessary. Children, youth, parents, and both relative and non-related extended family members who have guardianship or custody of the children are all eligible recipients. Medi-Cal recipients will continue accessing services primarily through their insurance provider and Behavioral Health Services (BHS), with FFPSA funding supplementing after primary resources are utilized.

Services must be evidence-based and there are major provisions in the law regarding reducing the number of youth in congregate care placements (see opposite side for details). These elements must be met prior to receiving prevention dollars.

Jurisdictions could choose to opt in effective October 2019, but have two years to delay implementation to prepare for the new requirements and changes. California has chosen to delay implementation at this time.

This new legislation allows jurisdictions more flexibility and increased funding to provide services designed to strengthen families and keep children safe in their homes.



New Populations

Candidacy is defined as "Children at imminent risk of placement in foster care and their parents as well as pregnant/parenting youth in foster care."

Each state or tribal child welfare agency has the opportunity to expand their definition of candidacy to serve the prevention population. This may lead to an increase in numbers of eligible children, youth, and families that will require services.

For example, Nebraska's definition of candidacy is extremely broad, "any child/family who has an open investigation."

In California, the State will work with county jurisdictions, the Child Welfare Director's Association, and the Chief Probation Officers of California to determine the State's definition of candidacy.

Regardless of the exact language, it is anticipated that many more families will be eligible to receive services, requiring additional community and contracted partner resources.

Evidence-Based Services

In order to receive the reimbursement for services, the services must be listed on the clearinghouse developed and maintained by the federal government and fall into one of three categories: promising, supported, or well-supported. 50% of services must fall into the well-supported category. All of these must meet the following criteria:

- Existence of a book or manual
- Weight of evidence supports the benefits
- Reliable and valid outcome measures
- No case data which shows severe or frequent risk of harm

To be categorized as a promising practice, a service's efficacy must be shown in a study with one untreated control group, waitlist group, or placebo group. To be a supported practice, a service's efficacy must be demonstrated in one randomized controlled trial (RCT) or rigorous quasi-experimental study and six months of demonstrated and sustained results. Well-supported practices require two RCTs or rigorous quasi-experimental studies with 12 months of sustained results. The provision of evidence-based services will ensure children, youth, and families across diverse backgrounds have more equal opportunities to effectively overcome barriers to providing safety.



Reducing Youth in Congregate Care

The additional funding available for reimbursement of services is due to cost savings generated by eliminating compensation for child/youth placement in congregate care (group home) settings. Under FFPSA, only two weeks of congregate care placement will be reimbursed unless the youth is in a Qualified Residential Treatment Program (QRTP), as determined by a "qualified individual."

The QRTP model will require full-time licensed nurses and clinical staff. It will also require less than 25 youth in a placement setting. The placement setting must also utilize a trauma-informed treatment model.

With the passage and implementation of Continuum of Care Reform (CCR), in California we are positioned to seamlessly transition to the QRTP model from the Short Term Residential Treatment Program model we currently use.

What can my agency do to prepare?

- Research the federal clearinghouse at: https://preventionservices.abtsites.com/ to review approved practices and what is still under review.
- Ensure ability to provide valid data regarding each individual and the types of services they are receiving.
- Be engaged and active on local, state, and federal workgroups to:
 - o discuss any necessary changes to promote a smooth, lasting implementation
 - provide outcome data on the efficacy of this legislation
 - share expertise for interventions that could be reviewed and added to the clearinghouse.

Questions? Contact: Margo.Fudge@sdcounty.ca.gov



METH & FAMILIES

QUARTERLY NEWSLETTER

Local Services Spotlight

211 San Diego & Access and Crisis Line

211 San Diego

A free, confidential number to call to access 6,000 services, resources, and programs including:

<u>Basic Needs</u>: Housing Information, Food Assistance, Shelter and Homeless Services, Utility Assistance, Financial Assistance

<u>Health & Wellness</u>: Mental Health Services, Physical Activity & Nutrition, Early Childhood Development

Enrollment Services: CalFresh, Covered CA

Other Services include: Older Adult Resources, LGBTQ Resources, Post Incarceration

Dial 2-1-1 or find more information online at 211sandiego.org



Access & Crisis Line

The Access and Crisis Line (ACL) is there to assist individuals or people they know who are overwhelmed, depressed, or searching for answers. A phone call will connect you with a compassionate counselor who is always standing by to provide hope and encouragement.

This service offers free, confidential support in all languages • Crisis
Intervention • Suicide Prevention • Referrals for mental health and/or alcohol
and drug needs • Referrals to other related resources

(888) 724-7240 or TDD/TTY Dial 711 Available 7 days a week/24 hrs a day



Overview of the Meth & Families Committee

The Meth Strike Force recognizes the need for trauma-informed intervention that includes the whole family. Many people develop substance use disorders after living through trauma and adverse childhood experiences (ACEs). Some risk factors include having a parent with a substance use disorder, losing a parent, having an incarcerated parent, experiencing physical or sexual abuse and many others. When a child can be part of a parent's recovery, the child can develop a sense of resilience and strength in their family.

In San Diego County, we see the intergenerational nature of meth addiction and strive to support families recovering together.



Other Local Resources

https://www.no2meth.org/ or 1-877-NO-2-METH

San Diego County Behavioral Health Services (619) 563-2700

National Resources

SMART Recovery: https://www.smartrecovery.org/

Alcoholics Anonymous:

https://www.aa.org/pages/en_US

Narcotics Anonymous: https://www.na.org/

Al-Anon: https://al-anon.org/

Suicide Prevention Lifeline: 1-800-273-8255

SAMHSA's National Helpline: 1-800-662-43\$7

County of San Diego Children, Youth and Families Behavioral Health System of Care Council February 10, 2020

Submitted by: Michael Miller

TAY Council

Co-Chairs: Joseph Edwards and Elisabeth Winchell

Purpose

The purpose of the TAYBHSC is to facilitate the design and implementation of TAY (ages 16-25) services in the Children, Youth and Families (CYF) and the Adult and Older Adult (AOA) systems of care by providing feedback and recommendations to the Behavioral Health Director.

