

BEHAVIORAL HEALTH ADVISORY BOARD
TRANSITIONAL AGE YOUTH (TAY) COMMITTEE
MINUTES ■ Thursday February 25, 2021

<p>Members Present Elizabeth R. Stone, Committee Chair Ratan Bhavnani, BHAB Lorena Guereca, Vista Real Charter High School Mary Haffner, BHAB Soledad Barragan, BHAB Anthony Marron, TAY Tunnel Francisco Perez, TAY Tunnel Cathi Nye, VC Office of Education Homeless Education Carole Shelton</p> <p>Others Present Scott Walker, VC Law Enforcement CIT Herman Corteza, Pacific Clinics TAY Tunnel Juliana Cervantes, Interface Children Family Services CJ Keavney, BHAB</p>	<p>Ventura County Behavioral Health (VCBH) Managers/Staff Present Wendi Amezquita, VCBH Transitions Clinic Administrator John Schipper, VCBH Adult Division Chief Greg Bergan, VCBH MHSA Sara Sanchez, VCBH Adult Behavioral Health Manager Joanna Peterson, VCBH Management Assistant</p> <p>NEXT MEETING: Thursday, April 22, 2021</p>
<p>Note: The committee has not yet approved these minutes. There may be additions/deletions or corrections before the minutes are accepted in final form.</p>	

	DISCUSSION/CONCLUSIONS	RECOMMENDATIONS/ ACTIONS	RESPONSIBLE
I.	<p>Call to Order The meeting was called to order at 10:33am and a quorum was met. CJ Keavney expressed interest in becoming a member when eligible.</p>		
II.	<p>Approval of the Agenda Mr. Bhavnani moved to approve the agenda. Carole Shelton seconded. The motion carried unanimously through roll call.</p>	The agenda was approved as written. M/S/C	
III.	<p>Approval of the December 17, 2020 Minutes Ms. Shelton moved to approve the minutes. Ms. Nye seconded. The motion carried unanimously through roll call. Ms. Guereca abstained since she had been absent.</p>	The 12/17/2020 minutes were approved. M/S/C	
IV.	<p>Welcome and Introductions Ms. Stone welcomed members of the Committee and other attendees to the meeting. It was noted technical difficulties related to the high winds prevented the Spanish-language translator from being present.</p>		
V.	<p>Chair Announcements Ms. Stone announced this was her first time facilitating on Zoom and as the newly appointed chair.</p>		
VI.	<p>Public Comments None.</p>		
VII.	<p>A. Presentation about VCBH’s Early Detection and Intervention for the Prevention of Psychosis (EDIPP) Sara Sanchez noted this was the third meeting in which the EDIPP (Early Detection and Intervention to Prevent Psychosis) program was being discussed/presented. The program is based on the 2007 research of the Portland Identification and Early Referral (PIER) Institute which developed evidenced-based methods for outreach, engagement and treatment of transitional-aged youth (TAY). The name of Ventura County Behavioral Health’s EDIPP program is Ventura County Power over Prodromal Psychosis (VCPOP), and it is in its second year. Current VCPop staff and their backgrounds were described. The program has begun to be distinguished from the broader Transitions Team and PIER Institute training remains ongoing. The focus is on identifying young people experiencing changes suspected of being related to first episode psychosis. Services are county-wide, designed/intended to “meet people where they are at,” and are two years in duration. The nature of discharge varies across individuals. The goals of VCPop include community education to increase the chances for early intervention</p>		

