









This page intentionally left blank

# Table of Contents

Background	4
Senate Bill 1004 (SB1004) Priorities	4
Childhood Trauma Prevention and Early Intervention	4
Early Psychosis and Mood Disorder Detection and Intervention	5
Youth Outreach and Engagement Strategies	5
Culturally Competent and Linguistically Appropriate Prevention and Intervention	5
Older Adults	5
Early Identification Programming of Mental Health Symptoms and Disorders	6
How the PEI Outcomes Were Chosen	6
Research Methods	7
PEI Evaluation Measure Results	8
Conclusion	9
Annendix	12

This page intentionally left blank

# **Background**

The Mental Health Services Act (MHSA) system of care approach for San Diego County Behavioral Health Services (SDCBHS) is designed to develop and provide a system where service access is easier and timelier, utilization of out-of-home and institutional care is reduced, and stigma towards individuals with serious mental illness (SMI) and serious emotional disturbance (SED) is removed. The County of San Diego's MHSA Three-Year Plan was developed based on input from community partners and stakeholders. Specifically, the Prevention and Early Intervention (PEI) component of the MHSA system of care reflects the focused strategies to reduce negative outcomes that may result from untreated mental illness and help bring awareness of mental health into the lives of community members through public education initiatives and training. The purpose of the current report is to provide an overview of the MHSA PEI outcomes, methodology and 3-year outcome results, as required in the MHSA regulations.

### Senate Bill 1004 (SB1004) Priorities

In 2018, California Senate Bill 1004 (SB1004) was passed, revising the structure of PEI programming to focus on six priority areas that address: (1) childhood trauma prevention and early Intervention, (2) early psychosis and mood disorder detection and intervention, (3) youth outreach and engagement strategies, (4) culturally competent and linguistically appropriate prevention and intervention, (5) older adults, and (6) early identification programming of mental health symptoms and disorders. The County of San Diego provides a variety of PEI programs that run the spectrum of services from outreach and prevention to early intervention and linkage to services. A brief description of the implementation strategy of each of the six PEI priority types as described in Senate Bill 1004 and the corresponding local County of San Diego program names are provided in the following section. Please refer to the Appendix for descriptions of all the SDCBHS PEI programs.

#### **Childhood Trauma Prevention and Early Intervention**

(The Community County-Wide Violence Response Team, Community Services for Families (CSF), Triple P-Positive Parenting Program, Father2Child, six regional PEI school-based programs)

The childhood trauma prevention and early intervention priority refers to a program that targets children exposed to, or who are at risk of exposure to, adverse and traumatic childhood events and prolonged toxic stress in efforts to manage the early origins of mental health needs and prevent long-term mental health concerns.

#### Early Psychosis and Mood Disorder Detection and Intervention

(Kickstart, Rural Integrated Behavioral Health and Primary Care Services)

The early psychosis and mood disorder detection and intervention priority programs focus on reducing mental health risk factors and improving access to mental health services, information, and support. These objectives are accomplished by providing psychoeducation, assessments, and referrals to appropriate mental health or substance use programs, as needed in serving children, transition age youth, and adults/older adults.

#### **Youth Outreach and Engagement Strategies**

(Kickstart, Dream Weaver Program, HERE Now, Come Play Outside)

The youth outreach and engagement priority supports youth in school and community settings from secondary school to college level. Locally, SDCBHS conducts outreach at schools, Parks and Recreation centers, and various community locations. These programs focus on providing education, information, and connections to mental health services.

#### **Culturally Competent and Linguistically Appropriate Prevention and Intervention**

(Dream Weaver Program, Elder Multicultural Access Support, Positive Solutions, REACH, Supported Employment Technical Assistance, Suicide Prevention and Stigma Reduction Media Campaign Up2Us, Suicide Prevention Action Plan, Father 2 Child, Family and Adult Peer Support, Breaking Down Barriers, Mental Health First Aid, Independent Living Associations, Courage to Call)

San Diego strives for cultural competency across all County programs and PEI promotes this goal. The culturally competent and linguistically appropriate prevention and intervention priority focuses on reaching underserved cultural populations and addresses specific barriers related to racial, ethnic, cultural, language, gender, age, economic, or other disparities in mental health services access, quality, and outcomes.