Fiscal Year 2019-20 TAY Council Members			
Public	Private	Family	Education
Peggie Webb	Joseph Edwards, Co-Chair	Christine Frey	Flora Barron
(San Diego Regional Center	(Mental Health Prevention	(Transitional Age Youth)	(Education)
for the Developmentally	and Early Intervention)	Ursula Hardianto	
Disabled)	Elisabeth Winchell, Co-Chair	(Transitional Age Youth)	
Stephanie Morehead	(Substance Use Disorder		
(Public Safety Liaison	Services/Co-Occurring)		
/Juvenile Probation)	Vianey Del Real Ochoa		
Steven Wells	(Employment Services)		
(Child Welfare Services)	Laura Tancredi-Baese		
	(Pregnant or Parenting Youth		
	Provider)		
	Cheyenne Bartram		
	(Peer Support Specialist in		
	TAY Program)		
	Katherine Torres		
	(Underserved		
	Communities/CCRT)		
	Vanessa Arteaga		
	(Housing)		
	Serena Terrones		
	(TAY Recreational and/or		
	Social Support Activities		
	Provider)		
	Courtney Simone-Clements		
	(LGBTQ)		
	Devon Boone		
	(Homeless Services /		
	Outreach)		
	Miriam Adam		
	(Refugee and Immigrant		
	Populations)		
	Stephen Carroll		
	(Commercial Sexual		
	Exploitation of Children)		
	Micaela Cunningham		
	(Client Advocacy)		
	Mat Wood		
	(Open seat)		





Fiscal Year 2019-20 Goals/Focus Area

- Social Connectedness,
- Care Coordination Treatment of Co-Occurring Disorders,
- LGBTQI TAY,
- School Based Crisis Response
- Fill remaining open Council Seats

Update

- The TAY Council held an annual Strategic Planning Meeting at the beginning of the fiscal year to identify goals and priorities for the new fiscal year.
- The TAY Council has grown from when it was established in 2018. 10 members and 2 Co-Chairs were initially elected. 20 of the 25 council seats are now filled.
- Two new Co-Chairs elected in August: Joseph Edwards and Liz Winchell.
- Seeking to fill remaining seats:
 - o Primary Healthcare
 - o Law Enforcement
 - Foster Youth
 - Hospital Partner
 - o Open seat
- TAY Council work group for School based crisis response has been completed. Determinations of recommendations are congruent with Behavioral Health Director recommendation to the County Board of Supervisors.
- Work groups established and currently working on findings and recommendations in each of the priority areas (Social Connectedness, Care Coordination and LGBTQI).
- Presentations made to the TAY Council have included: Supported Employment and Psychiatric Emergency Response Team (PERT)
- Upcoming presentations to include: Opioid Treatment Provider (OTP), MHS Steps, NAMI, Center for Community Solutions, Southern Indian Council, San Diego Metropolitan Transit Services

\Box The TAY Council is recruiting for 4 sector representation and specifically looking for individuals to represent:
☐ Private Sector
☐ Public Sector
☐ Education Sector
□ Family/Youth Sector
For more information about the TAY Council, please contact: Alisha Eftekhari at:
858-514-3229

The TAY Council meets the fourth Wednesday of the month at National University-Room #118 located at 9388 Lightwave Ave, San Diego CA 92123 from 3:00 to 4:30 P.M.





County of San Diego Children, Youth and Families Behavioral Health System of Care Council February 10, 2020

Submitted by: Valerie Hebert

Family and Youth as Partners Co-Chairs: Valerie Hebert and Edith Mohler

Purpose

Recognition & Strengthening shared identity for CYF Peer Partner Staff
Supporting Statewide measures for California Peer Certification
Sharing resources & information on CYF Peer Partner Staff Opportunities
Strengthening Four Sector Understanding within CYFBHSOC Council
Sharing Four Sector information and/or areas of need with the CYFBHSOC Council

Fiscal Year 2019-20 Family and Youth as Partners Sub-Committee Members Public Private **Family Education Edith Mohler** Valerie Hebert Valerie Hebert Sonia Lira Darwin Espejo Eva Melendez Eva Melendez Linda Ketterer Darron Jones Ingrid Alvarez-Ron John Bucher Sten Walker Sue McCov Sue McCov Celeste Hunter James Ruff

Fiscal Year 2019-20 Goals/Focus Area

The FYP Subcommittee supports the advancement of Youth/Family professional partnerships for CYF within BHS. The CYF Subcommittee collaborates with CYF administrative staff to ensure family and youth voice, choice and values are incorporated into program development, implementation plans and overall CYF service delivery. Collaborative relationships between CSOC Partners support family/professional partnerships and assist in strategic and cohesive service delivery with higher rates of engagement.

The FYP Subcommittee:

- Consistently identifies and brings forward "Hot Topics" within the CYF System of Care community.
- o Promotes Peer Partner career development and advancement.
- Enhances the knowledge-based of parents, families and Peer Partners within the CYF System of Care with timely and requested speakers/presentations at the CYF Liaison's monthly Parents Empowering Parents (PEP) and Youth and Family Support Partners meetings.
- Supports the work of the Youth and Family Support Partners and hosts a yearly Family Support Partners Celebration of Peer Partners, recognizing their efforts in supporting and guiding families within the CSOC.

The Family and Youth as Partners Subcommittee is a clearing house of information to stakeholders and the CYF Council on efforts by the California Association of Mental Health Peer Run Organizations (CAMHPRO) in advocating for state Standardization/Certification of Peer Support Specialists. The Peer Support Specialist Certification Act of 2020 establishes statewide Peer Specialists protocols while providing the guidelines to maximize Medi-Cal matching funds. California is one of two states which currently do not certify Peer Support Specialists. Peer Support Specialists provide valuable services to youth and families living with the challenges of mental illness, substance use disorders and/or both. Youth and Family Support Partners support families in navigating the CYF System of Care, modeling resiliency and recovering, instilling hope, thus making them an essential and professional part of the behavioral health workforce.

