

**BEHAVIORAL HEALTH ADVISORY BOARD
YOUTH & FAMILY COMMITTEE
MINUTES ■ Wednesday, May 8, 2019**

Members Present

Gina Petrus, Committee Alternate Chair
Jerry Harris, BHAB Chair
Jamie Banker, BHAB
Martie Miles, Aspiranet
Joelle Vessels, Interface
Crystal Cummings, Kids & Families Together
Scott Abeson, Probation
Laurie Jordan, Rainbow Connection
Carole Shelton, Rainbow Connection
Yanka Ricklefts, SELPA
Lori Litel, United Parents
Danielle Shaw, M.D.

Others Present

Joe S. Ramirez
Jonathan Porto, Seneca
Elizabeth Theis, Beacon Health Options
Jennifer Claros, Gold Coast Health Plan
Julianne Block, Gold Coast Health Plan
Maria Calvert, Gold Coast Health Plan
Scott Walker, Sheriff's Office, Crisis Intervention Team (CIT) Program

Ventura County Behavioral Health (VCBH) Managers/Staff Present

Dina Olivas, Youth & Family Division Sr. Manager
Dr. Lisa Acosta, Y&F Division Medical Director
Clara Barron, MHSA
Esperanza Ortega, MHSA
Pam Roach, Transformational Liaison
Edith Pham, BHAB Assistant

NEXT MEETING:

Wednesday, June 12, 2019, 10:00 a.m. – 12:00 pm

Ventura County Behavioral Health (VCBH)
1911 Williams Drive, Training Room (first floor), Oxnard

Note: The committee has not yet approved these minutes. There may be additions/deletions or corrections before the minutes are accepted in final form.

	DISCUSSION/CONCLUSIONS	RECOMMENDATIONS/ ACTIONS	RESPONSIBLE
I.	Call to Order Alternate Chair Gina Petrus called the meeting to order at 10:05 a.m.		
II.	Approval of the Agenda Ms. Petrus asked the Committee to review and approve today's agenda. Joelle Vessels moved to approve, Martie Miles seconded. The motion carried unanimously.	The agenda was approved as written. M/S/C	
III.	Approval of the Minutes Ms. Petrus asked the committee to review and approve the minutes of the April 10, 2019 meeting. Crystal Cummings moved to approve, Lori Litel seconded. The motion carried unanimously.	The minutes were approved as written. M/S/C	
IV.	Welcome and Introductions Ms. Petrus welcomed everyone and asked for introductions.		
V.	Chair Announcements Ms. Petrus noted that A Night to Remember, a prom for Special Needs students, will take place on May 31 st at the Ventura County Fairgrounds. Those interested in volunteering at the event are encouraged to participate. NAMI Ventura County will hold an Open House at its new location, 555 Airport Way, Suite F, in Camarillo, on May 14 from 3:00 to 6:00 p.m. Coach Up 2019 will take place on May 30 from 6:00 to 8:00 p.m. in Moorpark. This is an event for current and former justice-involved youth (ages 16 to 25). Young people can learn about the Justice Reform-Youth Advisory Council and how youth can play an active role in local juvenile justice reform.		
VI.	Public Comments Scott Walker noted that: <ul style="list-style-type: none"> ○ Law enforcement and Probation/Juvenile Facilities are in the early stages of discussions regarding the best way to deal with youth with mental health issues; ○ Mr. Walker toured the youth Crisis Stabilization Unit (CSU) with several officers from various 		