#### **Older Adults**

(Dream Weaver Program, Elder Multicultural Access Support Services, Positive Solutions, REACH)

The older adult priority includes outreach and engagement strategies for caregivers of older adults or family members with chronic illness, victims of elder abuse, and older individuals living alone or isolated. The programs include early identification of mental health symptoms through screening and assessment, with a focus on referrals to appropriate services.

#### Early Identification Programming of Mental Health Symptoms and Disorders

(Next Steps, Kickstart, REACH, Rural integrated Behavioral Health and Primary Care, School-Based Programs, HERE Now)

This final priority area includes programs focused on early identification of mental health symptoms and disorders, including, but not limited to, anxiety, depression, and psychosis. It is expected that programs in this priority address the following: (1) childhood trauma prevention and early intervention to deal with the early origins of mental health needs; (2) early psychosis and mood disorder detection and intervention, and mood disorder and suicide prevention programming that occurs across the lifespan; (3) youth outreach and engagement strategies for secondary school and transitional-aged youth, including partnering with college mental health programs.

## **How the PEI Measures Were Chosen**

PEI evaluation measures were created based on the MHSA's goals for PEI programs. These goals aim to increase access to services, reduce stigma and discrimination towards mental illness, and increase positive coping skills. Additionally, there was a desire to measure participants' level of satisfaction with the PEI services provided. The PEI MHSA regulations require that each county collect demographic and supplemental outcome data to evaluate MHSA-funded PEI programs.

Research specialists at the Health Services Research Center (HSRC) and the Child and Adolescent Services Research Center (CASRC), in collaboration with staff at the County of San Diego Health and Human Services Agency's Behavioral Health Services, facilitated diverse stakeholder group discussions in 2015 to gather community input on mapping MHSA's goals for PEI to appropriate outcome survey questions. The stakeholder groups represented the focus areas and priority populations listed in Table 1.

Table 1: Focus Areas and Priority Populations Represented in Stakeholder Interviews

#### **Focus Areas Priority Populations** Native American Communities • Trauma-Exposed Individuals • Veterans and their Families • Individuals Experiencing Onset of Serious • Dual Diagnosis Adults, Older Adults, and Youth Psychiatric Illness • Early Childhood/Education-Based Services Children/Youth in Stressed Families • Children/Youth at Risk for School Failure • Individuals Exposed to Community/Domestic Violence First Break of Mental Illness • Children/Youth at Risk for Juvenile Justice Involvement • Rural East, North Inland and Mountain Communities • Services for Older Adults

By using a participatory approach with stakeholders, research specialists and BHS staff were able to assess, prioritize, and create four outcome measures that reflected the MHSA goals. The responses to the following outcome survey questions comprise a 5-point Likert scale from "strongly disagree" to "strongly agree".

- Outcome 1 (Access to Services): "I know where to get help when I need it."
- Outcome 2 (Reduced Stigma): "I am more comfortable seeking help."
- Outcome 3 (Coping Skills): "I am better able to handle things."
- Outcome 4 (Satisfaction): "Overall, I am satisfied with the services I receive here."

Three-Year PEI Report to MHSOAC

Data Source: PEI Survey (FY2122 to FY2324)

Report Date: 2/3/2025

## **Research Methods**

The evaluation of the County of San Diego's PEI program is conducted in collaboration with two research centers at UC San Diego. CASRC coordinates the evaluation efforts for programs for children and youth. HSRC is responsible for the evaluation of the adult PEI programs.

Due to the diverse nature of the County of San Diego's PEI programs, there are two types of data collection methods for the demographics and outcome questions. Programs that focus on outreach, training, and one-point-in-time contact with participants provide the demographic and outcome questions to participants at the conclusion of multi-day and one-time events. For instance, programs that have mental health training provide the survey to attendees at the end of the training session, along with mental health resources.