The Family and Youth as Partners Subcommittee coordinates the planning of the annual **Youth Mental Health Well-Being Celebration** held the first week of May, focusing on a yearly theme as decided upon by the Substance Abuse and Mental Health Services Administration (SAMHSA). This fun and family-focused





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event celebrates the hard work of children, youth and families within the CYF System of Care in overcoming their mental health challenges.

The May Celebration features a community art project, mental health resource fair and fun and healthy activities for the entire family. Planning for event begins in Quarter 2 annually and is in full swing during the second half of the fiscal year until the event on May 8, 2020.

- Art project involvement requested by all agencies providing mental health services through the County of San Diego. Art packets available for distribution today!
- Join us May 8, 2020 3:30 6 pm at the Centro Cultural de la Raza in Balboa Park!

Update

- Continued community discussion of "Hot Topics" identification and sharing with the CSOC;
- o Continued mental health discussions using the Facebook Live platform valuing youth and family voice (also recorded for viewing at later dates);
- Continued support of planning robust presentations for PEP Parent Support and Y/FSP Peer Partner meetings and celebration;
- Coordination of TAY information sharing between families, youth and agencies supporting TAY and TAY Council;
- CYF CSOC Annual Conference Planning Committee involvement

Goals:

- o Holding a robust, fun-filled and well attended Youth Mental Health Well-Being Celebration in May, 2020
- o Fill open Youth Served by the Public Health System seat on the CFYBHSOC Council
- o Upcoming support meeting themes (both Parent and Y/FSP) include:
 - BHS cross-sharing of the CANS Tool
 - San Diego Center for Children Programs benefiting Mental Health Consumers, including residential
 - SSI for families with youth, presented by Legal Aid
 - ADHD Strategies for families and providers
 - Rapid Response Housing providers
 - Recovery residences

The Family and Youth as Partners Sub-Committee has 4 sector representation
The Family and Youth as Partners Sub-Committee is recruiting for 4 sector representation and specifically looking for
dividuals to represent:
☐ Private Sector
☐ Public Sector
☐ Education Sector
☐ Family/Youth Sector
r more information about the Family and Youth as Partners Sub-Committee, please contact: Valerie Hebert at:
leriehebert@namisd.org or Eva Melendez at: evamelendez@namisd.org

The Family and Youth as Partners Sub-Committee meets the third Thursday of the month at 5095 Murphy Canyon Road, Suite 320, San Diego, CA 92123 from 1:30 to 3:00 P.M.







FYP Subcommittee Purpose

PROMOTING CSOC VOICE & VALUES

Recognizing & strengthening shared identity for CYF Peer Partner staff Supporting Statewide measures for California Peer Certification Sharing resources & opportunities to further the role of the Peer Partner Strengthening Four Sector understanding & engagement Sharing of information between four sectors & CYFBHSOC Council





CALIFORNIA PEER SPECIALIST CERTIFICATION

Peer Support encompasses a range of activities and interactions between people who have shared similar experiences of being diagnosed with mental health conditions. Peer support offers a level of acceptance, understanding, and validation not found in many other professional relationships.

CAMHPRO, January 2020

Increased social improvement & increased quality of life & life community engagement & increased engagement & inc

The research on peer support in MH systems is still emerging, but the research to date suggests that peer recovery support may result in:





Upcoming Coaching Topics

FOR PROVIDERS, Youth /Family Support Partners & FAMILIES

- BHS cross sharing of CANS Tool
- San Diego Center for Children Programs benefitting mental health consumers
- · SSI for Families with Youth Legal Aid
- ADHD Strategies for families and providers
- Rapid Response Housing providers
- Recovery Residences

Youth Mental Health Well-Being Celebration

MAY 8 2020 EBON 2:20 6:00 BM



Mark your Calendar! Pic

We are planning the biggest and best celebration yet? Tell your families, engage with CYF System of Care kids, get involved and be a part of the fun!



Pick Up Art Packets!

loday! Here! there are enough for everyone. All instructions are included!



Engage Your Program Youth!

Nouth can participate in the art project in many ways. Drawing, poetry, video, and group projects are encouraged. The sky is the limit!



Invite Your Agency Families!

Acelebration isn't a celebration unless families attend! there will be fisoid & fun, art & games, opportunity drawings and lots to celebrate. Don't miss this wonderful event!



Get to Know Us & Join Us!

The Family and Youth as Partners Subcommittee

MEETS

3rd Thursday of the month from 1:30 - 3:00 pm

LOCATION

5095 Murphy Canyon Road, Suite 320, San Diego, 92123

FOR MORE INFO:

email: CYFLiaison@namisd.org phone: (858) 987-2980



YOUTH MENTAL HEALTH WELL-BEING CELEBRATION

MAY 8, 2020 3:30 - 6 PM CENTRO CULTURAL DE LA RAZA 2004 PARK BLVD SAN DIEGO, CA 92101

ART SHOW, PERFORMANCES, FREE FOOD, RESOURCES, ACTIVITIES FOR CHILDREN, YOUTH, AND FAMILIES











May 2020 Youth Mental Health & Well-Being Celebration POWER WORD Art Project

"What we say to ourselves matters and drives what we think" – Yael Koenig, Deputy Director Behavioral Health Services Children's System of Care

Art Project 2020: "What word comes to mind when you think of mental health?"

Time to think outside of the box! Choose one word to answer the question above. Once you have your word, it is time to get creative!

Consider the following when thinking about your word:

- What does this word make you think or feel?
- When you think of this word, does it help you change your mood for the better?

Be creative and be inspired by your word! Poetry, colors or music, we want to showcase your POWER WORD and your art. We are excited to incorporate it in our May 2020 Youth Mental Health & Well-Being Celebration on Friday, May 8, 2020, 3:30 PM to 6:00 PM at El Centro Cultural de la Raza in Balboa Park.