	<p>law enforcement agencies; they were given cards that will remind law enforcement to bring youth in crisis to the CSU;</p> <ul style="list-style-type: none"> o The officers from the Oxnard Police Department wore Autism patches for Autism Awareness Month; they also sold the patches, which resulted in a donation of \$15,000 to the Autism Society; o A new CIT Academy will take place the following week; Ms. Petrus will attend the session on "Youth Mental Health." 		
VII.	<p>Presentation: MHSA-Funded Youth and Family Programs – Clara Barron</p> <p>Ms. Barron shared background information on the Mental Health Services Act (MHSA). It provides funding to fill in the gaps in services to the unserved and the underserved. Ms. Barron gave an overview of the programs that serve youth and families. The current components are:</p> <ul style="list-style-type: none"> o Prevention and Early Intervention (PEI). Some PEI priorities are childhood trauma prevention and early intervention, and early psychosis and mood disorder detection and intervention. o Community Supports and Services (CSS). Some areas of focus for CSS are services to the Seriously Emotionally Disturbed (SED) students and Full Service Partnership (FSP). o Innovation (INN). Projects must increase access/services to underserved groups or improve the quality of services. <p>Stakeholder involvement, including from the BHAB, is part of the planning and evaluation process. The Annual Update to the MHSA 3-Year Plan is posted on the MHSA website, and public comments are welcome.</p> <p>See attached for details.</p>		
VIII.	<p>New Business</p> <p>A. Summer Schedule</p> <p>After a brief discussion, Laurie Jordan moved to go dark in July, and Carole Shelton seconded. The motion carried unanimously.</p>	Go dark in July M/S/C	
IX.	<p>Ventura County Behavioral Health (VCBH) Youth & Family Division Updates</p> <p>A. Youth & Family Division – Dina Olivas</p> <ul style="list-style-type: none"> o VCBH and schools in Oxnard are identifying needs for mental health services in the community and in the schools. Various strategies are being reviewed. o Services through Educationally Related Social Emotional Services (ERSES) continue to be provided in the schools. Prevention services have increased. o Logrando Bienestar will give a presentation at Pacific Clinics' Suicide Prevention conference. o Continuum of Care Reform Update: Casa Pacifica and Seneca are currently the only programs certified as Short-Term Residential Therapeutic Programs (STRTP) in Ventura County. Five other programs have a provisional license from the state and will have one year to become certified by VCBH. <p>B. Youth & Family Division Medical Director – Lisa Acosta, M.D.</p> <ul style="list-style-type: none"> o Dr. Acosta will attend a two-day conference May 21-22 called Transition of Care for People with Addiction. She will make sure that the specific needs of adolescents are heard. o Dr. Shaw and Dr. Acosta are engaging local pediatricians and primary care physicians in dialogue around knowledge/access of available local mental health resources and improving communication/coordination of care. o Implementation of the eating disorder program is making progress. A dietician is expected to start work in late May. Currently, 19 therapists have been trained. Two members of the eating disorder workgroup have been traveling to the VCBH Youth & Family clinics to educate line staff on how to diagnose eating disorders. The program will be a 20-week intensive outpatient program. <p>C. MHSA – Hilary Carson</p> <p>Ms. Carson was not in attendance.</p>		
X.	<p>Committee Members' and Participants' Comments, Activities, Updates</p> <p>Jerry Harris introduced Joe S. Ramirez, the newest member of the BHAB. Mr. Ramirez plans to serve on this committee. Mr. Harris invited everyone to attend the BHAB General meeting on May 20th, which will include a public hearing on the MHSA Annual Report.</p>		

<p>Lori Litel noted that the Mental Health Services Oversight and Accountability Commission (MHSOAC) will take a closer look at stakeholder involvement throughout the state.</p> <p>Elizabeth Theis invited all to participate in a webinar on maternal mental health on May 13 or May 31.</p> <p>Scott Abeson noted that Probation is looking for providers who can deliver services that will empower girls who are housed at the Juvenile Facilities.</p> <p>Yanka Ricklefts noted that feedback from parents of students suggests a need for support and respite for caregivers.</p> <p>Carole Shelton noted that Dr. Graff of Tri-Counties Regional Center gave a presentation on autism at a Disability Rights Advocacy meeting in Santa Paula. Other events in May include Autism 101 on May 15, a talk for Supplemental Security Income (SSI) recipients on May 21, and a toddler fair event. Rainbow Connection is now open one Saturday per month in Oxnard and Simi Valley.</p> <p>Joelle Vessels noted Interface’s implementation of a new Neighborhood for Learning (NfL) and the re-establishment of an emergency shelter for youth. Ms. Vessels will provide more information at the next meeting.</p> <p>Laurie Jordan noted that Rainbow Connection is partnering with Public Health on toddler nutrition. She also requested information on local post-partum support groups.</p> <p>Joe S. Ramirez noted that he is eager to participate on this committee.</p> <p>Jamie Banker noted that Cal Lutheran University has received a grant that will provide free counseling to residents impacted by the recent fires.</p> <p>Pam Roach noted that the Youth Safety Plan has been finalized, is being printed. She also noted that she is retiring; the June meeting will be her last meeting.</p> <p>Mr. Harris commended Dr. Acosta and Dr. Shaw for their work with the community. He noted that any BHAB committee can recommend a specific program for funding under MHSA; this is done with a motion from the committee to request that the BHAB support the committee’s request and forward it to the MHSA Manager.</p>		
<p>XI. Items for the Next Meeting Agenda Presentation by Gold Coast Health Plan and Beacon Health Options.</p>		
<p>XII. Adjourn The meeting adjourned at 11:40 a.m.</p>		