PEI programs that meet with participants more than once administer the PEI surveys at different time points to assess change over time. The initial survey includes the demographic measures and is given to the participant upon entry to the program. The evaluation outcome items are administered to participants at the last session of a service event, at discharge, or at a standard follow-up interval (e.g., three or six months) depending on the duration of services.

Programs have the option to use one of several data collection systems based on their own program needs. Many of the programs utilize the Mental Health Outcomes Management System (mHOMS) developed by HSRC for data capture and reporting. One child and youth program uses Teleforms, which are scanned into a database using the Teleform System. Programs that rely on their own electronic health record (EHR) or data collection system for clinical purposes, have the option to export their data into Excel and share the data through a secure data sharing system. Lastly, due to the COVID-19 pandemic, many programs began providing services through telehealth or trainings online using webbased tools such as Zoom, Facebook, or Instagram. These programs have their participants complete the PEI survey via Qualtrics designed by CASRC or HSRC.

The programs that use mHOMS also have access to automated reports that aggregate demographic and outcome data based on date range. These reports provide for timely review of outcomes and demographics. They are used by programs to share feedback to program staff and improve services to underrepresented populations. Ultimately, this demonstrates that the data obtained not only assist in evaluation efforts, but also provide useful information for program planning and clinical utility for program managers and staff.

## **PEI Evaluation Measure Results**

This section provides the results of the County of San Diego's four PEI outcomes combined for fiscal years 2021-22, 2022-23 and 2023-24. Sometimes participants did not answer all four survey items. In this section, the total number of non-missing responses is shown for each outcome item.

One of the most significant outcomes was regarding access to services, which was defined by participants reporting that as a result of the PEI program, they knew where to get help when they needed it. Among over 80,000 respondents, 87.8% stated they "agreed" or "strongly agreed".

Figure 2: Participant-Reported Outcomes for Satisfaction, Reduced Stigma, and Coping Skills

Satisfaction: I am satisfied with the services I received. (N=83,031)

87.8%



Coping Skills: I am better able to handle things. (N=71,892)

75.0%



Reduced Stigma: I am more comfortable seeking help. (N=71,936)

71.8%



Figure 1: Participant-Reported Access to Services Outcomes (N=80,581)

87.8% of PEI participants reported improved ability to access services by stating they "agreed" or "strongly agreed" they knew where to get help when needed, as a result of the PEI program.

There were also positive results in each of the other three outcomes regarding satisfaction, reduced stigma, and coping skills. Figure 2 shows the results of each of these outcome questions. Satisfaction with PEI programs was high with 87.8% of respondents stating they "agreed" or "strongly agreed" with the satisfaction outcome. Approximately 75% of clients reported they "agreed" or "strongly agreed" that they were better able to handle things and almost 72% were more comfortable seeking help as a result of the PEI program.

These positive evaluation outcomes help demonstrate the effectiveness of the PEI programs and strategies in supporting children, youth, adults, and older adults who are addressing their mental health concerns early on.

The results of the County of San Diego's four PEI outcome questions are included in Table 2. This table includes both the count of responses for each outcome and the percentage who reported "strongly disagree or disagree," "neutral," or "agree and strongly agree".

**Table 2. PEI Outcome Questions** 

(As a result of the program)*	N	Strongly Disagree & Disagree	Neutral	Agree & Strongly Agree
Access to Services: I know where to get help when I need it.	80,581	5.5%	6.7%	87.8%
Reduced Stigma: I am more comfortable seeking help.	71,936	10.6%	17.6%	71.8%
Coping Skills: I am better able to handle things.	71,892	7.7%	17.3%	75.0%
Satisfaction: Overall, I am satisfied with the serviced I received here.	83,031	4.3%	7.9%	87.8%

<sup>\*</sup>Percentages may not sum to 100 percent due to rounding.

At the three-year reporting period, MHSA regulations require submission of three years of PEI demographic data as delineated in the regulations. These data were submitted to Mental Health Services Oversight and Accountability Commission (MHSOAC) in a supplemental file.