Instruction for Art Project:

- Select a word to answer the question: "What word comes to mind when you think of mental health?"
- ❖ Option 1: Decorate one or more of the 4 cutouts included in this packet. Incorporate your word into your decoration. Decorate the front & back of the paper.

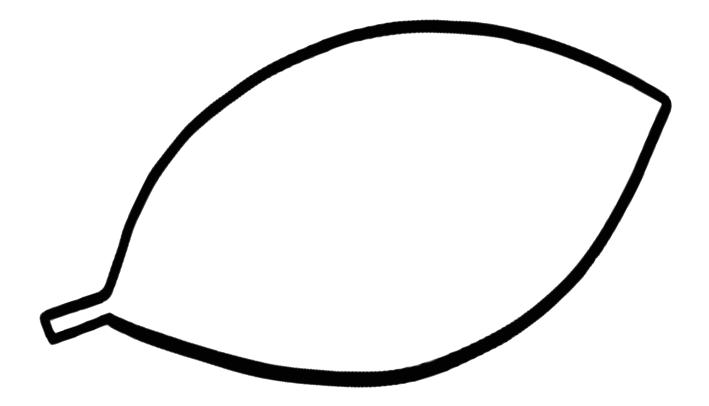
AND/OR

• Option 2: Create an art piece that represents this word. This can be done in the form of poetry, song writing, video message, painting, photography or another form of art. Express yourself freely. If you choose to participate in this option, we invite you present your artwork during the celebration. Your submission will inspire others!

Instructions for Submission:

- If desired, sign your name to your art and include the name of your agency. Please let us know if we can use your name when talking about your art.
- Place your artwork back into the envelope provided and return to your agency team leader. Your agency will send all submissions to NAMI San Diego, Attn: May 2020 Celebration. Or, contact NAMI San Diego at (858)987-2980 /email CYFLiaison@namisd.org to make arrangements for pick up.
- If you would like to submit a video, song or other form of art please send a copy via email to CYFLliaison@namisd.org so we can play/display your artwork during the celebration.
- Make sure to attend the event to personally introduce your art!

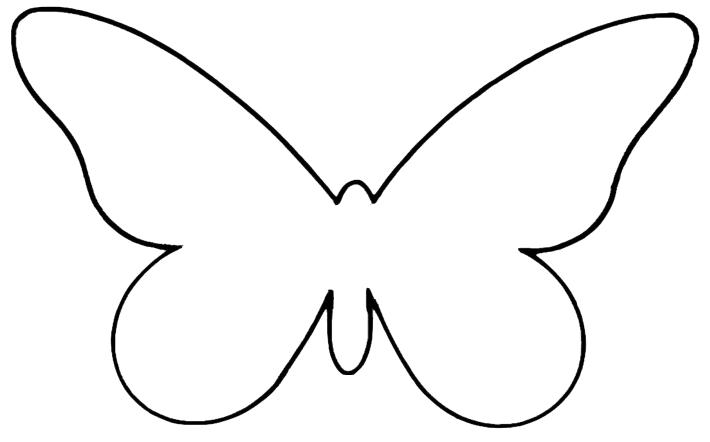
If you have any questions, please feel free to reach out to Eva Melendez at NAMI San Diego at evamelendez@namisd.org or call (858) 634-6580, ext. 149.

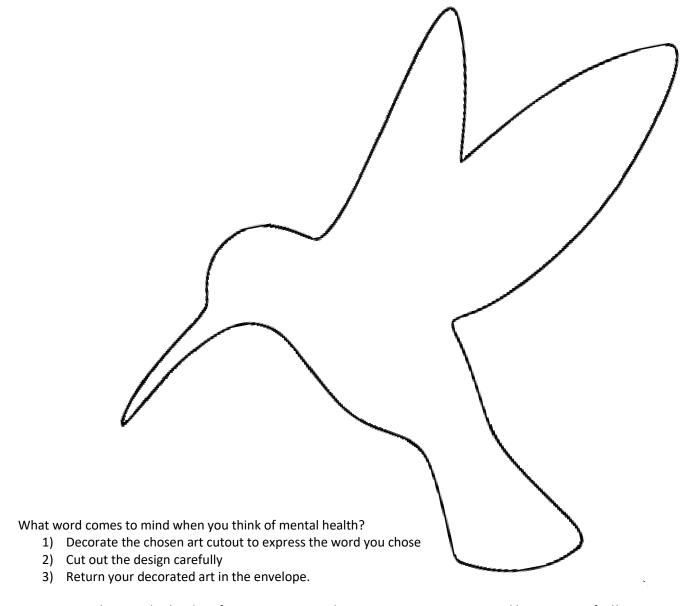


What word comes to mind when you think of mental health?

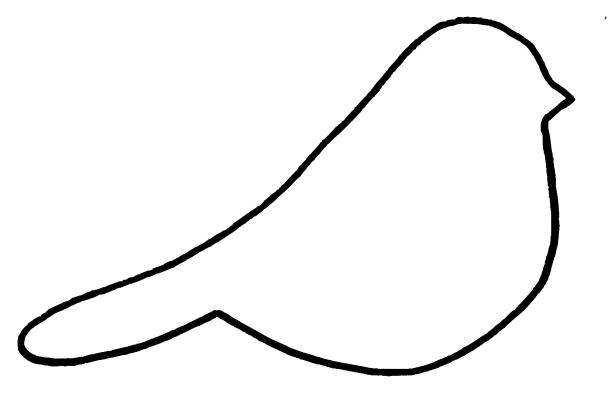
- 1) Decorate the chosen art cutout to express the word you chose
- 2) Cut out the design carefully
- 3) Return your decorated art in the envelope.

Tips: You can decorate both sides of your art cutout. Color, write, or express your word however you feel!





Tips: You can decorate both sides of your art cutout. Color, write, or express your word however you feel!