**CONSEJO ASESOR DE SALUD AL COMPORTAMIENTO
COMITÉ DE JUVENTUD Y FAMILIA
MINUTOS ■ Miércoles 8 de mayo de 2019**

<p><u>Miembros presentes</u> Gina Petrus , presidenta suplente del comité Jerry Harris, presidente de BHAB Jamie Banker, BHAB Martie Miles, Aspiranet Joelle Vasos, Interfaz Crystal Cummings, niños y familias juntos Scott Abeson, Libertad Condicional Laurie Jordan, Rainbow Connection Carol e Shelton, Rainbow Connection Yanka Ricklefts , SELPA Lori Litel , Padres Unidos Danielle Shaw, MD</p> <p><u>Otros presentes</u> Joe S. Ramírez Jonathan Porto, Séneca Elizabeth Theis , Beacon Opciones de salud Jennifer Claros, Gold Coast Health Plan Julianne Block, Gold Coast Health Plan Maria Calvert, Gold Coast Health Plan Scott Walker, Oficina del Sheriff, Programa del Equipo de Intervención en Crisis (CIT)</p>	<p><u>Gerentes de Salud Conductual del Condado de Ventura (VCBH) / Personal Presente</u> Dina Olivas , Gerente Senior de la División de Juventud y Familia Dra. Lisa Acosta , Directora Médica de la División Y&F Clara Barron, MHSA Esperanza Ortega, MHSA Pam Roach, enlace transformacional Edith Pham, Asistente BHAB</p> <p>SIGUIENTE JUNTA: miércoles 12 de junio de 2019 , 1 0 : 0 0 a.m - 12: 0 0 pm</p> <p>Condado de Ventura de Salud del Comportamiento (VCBH) 1911 Williams Drive , sala de entrenamiento (primer piso) , Oxnard</p>
---	---

Nota: El comité aún no ha aprobado estas actas. Puede haber adiciones / eliminaciones o correcciones antes de que se acepten las actas en su forma final.

	DISCUSIÓN / CONCLUSIONES	RECOMENDACIONES / COMPORTAMIENTO	RESPONSABLE
YO.	Llama para ordenar Silla alternativa Gina Petrus convocó la reunión a las 10:05 am		
II.	Aprobación de la Agenda Sra. Petrus Pidió al Comité que revise y apruebe la agenda de hoy. Joelle Vessels se movió para aprobar, Martie Miles la secundó . La moción fue aprobada por unanimidad.	El orden del día fue aprobado como está escrito . M / S / C	
III.	Aprobación del Acta Sra. P e trus pidió al comité que revise y apruebe las actas de la reunión del 10 de abril de 2019 . Crystal Cummings se movió para aprobar, Lori Litel secundado La moción fue aprobada por unanimidad.	Las actas fueron aprobadas tal como están escritas. M / S / C	
IV.	Bienvenida y Presentaciones Sra. Petrus dio la bienvenida a todos y pidió presentaciones.		
V.	Anuncios de la silla La Sra Petrus señalar que una noche para recordar, una fiesta de graduación para los estudiantes con necesidades especiales, tendrá lugar el 31 ^{de mayo} en el condado de Ventura unds Fairgro. Los interesados en participar como voluntarios en el evento son animados a participar. NAMI Ventura C onza celebrará una Casa Abierta en su nueva ubicación , 555 Airport Way, Suite F, en Camarillo, el 14 de mayo de 3:00 a 6:00 pm Coach Up 2019 se llevará a cabo el 30 de mayo de 6:00 a 8:00 pm en Moorpark. Este es un evento para jóvenes actuales y ex involucrados con la justicia (de 16 a 25 años). Los jóvenes pueden aprender sobre el Consejo Consultivo de Jóvenes sobre la Reforma de la Justicia y sobre cómo los jóvenes pueden desempeñar un papel activo en la reforma local de la justicia juvenil.		
VI.	Comentarios públicos		