### **Conclusion**

The County of San Diego serves a variety of populations, ages, and participants with varying degrees of mental health concerns. The positive results of the implementation of PEI in the County are demonstrated by most participants reporting that, because of the program, they know where to get help when needed. These results show that the County of San Diego's PEI program is effective in providing access to treatment and linking participants to the mental health and substance use resources and services that may be needed.

### **APPENDIX**

Three-Year PEI Report to MHSOAC

Page 10

Data Source: PEI Survey (FY2122 to FY2324)

Report Date: 2/3/2025

County of San Diego PEI Programs		
Program Name	Program Description	
Community County-Wide Violence Response Team (DV03)	The countywide Community Violence Response Team (CVRT) PEI program provides culturally appropriate support and services to victims and witnesses of community violence. These services include, but are not limited to, therapeutic support, short-term system navigation assistance, case management, crisis intervention, grief counseling, and referrals to community partners and other needed services. CVRT offers interventions designed to build and increase community resiliency and decrease the negative effects of violence. The program also aims to enhance the skills of providers, schools, and community- and faith-based organizations to ensure coordinated neighborhood responses to community violence. CVRT is capable of responding within forty-eight (48) hours after an incident of community violence when it is determined safe to do so.	
Community Services for Families (DV04)	Family Support Clinicians work within San Diego's Child and Family Well Being Department (CFWB) to enhance parents' ability to create stable and nurturing home environments for their children. The Family Support Clinician (FSC) engages with clients who have a reported incident or history of domestic violence to provide clinical assessments. FSC staff work with CFWB to prioritize cases based on the clients' need for immediate services. The clinicians conduct a thorough assessment of all relevant family members to determine their risk for involvement in domestic violence, mental health issues, and substance abuse. The assessment also focuses on clients' strengths and is client-driven. Clinicians seek input from families on recommendations for referrals, which may include both formal and informal supports. These recommendations are then shared with the families and their social workers so that the families can be linked with needed services, such as therapy or parenting classes. Family Support Clinicians are currently employed at four regionally located, community-based organizations. Clinician services are short-term, often limited to one visit, and may be provided in a telehealth format due to COVID-19, as needed or when appropriate.	

County of San Diego PEI Programs		
Program Name	Program Description	
The Triple P - Positive Parenting Program (EC01)	The Triple P – Positive Parenting Program serves Child Development Establishments, including but not limited to Head Starts (HS), Early Head Starts (EHS), preschools, elementary schools, middle and high schools, and community centers. Services strengthen the skills of parents, childcare staff, and educators in promoting the development, growth, health, and social competence of young children and adolescents. Services are designed to benefit the child and/or adolescent by teaching caregivers and staff at childcare or youth-serving sites specific parenting skills and techniques for managing misbehavior while promoting effective communication. This Triple P program provides three levels of service: Triple P Level 2 Selected (Seminar), Triple P Level 3 Primary Care (Individual), and Triple P Level 4 Group training for group and individual participants. Staff are also trained to provide ongoing support to the family/caregiver once the Triple P curriculum is completed. This program serves all of San Diego County. Triple P offers optional virtual services for all levels to reduce accessibility barriers for families throughout the county.	

County of San Diego PEI Programs		
Program Name	Program Description	
Kickstart Program (FB01)	The purpose of this program is to provide prevention and early intervention services to youth and young adults ages 10-25 who may have clinical high risk (CHR) symptoms of psychosis or have had their first episode of psychosis (FEP). The prevention component of the program focuses on providing psychoeducation and outreach to the community. These include other behavioral health providers, school staff, hospital staff, faith-based leaders, and others who may have contact with youth in general community settings. These community leaders are provided education and information on the early detection of behaviors and symptoms that are risk factors for developing psychosis. The early intervention component of the program includes a comprehensive assessment (the Structured Interview for Psychosis-Risk Syndromes) to determine the risk for, or the presence of, severe mental illness. This instrument also assesses for emotional dysregulation, physical health needs, stress tolerance, cognitive functioning, substance use issues, and potential safety concerns. Based upon the results of the assessment, youth and their families may be referred and linked to outside community resources to best meet their needs. Youth who screen positive for CHR or FEP symptoms receive an intake into this program. They then participate in a variety of services such as: psychoeducation workshops, multifamily groups, and support services, which include medication/nursing services, occupational therapy, peer support services, and education/employment support. Treatment interventions include individual, family, and group therapy. These services may be provided via telehealth. This report focuses on youth and community demographics and youth outcomes.	