County of San Diego Children, Youth and Families Behavioral Health System of Care Council February 10, 2020

Submitted by: Edith Mohler

Cultural Competence Resource Team (CCRT) Co-Chairs: Piedad Garcia and Charity White-Voth

Purpose

The CCRT addresses the County's dynamic demographics and serves as an advisory group to the Behavioral Health Services (BHS)

Director to enable BHS systems of care to work effectively in cross-cultural integration of services

Fiscal Year 2019-20 CCRT Members			
Public	Private	Family	Education
Piedad Garcia-Chair	Sahra Abdi (United	Celeste Hunter	Juan Camarena (San
(AOA)	Women of South Africa)		Diego State University)
Charity White-Voth-Co-	Mahvash Alami		
Chair (AOA)	(Survivors of Torture)		
Elizabeth Dauz (CYF-	Elisa Barnett (The Center		
STAT)	San Diego)		
Andrea Duron (AOA)	Minola Clark Manson		
Nicole Le Fol (AOA)	(Responsive Integrated		
Liz Miles (BHS-QI)	Health Solutions)		
Edith Mohler (CYF)	Shadi Haddad (San Ysidro		
Nilanie Ramos (BHS-	Health Center-Chaldean-		
Clinical Director's Office)	Middle-Eastern Social		
Nancy Rodriguez (AOA-	Services (USSS)		
Case Management)	Rick Heller (HSRC)		
Ann Vilmenay (AOA)	Celeste Hunter (CASRC		
	and UPAC)		
	Kat Katsanis-Semel		
	(Mental Health America) Rosa Ana Lozada		
	(Harmonium-		
	representing the CYF		
	Council)		
	Michelle Ly (UPAC)		
	Yen Du-Alternate (UPAC)		
	Rebecca Paida (Nile		
	Sisters Development		
	Luz Pinto, NAMI		
	Mercedes Webber		
	(Recovery International)		
	Jessica Young (NHA-		
	Project Enable-TAY)		
	,		





Fiscal Year 2019-20 Goals/Focus Area

Best Practices:

- Highlight effective programs serving culturally diverse communities for providers to integrate appropriate services.
- Develop a Recognition Award criteria and process to recognize organizations who are providing exemplary Cultural Competence activities.
 - o To be presented at the Behavioral Health Recognition Dinner (BHRD).
- **Identify gaps in representation with CCRT and develop targeted outreach for those agencies/community groups for participation.
 - o Invite additional Ethnic Community Based Organizations (ECBO) who align with CCRT as well as system of care partner representatives from Probation, Education, DA, etc. to move toward system wide improvement.
- **Dedicate time and space within CCRT (or as a separate workgroup) to review and analyze data related to underserved populations including linguistic findings, interpreter services, utilization rates, jail in-reach outcomes, etc.
 - o Address the Justice Involved population, specifically the overrepresentation of African Americans and Latinos and develop recommendations for services.
- Develop recommendations for the MHSA Fiscal Year 2019-20 Annual Update.
- Provide quarterly, uniform CCRT Updates to various meetings and Councils to provide consistent messaging.
 - o Develop a standardized tool to provide consistent CCRT highlights at the various Councils at the beginning of the fiscal year.
- Provide COR training to County staff on CLAS standards and how to monitor effectively for CC.
- **Provide dedicated support to contractors and community agencies who request technical assistance and guidance around cultural competence efforts within their agency, workforce, client served, etc.
 - o Review organizational CC Plans by Legal Entity.

Program:

- · Advance culturally responsive community-based organizations to evidence-based standards
- Increase CCRT Substance Use Disorder provider and consumer membership
- Invite programs/providers to present on their respective Cultural Competence (CC) Plans, including approaches, implementation, challenges and goals at CCRT meetings
- **Develop a process for dissemination of resources that are readily available not only to BHS contractors, but to the general community and BHS staff.

Policy:

- Submit culturally responsive recommendations for the MHSA Fiscal Year 2019-20 Annual Update.
- Identify and implement strategies to strengthen system wide advance of cultural competence standards consistent with the State Plan and CLAS standards.
 - o CCRT members will use a standardized tool to review provider organizational CC Plans by Legal Entity and provide recommendations for continuous improvement.
- **Address workforce development focused on recruiting and hiring a diverse workforce within BHS and with County contractors.
 - **Recommendations from Strategic Planning/Focus Group





Update

Best Practices

- Provided recommendations for the Fiscal Year 2019-20 Annual BHS Community Forums:
 - o Input on outreach to increase attendance
 - o Importance of language capability availability
 - o Provided feedback to the 2018 Community Engagement report
- Assisted with the review of legal entities Cultural Competence Plans
- Discussed disproportionality on population in jails and across the lifespan
- Provided input regarding the Advancing of Behavioral Health Continuum of Care Through Regional Collaboration and Innovation.

□ The CCRT has 4 sector representation
\Box The CCRT is recruiting for 4 sector representation and specifically looking for individuals to represent:
☐ Private Sector
☐ Public Sector
☐ Education Sector
☐ Family/Youth Sector
For more information about the CCRT, please contact: Charity White-Voth at:

Charity.White-Voth@sdcounty.ca.gov

The CCRT meets the first Friday day of the month at 6367 Alvarado Court, Suite. 105 San Diego, CA 92120 from 10:00 to 11:30 A.M.





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County of San Diego Children, Youth and Families Behavioral Health System of Care Council February 10, 2020

Submitted by: Emily Trask and Eileen Quinn-O'Malley

Outcomes

Co-Chairs: Emily Trask and Eileen Quinn-O'Malley

Purpose

Outcomes Sub-Committee reviews service delivery systems and aims to improve County of San Diego System of Care services by measuring and evaluating outcomes and use results to provide recommendations to the CYFBHSOC Council.

The Outcomes Sub-Committee meets on the first Tuesday of every other month from 11:30 am to 12:30 pm at the County BHS office located at 3255 Camino del Rio South San Diego, CA 92108.