	<p>Scott Walker señaló que :</p> <ul style="list-style-type: none"> o La aplicación de la ley y las instalaciones de libertad condicional / juveniles se encuentran en las primeras etapas de las discusiones sobre la mejor manera de tratar con jóvenes con problemas de salud mental; o El Sr. Walker recorrió la Unidad de Estabilización de Crisis para Jóvenes (CSU, por sus siglas en inglés) con varios oficiales de varias agencias de aplicación de la ley ; se les entregaron tarjetas que recordarán a las fuerzas del orden público llevar a los jóvenes en crisis a la CSU; o Los agentes de la Policía de Oxnard Depa rtamento llevaban parches es autismo para Autismo; También venden los parches, que se tradujo en una donación de \$ 15,000 a la Sociedad de Autismo; o Una nueva Academia CIT se llevará a cabo la semana followi n g; La Sra. Petrus asistirá a la sesión sobre "Salud mental de los jóvenes". 		
VII.	<p>Presentación: Programas para jóvenes y familias financiados por la MHSA - Clara Barron La Sra. Barron compartió información de antecedentes sobre la Ley de Servicios de Salud Mental (MHSA). Proporciona fondos para llenar las brechas en los servicios para los que no reciben servicios y para los que no reciben suficientes servicios. La Sra. Barron dio una visión general de los programas que sirven a los jóvenes y las familias. Los componentes actuales son :</p> <ul style="list-style-type: none"> o Prevención e Intervención Temprana (PEI) . Algunas de las prioridades de PEI son la prevención de traumas infantiles y la intervención temprana, y la detección e intervención temprana de psicosis y trastornos del estado de ánimo. o Apoyos y servicios comunitarios (CSS). Algunas áreas de enfoque para CSS son los servicios para los estudiantes con Seriedad emocionalmente perturbada (SED) y la Sociedad de servicio completo (FSP). o Innovación (INN) . P royectos debe aumentar el acceso a los servicios / und grupos erserved o mejorar la calidad de los servicios. <p>La participación de los interesados, incluida la BHAB, es parte del proceso de planificación y evaluación. La Actualización Anual del Plan de 3 Años de la MHSA se publica en el sitio web de la MHSA , y los comentarios del público son bienvenidos .</p> <p>Ver adjunto para más detalles.</p>		
VIII.	<p>Nuevo negocio</p> <p>A. Horario de verano Después de una breve discusión, Laurie Jordan se fue a la oscuridad en julio y Carole Shelton la secundó. La moción fue aprobada por unanimidad.</p>	Ir a oscuras en julio M / S / C	
IX.	<p>Actualizaciones de la División de la Juventud y la Familia de Salud Conductual del Condado de Ventura (VCBH)</p> <p>A. División Juventud y Familia - Dina Olivas</p> <ul style="list-style-type: none"> o VCBH y escuelas en Oxnard están identificando eds ne para los servicios de salud mental en la comunidad y en las escuelas. Se están revisando varias estrategias. o Los servicios a través de los Servicios sociales y emocionales relacionados con la educación (ERSES) continúan proporcionándose en las escuelas. Los servicios de prevención han aumentado. o Logrando Bienestar dará una presentación en la conferencia de suicidio PREVENCIÓN Pacífico Clínicas. o Actualización de la reforma de la continuidad del cuidado: Casa Pacifica y Seneca son actualmente los únicos programas certificados como Programas terapéuticos residenciales a corto plazo (STRTP) en el Condado de Ventura. Otros cinco programas tienen una licencia provisional del estado y tendrán un año para obtener la certificación de VCBH. <p>B. Director Médico de la División de Juventud y Familia - Lisa Acosta, MD</p> <ul style="list-style-type: none"> o El Dr. Acosta asistirá a la conferencia que se realizará del 21 al 22 de mayo, llamada Transición de la Atención para Personas con Adicción. Ella se asegurará de que las necesidades específicas de los adolescentes sean escuchadas. o El Dr. Shaw y el Dr. Acosta están involucrando a los pediatras locales y a los médicos de atención primaria en un diálogo sobre el conocimiento / acceso de los recursos disponibles de salud mental local y la mejora de la comunicación / coordinación de la atención. 		