County of San Diego PEI Programs		
Program Name	Program Description	
Dreamweaver Program (NA01)	The Dream Weaver Consortium offers PEI services provided by the San Diego American Indian Health Center, Indian Health Council, and Southern Indian Health Council. These providers offer prevention and early intervention activities which promote community wellness and cultural awareness. Emphasis is placed on increasing awareness and access to cultural events that are known to support resilience. These services include: cultural programs that maintain language and crafts, nutrition programs, self-esteem activities, elder navigator services, early intervention services, positive parenting, mental health awareness, exercise programs, and referral for and the promotion of overall increased health. All of these services are intended to prevent the onset of serious mental health problems and to increase access to services when needed.	
Come Play Outside (PS01)	The Come Play Outside program is a community-based initiative designed to support the health and wellness of children, youth, and families participating in activities organized by the City of San Diego Parks & Recreation Department. The program primarily operates on Thursday, Friday, and Saturday evenings at selected Parks and Recreation sites during the summer months. The intergenerational programming is designed to strengthen family bonds and community connections while aiming to reduce instances of community violence. The program also aims to improve behavioral health in children and youth by encouraging positive social interactions, bolstering self-image, and nurturing hope, confidence, and a sense of responsibility.	

County of San Diego PEI Programs		
Program Name	Program Description	
School-Based Programs (SA01)	The School Based Prevention and Early Intervention Programs provide culturally appropriate, multi-tiered prevention and intervention services in public elementary schools across San Diego County's six regions. The program serves early elementary students (e.g., preschool/kindergarten through third grade) and their families in participating schools, regardless of insurance status. Services are designed to promote emotional and social competence and to prevent, reduce, and treat behaviors that negatively impact student functioning. The programs provide the following key components:  • Social-Emotional Screening: All students in PreK-3rd grades with parental consent are screened to identify the appropriate level of intervention needed.  • Interventions utilizing the Incredible Years Curriculum (IY) - Classroom Lessons: Weekly sessions that are designed to enhance students' social and emotional skills Small Groups: Targeted intervention groups for a subset of students, where students learn and practice age-appropriate social skills to promote positive interactions with peers and adults Parent Groups: Sessions for parents and caregivers at the participating schools designed to promote positive parenting practices that mirrors what the students are learning.  • Community Outreach Specialists, also called Promotoras, work with parents, school, and the community to determine prevention needs and provide resources and or connection to services that focus on family wellness, strengthening resilience, reducing disparities in accessing mental health services, reducing stigma and discrimination, and helping families make connections with the schools and other services/supports in the community.  These services shall increase the protective factors and resilience of the family, reduce family isolation, and increase parent involvement with the schools	

County of San Diego PEI Programs		
Program Name	Program Description	
HERE Now (SA02)	San Diego Youth Services (SDYS), Lifeline Community Services(LCS), and South Bay Community Services (SBCS) are collaborating through the Helping, Engaging, Reconnecting and Educating (HERE) Now program to prevent youth suicide and suicidal ideation and create a safer place to learn in San Diego County. The HERE Now Program focuses on preventing suicide by educating youth (7th through 12th grade) and their families on the risk factors of suicide and reducing the stigma around seeking help for themselves or others. The HERE Now program seeks to shift social norms about the stigma attached to individuals who seek mental health services by: being proactive in reaching out to the community and community leaders; promoting education about mental health; teaching in the schools; reaching out to parents; changing policies; implementing bullying prevention; and, having in place a seamless system of services that identifies youth who need help before they attempt suicide. HERE Now helps students acknowledge safety warning signs and encourages them to reach out for support through a trusted adult, both at school and at home. The program also highlights online and tele-resources such as the San Diego Access and Crisis phone and text lines as well as San Diego's LiveWell@Home 30-Day Challenge.	
Next Steps (CO03)	Next Steps is a recovery-oriented peer and family support program providing outreach and engagement to participants and their family members. Next Steps is led by National Alliance on Mental Illness (NAMI) San Diego, in collaborative partnership with Mental Health Systems Inc (MHS), and Union of Pan Asian Communities (UPAC). Next Steps uses an integrated care model with peer support specialists that address the needs of participants in the areas of mental health, physical health, substance use and quality of life. Next Steps supports participants on the path to achieving their whole-health goals and recovery journey.	