	<p>with individuals and their family and/or support systems. Stigma reduction is a key component. Enrollment numbers were reviewed and indicate marked increases in the second year. Several sample slides from the PowerPoint presentation used in the community meeting were reviewed (e.g., "Information About Psychosis," "Prodromal Symptoms," "Early Detection Makes a Difference," "Projection of Illness, Functioning and Intervention," "The Stress-Vulnerability Model," etc.). VCPOP eligibility criteria were explained as: (1) age 16-25 years; (2) experiencing first episode psychosis; or (3) prodromal symptoms. The Structured Interview for Psychosis Risk Syndromes (SIPS), a semi-structured assessment tool, is employed in accordance with the PIER model. The referral process can be initiated by the individual, family members, or other professionals. The range of services/treatment provided by VCPOP were discussed, including multi-family groups (conducted using Zoom) and rapid initiation of treatment. The wide range of past and pending outreach presentations were described (i.e., VCBH's Youth and Family Clinics, schools, Juvenile Justice Center, etc.)</p> <p>Ms. Stone asked (1) if there were peers and/or parent partners working in the program and (2) about whole person care and best practices related to cultural traditions. It was noted peer and parent partner involvement is a goal of the program. Additionally, cultural context and individualized treatment were described as a focus of the VCPOP team.</p> <p>Ms. Haffner expressed her concerned about the "real world" difficulties of preventing psychosis and cited some research finding to that effect. She also spoke to concerns about fidelity.</p> <p>Ms. Shelton asked about (1) outreach to the community at large, (2) kids below 16 years of age, (3) long term outcomes, and (4) how it actually works? Reaching parents is a goal (noted to be more difficult than connecting with agencies) and suggestions/invitations to give a presentation were sought. VCPOP makes itself available to provide consultation to the Youth and Family clinics treating those under age 18 and changes to the age criteria is a consideration going forward. Measuring "long term" outcomes were hampered by early struggles of the program while in the hands of the prior contracted provider, but the intent is to measure outcomes using guidance from the PIER Institute. The actual program was described in terms of individual therapy, weekly contact with a case manager, access to the psychiatrist and nurse, and multi-family groups.</p> <p>Mr. Perez queried and was advised the presentation is available in Spanish.</p> <p>Ms. Barragan raised concerns about individuals under age 16, a safe/welcoming clinic environment, and stigma in the broader community. La Clave was described as one tool intended to address concerns along these lines.</p> <p>Questions about program funding and fidelity to admission criteria were addressed.</p>		
VIII.	<p>Committee Members' and Participants Comments, Activities</p> <p>A. Ms. Guereca, Vista Real Charter High School, informed the group that distance learning and continuous enrollment remains ongoing for students ages 14-24.</p> <p>B. Mr. Perez, Pacific Clinics' TAY Tunnel, informed the group that a Ring doorbell (smart device) allows communication and messaging ability at the TAY Tunnel.</p>		
IX.	<p>Items for the Next Meeting Agenda</p> <p>A. Ms. Stone expressed her vision for the committee that it be largely directed by the individuals for whom the services are intended. Going forward, she hopes to encourage a model that include cofacilitation, thereby allowing TAY individuals to participate more and to develop their leadership skills. Fliers, food and/or other incentives, change of venue, hours of the meeting were discussed.</p> <p>B. Ms. Stone announced that MHSA has been devoting a significant amount of funding to various programs for TAY, along with an implementation project for the way those funds will be rolled out. She noted the California Reducing Disparities Project and the involvement of the California Youth Empowerment Network as a possible area for future discussion.</p>		
X.	<p>Adjourn</p> <p>The meeting was adjourned at 12:30pm.</p>		



A Department of Ventura County Health Care Agency

Early Detection and Intervention to Prevent Psychosis

EDIPP

Ventura County Power over Prodromal Psychosis

VCPOP



VCPOP Staff

- Sara Sanchez, LMFT - Behavioral Health Manager
- Wendi Amezquita, LCSW Clinic Administrator
- Amy Lopez, LCSW - Behavioral Health Clinician
- Yezet Lopez, ASW - Behavioral Health Clinician
- Noah Amerault - Mental Health Associate
- Jessica Reyes - Mental Health Associate
- Amanda Robles - Senior Registered Nurse
- Dr. Herron - Psychiatrist