	<ul style="list-style-type: none"> o La implementación del programa de trastornos alimentarios está progresando. Se espera que un dietista comience a trabajar a fines de mayo. En la actualidad, 19 terapeutas han sido capacitados. Dos miembros del grupo de trabajo sobre trastornos de la alimentación han estado viajando a las clínicas de VCBH para Jóvenes y Familias para educar al personal de la línea sobre cómo diagnosticar los trastornos de la alimentación. El programa será un programa ambulatorio intensivo de 20 semanas. <p>C. MHSa - Hilary Carson La Sra. Carson no estuvo presente.</p>		
X.	<p>Comentarios, actividades, actualizaciones de los miembros y participantes de los comités. Jerry Harris presentó a Joe S. Ramírez, el miembro más nuevo de la BHAB. El señor Ramírez planea servir en este comité. El señor Harris invitó a todos a asistir a la reunión BHAB General el 20 de mayo, que incluirá una audiencia pública sobre el Informe anual de MHSa.</p>		
	<p>Lori Litel señaló que la Comisión de Supervisión y Responsabilidad de los Servicios de Salud Mental (MHSOAC, por sus siglas en inglés) analizará más de cerca la participación de las partes interesadas en todo el estado .</p> <p>Elizabeth Theis invitó a todos a participar en un seminario web sobre salud mental materna el 13 o el 31 de mayo.</p> <p>Scott Abeson señaló que la libertad condicional está buscando proveedores que puedan brindar servicios que capaciten a las niñas que están alojadas en las instalaciones juveniles.</p> <p>Yanka Ricklefs observó que los comentarios de los padres de los estudiantes sugiere la necesidad de apoyo y respiro para los cuidadores.</p> <p>Carole Shelton señaló que la Dra. Graff del Centro Regional de los Tres Condados hizo una presentación sobre el autismo en una reunión de Defensores de los Derechos de los Discapacitados en Santa Paula. Otros eventos en mayo incluyen el autismo 101 el 15 de mayo, una charla para los beneficiarios de Seguridad de Ingreso Suplementario (SSI) El 21 de mayo, y un evento justo niño. Rainbow Connection ahora está abierto un sábado al mes en Oxnard y Simi Valley.</p> <p>Joelle Vessels destacó la implementación por parte de Interface de una nueva Vecindad para el aprendizaje (NfL) y el restablecimiento de un refugio de emergencia para jóvenes . La Sra. Vessels proporcionará más información en la próxima reunión.</p> <p>Laurie Jordan señaló que Rainbow Connection se asocia con Salud Pública en la nutrición del niño. También solicitó información sobre los grupos de apoyo locales después del parto.</p> <p>Joe S. Ramírez señaló que está ansioso por participar en este comité.</p> <p>Jamie Banker señaló que la Universidad Cal Lutheran ha recibido una subvención que brindará asesoramiento gratuito a los residentes afectados por los recientes incendios.</p> <p>Pam Roach señaló que el Plan de Seguridad Juvenil ha sido finalizado y se está imprimiendo . También notó que se está retirando; La reunión de junio será su última reunión.</p> <p>El Sr. Harris felicitó al Dr. Acosta y al Dr. Shaw por su trabajo con la comunidad. Señaló que cualquier comité de BHAB puede recomendar un programa específico para financiamiento bajo MHSa; esto se hace con una moción del comité para solicitar que la BHAB respalde la solicitud del comité y la envíe al Gerente de MHSa.</p>		
X yo.	<p>Artículos para la agenda de la próxima reunión Presentación de Gold Coast Health Plan y Beacon Health Options.</p>		
XI l.	<p>Aplazar La reunión se suspendió a las 11:40 am</p>		