Fiscal Year 2019-20-Outcomes Sub-Committee Members			
Public	Private	Family	Education
Yael Koenig	Emily Trask (Chair)	Valerie Hebert	Yuka Sakamoto
Amanda Lance-Sexton	Amy Chadwick		
Eileen Quinn-O'Malley	Julie McPherson		
(Chair)	Shonta Battle		
Elizabeth Miles	Gwen Shelton		
Ezra Ramirez	Brent Crandal		
	Michelle Ly		
	Antonia Nunez		
	Golbanou (Golby) Rahimi		
	Shellane Villarin		
	Sara Welsh		

Fiscal Year 2019-20 Goals/Focus Area

- Finalize the "family-friendly" definitions for CANS EC and CANS
- Outcomes Data:
 - Continue to discuss how we, as a system, can make outcomes data more meaningful and incorporate into treatment
 - Support and train the system with utilizing outcomes data results with families to increase system/provider competency of sharing outcomes with families and utilizing results to guide services
- Utilize QSR outcomes data to support the system in increasing CANS and PSC completion rates
- School Based Services: Identify referral/active client thresholds for school-based services viability
- Review telehealth utilization within the System of Care
- Discuss Population Health and Social Determinants of Health to identify guiding principles for the CYF System of Care.





Update

- Family-friendly definitions for the CANS-EC have been finalized. Definition development for the CANS 6-21 is in-progress.
- Outcomes data:
 - o Currently developing a clinician-level PSC report
 - o Developed and disseminated a PSC graphical information sheet for families
 - o Developed and disseminated a tip sheet for clinicians on how to obtain two PSC measures
- Utilizing QSR outcomes: CASRC completed a presentation to BHS CORS and analysts to facilitate their understanding and monitoring of CANS and PSC QSR objectives, including compliance.
- A literature review of social determinants and quality of life indicators for youth was completed. A comparison to CANS and PSC items is ongoing to determine if there are comparable population data.
- Telehealth QSR data will be reviewed in the CYF Outcomes Sub-Committee this spring.
- Discuss and monitor SchooLink outcomes as data becomes available.

X The Outcomes Sub-Committee has 4 sector representation

\Box The Outcomes Sub-Committee is recruiting for 4 sector representation and specif	ically looking for individuals to
represent:	
☐ Private Sector	
☐ Public Sector	
☐ Education Sector	
☐ Family/Youth Sector	
For more information about the Outcomes Sub-Committee, please contact:	Eileen Quinn-O'Malley at:
eileen.quinn-omalley@sdcounty.ca.gov	•

The Outcomes Sub-Committee meets every other month on the first Tuesday at 3255 Camino del Rio South, San Diego, CA 92108 in the La Vista Room from 11:30 A.M. to 12:30 P.M.







OUTCOMES SUB-COMMITTEE REPORT

2/10/2020



OUTCOMES SUB-COMMITTEE - SAN DIEGO





Outcomes Sub-Committee members are tasked with measuring and evaluating outcome results and resources to provide recommendations to the CYF System of Care Council

FY 19/20 GOALS/FOCUS AREA **PARTICLE** SAFEK





DEFINITIONS FOR CANS AND CANS EC





- CANS Definitions
- PSC Provider/Family Resources
- CYF mHOMS Manual/Utilizing Outcomes Clinically
- PSC Provider Reports
- Reviewing QSR Outcome Data
- SchooLink Thresholds
- Telehealth Utilization



CANS conversations with families include the utilization of various tools. The goal is to make one of these tools, the CANS Assessment Summary, a family friendly resource by including definitions for CANS items that are actionable items.

- Rady's KidSTART program drafted first version of the CANS EC definitions
- Sub-Committee reviewed and finalized CANS EC definitions
- CASRC drafted CANS (6-21) definitions, Sub-Committee reviewed and CASRC working on finalizing
- Definitions will pull into assessment summary for CANS ratings of '2' or '3' for Needs and '0' and '1' for Strengths

CANS ASSESSMENT **SUMMARY**





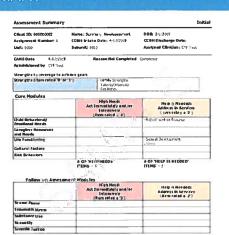
CANS INDIVIDUAL REPORT





- CANS Individual Report captures two timepoints
- Captures improvement in ratings





PSC RESOURCES



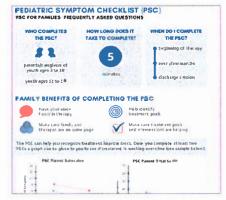
 Tip sheet developed for providers to improve completion rate for PSC:



PSC RESOURCES



PSC Family Handout:



MEASURES MANUAL/CLINICAL UTILITY





CURRENT FOCUS AREAS





CYF mHOMS Measure Manual (July 2019)

- Outlines how the tools were selected
- Explains what tools measure (CANS, PSC and PESQ)
- Highlights the strengths for utilization
- Identifies limitations of tools

Clinical Utility

- Embedded CANS & PSC results in the UM request form
- Increased session-based cycle to 14/19 sessions for outcome assessment session



PSC CLINICIAN REPORT





QSR REPORTS





- Currently in final revision
- Looks at active caseload
- Tracks progress/reduction of symptoms
- Utilize during supervision; review aculty of case load and progress toward treatment goals

FY 19/20 QSR DATA

- Looking at systemwide data
 - Baseline for improvement rates
 - Evaluate completion rates
- Do objectives provide useful data?
- What is the data informing us about treatment in system of care?