County of San Diego PEI Programs		
Program Name	Program Description	
Elder Multicultural Access and Support Services (OA01)	Elder Multicultural Access and Support Services (EMASS) provides multicultural and linguistically appropriate PEI services to underserved Latino, African American, Asian, Pacific Islander, Filipino, East African, and Middle Eastern seniors over 60 years old utilizing the Promotora model. We aim to identify and prevent mental health issues, reduce ER visits and hospital admissions, improve access to health, mental health care and enhance the service capacity and quality of older adult care. We also link East African and Middle Eastern refugees over 60 years old with Special Immigrant Visas to translation services, acculturation education, citizenship and adjustment to the main culture classes, as well as medical and mental health navigation.	
Positive Solutions (OA02)	The Positive Solutions program provides psychoeducation, linkage to services, prevention, and short-term early intervention mental health services to underserved older adults who are racially, ethnically, and culturally diverse, and who report signs and symptoms of depression. This program seeks to increase knowledge of mental health warning signs and reduce stigma and disparities in access to mental health services. Positive Solutions utilizes an evidence-based therapeutic modality called PEARLS, a combination of Problem-Solving Therapy (PST) and Motivational Interviewing (MI) to treat signs and symptoms of depression. Therapy is short-term and limited up to 15 therapeutic sessions.	

County of San Diego PEI Programs		
Program Name	Program Description	
Southern Caregiver Resource Center's REACH Program (OA06)	Cuidadores Acompanandose y Luchando para Mejorar y Seguir Adelante (CALMA), derived from REACH- Resources for Enhancing Alzheimer's Caregiver Health, for Spanish language families, and "Caregiver TLC: Thrive, Learn & Connect" (CG TLC), derived from "Coping with Caregiving" is operated by the Southern Caregiver Resource Center (SCRC) and makes it possible for people with dementia to live in their own homes longer by addressing problems related to caregiver health that often force people to move their loved ones to long-term care facilities. CALMA is a four-class series (delivered via telehealth technology or in person) that teaches family caregivers the skills to find solutions for caregiver stress, challenging behaviors, home safety, depression, self-care, and social support. The program improves the caregiver's overall quality of life, increases involvement in self-care, increases level of connectedness and social support, increases caregiving abilities, decreases feelings of anger, decreases levels of stress, and decreases caregiver depressive symptoms. CG TLC is a six-class series, specifically designed to be delivered via telehealth technology (Zoom). The virtual design for the CG TLC intervention was developed to help increase access to the proven supportive services of CWC, helping overcome barriers imposed by the confinement and restrictions of the COVID-19 pandemic. CG TLC was created to support caregiver stressors unique to those supporting loved ones with dementia/memory loss and physical chronic illness. In this evidenced-based class, caregivers learn about topics of stress and stress management, behavioral activation for mood stabilization, resilience and their support team, self-care, frustration and anger management, and how to reduce isolation and stay socially connected while staying primarily at home.	