A Night to Remember: A PROM FOR SPECIAL NEEDS STUDENTS



A Night to Remember is a free prom organized by Mission Church honoring students with special needs ages 12-25. Each guest is provided, free of charge, with everything they will need for a truly memorable experience a student host, dress or tuxed, professional makeup and hair styling, a corsage or boutonniere, a ride in a limousine, formal photos, a walk down the red carpet with a cheering paparazzi, a swag bag, and live DJ with dancing, food and fun! Registration is open for both guests AND volunteers, so sign up today!

Space is limited, so **register online** at www.NTRventura.com or by phone at (805) 620-7558, and we will provide you with everything you need for a truly magical night!

DATE -- FRIDAY, May 31st 2019

TIME -- 6:30 - 9:30pm

PLACE -- Ventura County Fairgrounds
10 West Harbor Boulevard,
Ventura, CA 93001

FOLLOW US ON INSTAGRAM @NTRventura

www.NTRventura.com // e-mail: NTR@missionventura.com // church website: www.missionventura.com



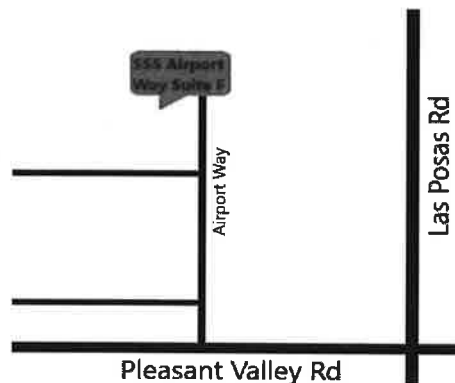
NAMI | Ventura County

YOU'RE INVITED!!



**NAMI VENTURA COUNTY
OPEN HOUSE
ON MAY 14TH, 2019
3:00 PM – 6:00PM**

Our new offices
are located at:
555 Airport Way
Suite F
Camarillo, CA
93010



JOIN US

**TOUR OUR NEW
LOCATION**

**ENJOY
REFRESHMENTS**

**LEARN ABOUT NAMI
PROGRAMS AND
UPCOMING CLASSES**

**MEET BOARD
MEMBERS, STAFF
AND VOLUNTEERS**

**NAMI VENTURA
COUNTY**

NAMIVENTURA.ORG

For more info
call 805-641-2426
or email

info@namiventura.org

YOUTH JUSTICE SYSTEM
101 - JUSTICE REFORM -
YOUTH ADVISORY
COUNCIL

THE KEYS TO
TRANSFORMING
THE YOUTH
JUSTICE
SYSTEM

COACH UP 2019

CALL TO CURRENT AND
FORMER JUSTICE INVOLVED
YOUNG PEOPLE

THURSDAY - MAY 30, 2019

6 PM - 8 PM

RUBEN CASTRO HUMAN SERVICES
CENTER


612 Spring Road Moorpark, Ca

Engaging justice system-involved
youth ages 16 to 25 years old in the
reform work currently happening in
Ventura County.

DINNER WILL BE PROVIDED!

Please RSVP @ <https://forms.gle/QFMu5dSPBqTqBDmS6> or email June Ewart at
ewart2006@gmail.com or call or text June at 805 304-3366

Event hosted by the Ventura County Youth Equity and Success (YES) committee



VENTURA COUNTY
BEHAVIORAL HEALTH
A Department of Ventura County Healthcare Agency


May 8, 2018

MENTAL HEALTH SERVICES ACT (MHSA) OVERVIEW YOUTH & FAMILY BHAB


CLARA E. BARRON

Topics

- ❖ Background
 - Regulations
 - General Requirements
- ❖ Components
 - PEI
 - CSS
- ❖ Reporting
- ❖ Community Involvement
- ❖ Current Needs
- ❖ Closing



VENTURA COUNTY SUB-COMMITTEE ON PREVENTION SERVICES
HELP HOPE
A DEPARTMENT OF VENTURA COUNTY HEALTHCARE AGENCY



VENTURA COUNTY
BEHAVIORAL HEALTH

2

BACKGROUND

California's Historic Effort to
Reduce the Stigma of Mental Illness.