POPULATION HEALTH



SchooLink Thresholds

- Baseline/transition year
- Data to inform optimal deployment of services

Telehealth

- Baseline year for monitoring utilization of modality by system providers
- Evaluating of effectiveness of engagement with more families

Beginning stages

- Utilizing Live Well Areas of Influence to create foundational mapping
- Looking at CANS and PSC items that link to specific Areas of Influence
- Goal: Utilize data from CANS and PSC items to measure the effectiveness of services for improvement in Areas of Influence



County of San Diego Children, Youth and Families Behavioral Health System of Care Council February 10, 2020

Submitted by: Minola Clark	Manson		
Private Sector			
Co-Chairs:			
	Purp	oose	
	Fiscal Year 2019-20 Privat	e Sector Sub-Committees	
Public	Private	Family	Education
	Fiscal Year 201	9-20 Goals/Focus Area	
	Upd	ate	
	nmittee is inactive. It will rer	nain inactive until an issue fo	or the Private sector to
address arises.			
☐ The Private Sector Sub-Cor	nmittee has 4 sector represe	entation	
☐ The Drivete Sector Sub-Committee is recruiting for 4 sector representation and specifically leaking for			
☐ The Private Sector Sub-Committee is recruiting for 4 sector representation and specifically looking for individuals to represent:			
□ Private Sector			
□ Public Sector			
☐ Education Sector			
☐ Family/Youth Secto	r		
For more in	formation about the Private	Sector Sub-Committee, plea	ise contact:

Minola Clark Manson at: mcmanson@sdsu.edu





County of San Diego Children, Youth and Families Behavioral Health System of Care Council February 10, 2020

Submitted by: Rose Woods, RIHS

CYF System of Care Training Academy (CYF Council Training Sub-Committee) Co-Chairs:

Purpose

The Children Youth and Families System of Care (CYF-SOC) Training Academy provides trainings to enhance the work of public systems in providing services to children, youth and families in San Diego County. Responsive Integrated Health Solutions (RIHS) continues this work through the Training Academy Committee, a collaboration of partners in the four sectors of the CYF System of Care.

Fiscal Year 2019-20 Training Sub-Committees			
Public	Private	Family	Education
Becky Lanier, CWS	Minola Clark Manson, RIHS	LaTysa Flowers	Linda Ketterer, San Diego
Edith Mohler, BHS-CYF	Shane Drosi, RIHS	Valerie Hebert, NAMI	Mission Academy
Nilanie Ramos, BHS	Pam Hansen, SDCC	Celeste Hunter, UPAC	Susie Terry, SDCOE
Jennifer Santos, BHS	Aisha Pope, SDCC	Eva Melendez, NAMI	
	Golby Rahimi, MHS, Inc.		
	Liz Winchell, MHS, Inc.		
	Rose Woods, RIHS		

Fiscal Year 2019-20 Goals/Focus Area

- During Fiscal Year 19/20, the CYF-SOC Training Academy will deliver training on:
 - Implicit Bias
 - o Attachment in Youth, Ages 5-17
 - Family Separations
 - Suicidality in Children and Youth
 - Sandy Hook Promise Programs
- The CYFSOC Training Academy will hold the annual system of care conference on May 28, 2020. This year's conference will focus on **Youth Substance Use: Risk, Resilience, Reconnection**. Registration will open in mid February.
 - o Conference Description:

Youth drug and alcohol use and misuse can have serious consequences. The impacts of substance use are experienced by the entire family and community. Adolescent substance use can contribute to numerous negative health, social, and behavioral outcomes that can be experienced immediately and over the lifetime. These can include disruptions in physical and mental health, legal consequences, adjustment problems in school or the workplace, and violent or aggressive behavior. It is imperative that providers, community partners, and family members are informed about drug and alcohol trends, the effects of substance use on youth, and appropriate prevention strategies, interventions, tools and resources.

In this full-day conference, participants will be provided with trauma-informed and developmentally and culturally responsive interventions to enhance engagement and assessment. Participants will gain tools and resources to more effectively assess for youth substance use and enhance youth and family engagement. Substance use trends (including drugs, tobacco, and alcohol) among youth will be examined through a bio-psycho-social lens.





Topics will include youth access, prevalence, risk factors, and temporary and permanent physiological and psychological effects on the developing brain and body. Protective factors, which are instrumental in building resilience and healthy development will be examined throughout the day's presentations.

- o Conference Learning Objectives:
 - List three recent youth drug trends
 - o Discuss common risk factors that can increase the likelihood of youth drug use
 - o Identify common protective factors that can decrease the likelihood of youth drug use
 - o Explain the impact of substance use on child and youth development
 - o Describe effective approaches for discussing drug use with youth
 - Identify culturally responsive interventions, tools, and community resources to support family engagement
- Scholarships for professional development opportunities will be made available to parent partners, family partners and youth support partners throughout the CYF System of Care to attend local and statewide conferences:
 - Up to 10 scholarships will be awarded to peer support partners to attend the CYF-SOC Training Academy annual conference, Youth Substance Use: Risk, Resilience, Reconnection.
 The scholarship application form will be available when general conference registration opens in mid-February.
 - O Up to 2 scholarships will be awarded to peer support partners to attend the California Mental Health Advocates for Children and Youth (CMHACY) conference in Asilomar, CA in May 2020.

Update

- The CYF-SOC Training Academy has deliver training on:
 - o Implicit Bias: January 16, 2020
 - o Attachment in Youth, Ages 5-17: (Training is full and will be held on 2-21-20)
- The application process to receive a scholarship to attend the California Mental Health Advocates for Children and Youth (CMHACY) conference in Asilomar, CA in May 2020 has closed as of 1-31-2020.
 Applications are currently being reviewed. Scholarship recipients will be contacted by February 14, 2020.

☐ The CYF System of Care Training Academy has 4 sector representation	
☐ The CYF System of Care Training Academy is recruiting for 4 sector representational temperature.	ntation and specifically looking for
individuals to represent: ☐ Private Sector	
□ Public Sector	

For more information about the CYF System of Care Training Academy, please contact:

Rose Woods at: rwoods@sdsu.edu

The CYF System of Care Training Academy meets the first Wednesday of the month at: 6505 Alvarado Road, Suite. 107 San Diego, CA 92120 from 9:00 to 10:00 A.M.