PIER Institute Supervision

- Dr. Alex Kopelowicz, Psychiatrist
 - West-Coast Regional PIER Program Supervisor
- Dr. Barbara Walsh, PhD
 - Clinical Supervisor of SIPS Assessments
- Lizeth Ma, LMFT
 - Multi-Family Group
- Rebecca Jaines, LCPC
 - Outreach Supervision
- Donna Downing, MS, OT
 - Employment and Education



VCPOP

- Prevention Early Intervention program designed to assist in the recovery of individuals experiencing prodromal symptoms or the onset of psychosis
 - We utilize the word “Recovery” not to mean cure, but rather to suggest the opportunity for individuals to limit the morbidity of their illness and improve their health and wellness
<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4266306/#CIT0002>
- Services are available countywide
- Program lasts up to two years focusing upon increasing coping skills and decreasing/managing stress for the client and the whole family
- VCPOP provides services for individuals experiencing prodromal symptoms and those that have experienced their first episode of psychosis within the last 6 months

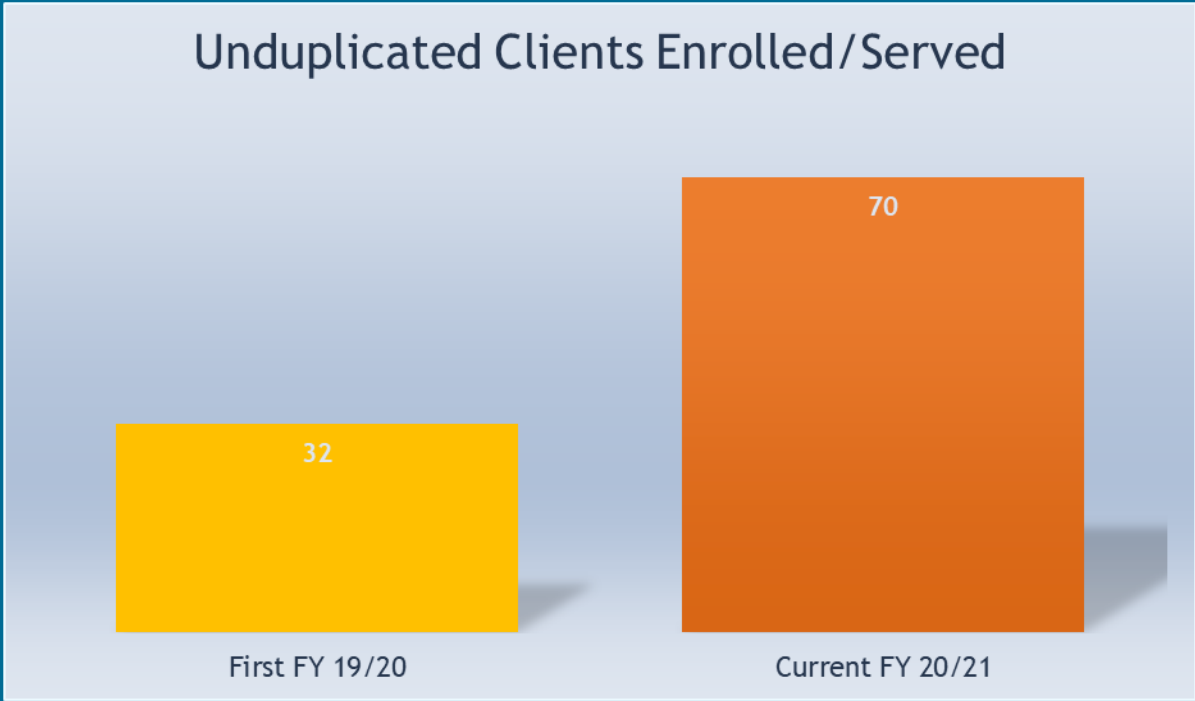


VCPOP Goals

- Work alongside the community to provide education and early intervention
 - Research has shown that educating the public and community leaders will significantly increase the changes that a young person will receive early
- Work with young people, their families and/or their social networks to support in young peoples' success in relationships, education, and employment