County of San Diego PEI Programs		
Program Name	Program Description	
Family Adult Peer Support Program (PS01)	The Family Adult Peer Support Program is a prevention program that promotes social and emotional wellness for adults, older adults, and their families by two trained community speakers in meeting format. Trained speakers share their personal stories about living with mental illness and achieving recovery. Additionally, written information on mental health topics and resources are provided with compassionate support to families and friends who have loved ones who were hospitalized with a mental illness. The aim is to reduce stigma about mental illness and improve hope for recovery from a mental health condition. The program also provides resource navigation and compassionate support for family members and individuals with a behavioral health condition through a call center helpline and in person lobby services.	
Father2Child Program (PS01 F2C)	Father2Child is an ACEs Prevention Program provided by Mental Health America of San Diego County (MHASD) in central and east county, Vista Community Clinic in north coastal county, New Alternatives in north central and north inland county, and South Bay Community Services in south county. The intent of the program is to provide a best practice parenting program to unserved and underserved fathers that enhances fathering knowledge, skills, and positive attitudes while connecting the relationship between reducing mental health stigma and having a successful fathering relationship with the child(ren). The program aims to reduce Adverse Childhood Experiences (ACEs) in children. It is a free courtapproved 12-week program for fathers of all ethnicities.	
Breaking Down Barriers (PS01C)	Breaking Down Barriers is provided by Jewish Family Service (JFS) and works with seven priority populations that include people who identify with and/or serve members of the following communities: Latino, African American, LGBTQ+, African/Refugee, Middle Eastern, Asian/Pacific Islander, and Native American. Breaking Down Barriers aims to reduce mental health stigma by (1) providing mental health outreach, engagement, and education to members of unserved and underserved communities and (2) creating effective collaborations with other agencies, community groups, client and family member organizations, and other stakeholders to support the program's mental health stigma and discrimination reduction campaign.	

County of San Diego PEI Programs		
Program Name	Program Description	
Mental Health First Aid San Diego (PS01H)	Mental Health First Aid (MHFA) is an evidence-based Adult and Youth free certification offered to all individuals across the County of San Diego, including faith, rural, businesses (non- and for-profit), and refugee communities and County Health and Human Service Agency employees. MHFA is designed to help participants recognize risk factors and warning signs of existing and emerging mental health challenges in every day and crisis situations. MHFA aims to empower participants to provide appropriate support, timely intervention and provide resources where to seek help. MHFA demystifies and reduces stigma and changing how the community as a whole view those experiencing mental health challenges.	
Supported Employment Technical Consultant Services (PS01)	Provides consultant services for increased employment opportunities for adults with SMI.	
Rural Integrated Behavioral Health and Primary Care Services (RC01)	The Rural Integrated Behavioral Health (RIBH) and Primary Care Services program has established fully integrated, behavioral health/primary care services for children, adolescents, transitional age youth, adults, and older adults in partnered federally qualified health clinics (FQHC) in five rural communities in San Diego County. The locations include Ramona, Julian, Valley Center, Alpine and Campo. This program implements services that prevent patients from developing an increased level of behavioral health issues, severe mental illness, or addiction by addressing behavioral health needs early. The patients of this program are referred by providers or can be self-referred so long as they are patients of the clinic. The program is comprised of behavioral health consultants that are licensed mental health clinicians and para-professional behavioral health educators that provide screening, brief interventions, case management, and triaging services. The team provides wellness events to the greater communities to destigmatize mental illness, educate on mental fitness and behavioral health, and provide resources and social collaboration within the communities.	

County of San Diego PEI Programs	
Program Name	Program Description
Independent Living Association and Recovery Residence Association (RE01)	Independent livings are privately-owned or operated homes or complexes that provide shared housing for adults with disabilities, including mental illness and others who may benefit from a shared living environment. Tenants in independent livings can live independently, are often on a fixed income, and do not need supervision or care from their landlord.  The Independent Living Association (ILA) is a collaborative community-wide effort focused on supporting independent living operators, tenants, and the community by promoting high-quality independent livings. This groundbreaking project, which began in July 2012 in San Diego County, is the first of its kind to organize and promote Independent Livings. Since 2012, the ILA has expanded to Alameda County (2017) and Fresno County (2018).
Courage to Call-Veterans and Family Outreach Education (VF01)	The Courage to Call program provides a confidential peer support hotline and navigation services to refer, link resources and services for veterans, active duty, military, reservists, National Guard, and their families. Specifically, the 7/24/365 hotline provides mental health information, linkages to mental health services (including psychiatry when indicated), navigation to link to essential services, and other resources.

Report Date: 2/3/2025