☐ Education Sector ☐ Family/Youth Sector





Children, Youth & Family Liaison



WORKING TOGETHER

Wednesday, Feb 12, 2020 from 8:30 am - 12:30 pm

5095 Murphy Canyon Road, Suite 320, San Diego CA 92123

(858) 634-6580 | (858) 987-2980 CYFLIAISON@NAMISD.ORG CYFLIAISON.NAMISANDIEGO.ORG

Limited Spaces. RSVP secures seat. Registration: http://bit.ly/WT_Feb2020

Training the Children's System of Care on using Lived Experience as a powerful tool for Mental Health Professionals.

Working Together is a vibrant and meaningful learning experience that builds the foundation for a strong, positive collaboration between clinicians, mental health workers, therapists, program staff and Youth/Family Support Partners, Children's System of Care Peer Staff with Lived Experience.

Working Together, a training of the Children, Youth & Family Liaison, is approved by the CA Board of Registered Nursing, BRN Provider # 16262, for (4) CEH contract hours, CFAAP/ CAADAC (4) CEH contract hour, California Association for Alcohol/Drug Educators (CAADE) (4) contract hour, California Association of DUI Treatment Programs (CADTP) (4) CEH contract hours.











WHO SHOULD ATTEND:
Mental Health Professionals,
Psychologists, Therapist, Social
Workers, Professional Counselors,
Psychiatrists, Pediatricians, Nurses,
Educators, Students, Probation
Officers, Child Welfare Workers,
Case Managuer, Advances and Case Managers, Advocates and Parents will all find this meeting of importance and value in enhancing their effectiveness in serving children in need.



DOUBLE TREE HOTEL Hazard Center Mission Valley 7450 Hazard Center Dr., San Diego CA 92108





Thursday: \$65 - Students \$25 Friday: \$100 - Students \$50

Attend Both: \$165 - Students \$75
(must present valid Student ID
at registration desk)

Fees Include: Parking, Food and Continuing Education Credits







Critical Issues in Child Adolescent Mental Health Conference

The intent of the 2020 CICAMH Conference is to increase the awareness and understanding of critical issues and offer attendees ideas, skills and resources to work together to be better able to assist youth, their families, and communities in engaging and supporting each other in order to promote bright and fruitful futures. The conference seeks to provide healthcare providers across all disciplines with the knowledge. skills and attitudes needed to keep pace with the demands of our changing world and the opportunities of our evolving systems of care.

This two-part conference continues CICAMH's focus on the theme of "Managing Change in a Changing World" with attention to today's current stressors and best practices for evaluating and intervening for health. Thursday evening's dinner conference will focus on the clinical and pragmatic opportunities of integrating and coordinating care across discipline boundary lines, with a specific focus on the need to advance trauma-focused inquiry, most especially in the primary care setting. Friday's session addresses many of the most important changes and challenges currently faced by youth and families with highly experienced speakers in keynote addresses and breakout sessions.

Session Topics:

Thursday:

"A Multidisciplinary Round Table Discussion Exploring Diagnostic and Treatment Considerations for Children and Adolescents with Complex Presentations and Exceptional Needs"

Advancing Interdisciplinary Coordinated Care for Children and Families at Risk

Friday:

"Managing Change in a Changing World"

Keynotes and Breakouts:

Long Term Impact of Family Separation

Sleep Disorders: Impact on Mental Health, Suicide Risk and Benefits of Late School Start

Substance Use Treatment in Youth and Adolescents

Play Therapy in Adverse Childhood Experiences

School Based Suicide Prevention

Systems Response to High Risk Behaviors

Impact of Military Service on The Family System

Eating Disorders: Special Focus on DBT and FBT Expanding Early Access to Mental Health Care

Gender Affirming Patient Care

Aggression and Bullying in 2020

Anxiety Disorders in Youth and Adolescents

CME & CE's:

3 Credits will be provided for Thursday 6 Credits will be provided for Friday

Learning Objectives:

- Explore the opportunities and challenges in providing collaborative multidisciplinary care across professional disciplines, with specific attention on trauma exposure in childhood and adolescence.
- Understand normal sleep profiles and the various disorders of sleep that may impact children and youth
- Appreciate the impacts of substance abuse and screen time dependence on the biopsychosocial development of youth and the emerging strategies and technologies to intervene.
- Understand the impacts of immigration, family separations and stigma with an examination of prior crises and an exploration of ways to provide assistance to those harmed by current policies and practices.
- Explore the risk factors and consequences of bullying behaviors in school and in communities and identify how parents, mental health providers, schools can work together to reduce harm.
- Appreciate the unique challenges faced by military families in supporting positive developmental trajectories and the role of mental health
- Recognize and intervene affirmatively with individuals suffering with or at-risk of developing Eating Disorders.
- Appreciate and advocate for the creation of developmentally appropriate integrated care delivery systems for teens and young adults to increase access to clinically relevant care.

BRAIN XP Day 2020

Saturday April 4, 2020 // 11am-2pm // 3327 Glencolum Dr. San Diego, CA 92123

Entertainment
Music
Resources
Snacks
Raffle Prizes
MORE!

Teens
TAY
Youth
Families
Mental Health Professionals
EVERYBODY is WELCOME!

TEEN MENTAL HEALTH AWARENESS EVENT!

THEME: TEENS HELPING TEENS

We are changing the language of mental health by focusing on POSITIVITY!

This is a FREE Event! Register on BRAINXP.ORG!

More details and performance lineup coming soon!

If you are a teen and are interested in showcasing your creative talent at BRAIN XP Day, email me!
- brainxpproject@gmail.com

Individual Teens AND Teen Groups are Welcome to Perform!



"Save the Date"

Children, Youth and Families (CYF) Council

Transition Age Youth (TAY) Council

Adult and Older Adult (AOA) Council

Combined Behavioral Health Services Councils Meeting

Monday, April 13, 2020 | 10:00 to 11:30 A.M. Scottish Rite Center | Joseph Shell Room 1895 Camino Del Rio South San Diego, CA 92108

For more information, please contact:

Darwin Espejo (619) 584-3024 | Darwin Espejo@sdcounty.ca.gov