VCPOP Clients Enrolled/Served



Information About Psychosis

- Psychotic experiences can be part of the normal human experience and do not necessarily imply diagnosis
- 1 in 10 people report they have “heard voices”
- These are as common as being left-handed
- Mental health symptoms are like other medical problems in that early signs and symptoms usually occur before serious illness develops



Prodromal Symptoms

- Feeling “something’s not quite right”
- Having trouble thinking clearly, focusing or concentrating
- Worrisome drop in school or work performance
- Unusual thoughts and confusion
- Suspiciousness, fears or uneasiness with others
- Mood instability
- Declining interest in people, activities and self-care
- Pervasive anxiety
- Disrupted sleep patterns
- Fearful for no good reason
- Difficulty communicating and understanding



Early Detection Makes a Difference

- Ways early intervention can make a difference:
 - Quicker and more complete recovery
 - Preservation of brain functioning
 - Preservation of psychosocial skills
 - Decreased need for intensive treatments
 - Preservation and supports, especially family/friends
 - Less stigma and perception of rejection



Projection of Illness, Functioning and Intervention



The Stress-Vulnerability Model

Genetic predisposition (genetic risk of psychosis) will require less water to overflow the bucket

Positive Events

Negative Events



Acute Stress

Chronic Stress

All can cause an overflow...



Reducing changes of overflow (think of a sponge absorbing water)

Exercise

Social
Support

Healthy Eating

Spirituality

Self-Care



Community resources

Medication

Family support

Avoiding
Substance

Abuse

Developing coping skills



VCPOP Criteria

- Transition aged youth (16-25)
- Experiencing First Episode Psychosis
 - Onset is within the last 6 months
- Experiencing Prodromal Symptoms
 - No set time frame of onset or duration



Structured Interview for Psychosis Risk Syndromes (SIPS)

- Semi-structured Assessment Tool
- Translated & validated into 15 different languages
- Rules out past and/or current psychosis
- Rule in lifetime history of one or more of the three types of psychosis-risk syndromes
- Rate the current severity of psychosis-risk symptoms
- The three prodromal states are not mutually exclusive.



Referral Process

- Community members, individual, family, and professionals may make the referral
- You may contact: VCPOP directly at: 805-981-8865
 - Request to speak with a VCPOP staff to discuss a referral
- You may also contact STAR at: 805-981-4233
- VCPOP works in collaboration with STAR/RISE to ensure smooth transition to VCPOP services



VCPOP - Clinical and Functional Intervention

- Community Outreach and Education
- Psychoeducational Multi Family Groups
- Rapid Initiation of Treatment
- Community Based Services
- Cognitive Behavioral Therapy for Psychosis
- Medication Management
- Case Management
- Supported Employment and Education
- Integrated Services on Multidisciplinary Team
- 24 hour Availability with Crisis Team



Multiple Family Groups

- Multi Family Groups are designed to:
 - Reduce stigma and shame and promote connection
 - Help families and consumers better understand mental illness while working together toward recovery
 - Recognize the family's important role in recovery
 - Understand symptoms are different from personality
 - Prevent relapse
 - Help manage stressful situations as they arise
 - Support healthy living
 - Recovery of ability to work and relate to others



VCPOP Presentations

- VCPPOP team has presented to:
 - VCBH Youth and Family Clinics
 - VCBH School-Based Clinicians
 - VCBH Youth and Family Psychiatrists
 - VCBH Child Welfare Sub-System
 - Academic Family Medicine Pediatric Clinics
 - Juvenile Justice Center
 - Vista Real Charter School
 - TAY Tunnel
- Ventura County of Education - Counselors
 - 11 Districts
 - Conejo, Hueneme, Moorpark, Oak Park, Ojai, Oxnard, Oxnard Union, Rio, Santa Paula, Simi Valley, and Ventura



Upcoming VCPOP Presentations

- Hospitals
- Law Enforcement
- Mental Health Professionals in the Community
- Colleges
- Outpatient Medical Clinics



VCPOP

Any questions
or
comments?

Thank You!