The Mental Health Services Act

VENTURA COUNTY
BEHAVIORAL HEALTH

3

Background

- ❖ More than 2 million children, adults, and seniors are affected by potentially disabling mental illnesses every year in California.
- ❖ Thirty years ago, State cut back on its services in state hospitals for people with severe mental illnesses, without providing adequate funding for mental health services in the community. Many people became homeless.
- ❖ Mental Health Services Act (MHSA) Proposition 63 – Effective Jan 2005
- ❖ Revenue – One percent (1%) tax on personal incomes over \$1M, \$15B generated to date

VENTURA COUNTY
BEHAVIORAL HEALTH

4

Background

- ❖ What it provided:
 - Additional funding for improvement, enhancement and fill gaps
 - Unserved
 - Underserved
 - Target populations (Ethnicity, culture, age groups, specific needs)
- ❖ Allows for tailoring to local mental health needs
- ❖ County Accountability: Periodic Reporting, Evaluation and MHSA Program Review Protocol (Audit)



5

Regulations

- ❖ The Act (November 2004, January 2018)
- ❖ CCR, Title 9, Division 1, Chapter 14, MHSA (Authority & Reference cited WIC Section 5898, Ref.
- ❖ Prevention & Early Intervention (PEI): Latest update effective July 1, 2018
- ❖ Innovation: Latest update effective July 1, 2018



6

General Requirements

❖ Standards/Principles

- Community Collaboration
- Cultural Competence
- Client Driven
- Family Driven
- Wellness, Recovery and Resilience Focused
- Integrated Service Experiences for clients and their families

❖ Formal Community Program Planning Process (Planning, Changes, Evaluation, and Reporting)

❖ 3-Year Program & Expenditure Plan (Annual Updates)

❖ Local Review Process



7

COMPONENTS



8

MHSA Components



Prevention and Early Intervention (PEI)



Community Supports and Services (CSS)



Innovation (INN)



Workforce-Development and Training (WET)- Sunset 6/2018



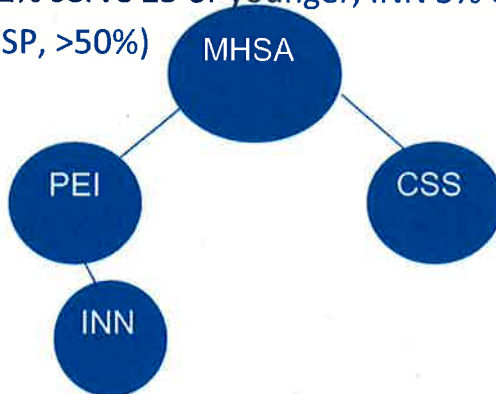
Capital Facilities and Technology (CapFac/IT)- Sunset 6/2018




9

MHSA Components Ventura County

- County MHSA
- PEI 20% (51% serve 25 or younger, INN 5% of PEI)
- CSS 80% (FSP, >50%)




10



Cinco De Mayo –
Project Esperanza

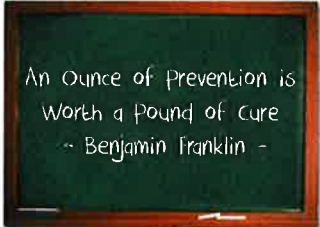
PREVENTION AND EARLY INTERVENTION (PEI)




11

Prevention and Early Intervention (PEI)

- ❖ Nineteen (19) Programs
- ❖ Intent: Implement strategies to prevent mental illness from becoming severe and disabling
- ❖ Emphasis: Improvement in timely access to services for underserved populations.
- ❖ Strategies and activities are implemented early on to:
 - Deter the onset of mental health conditions or relapse among individuals
 - Change community conditions that contribute to risk factors for developing behavioral or mental health issues.



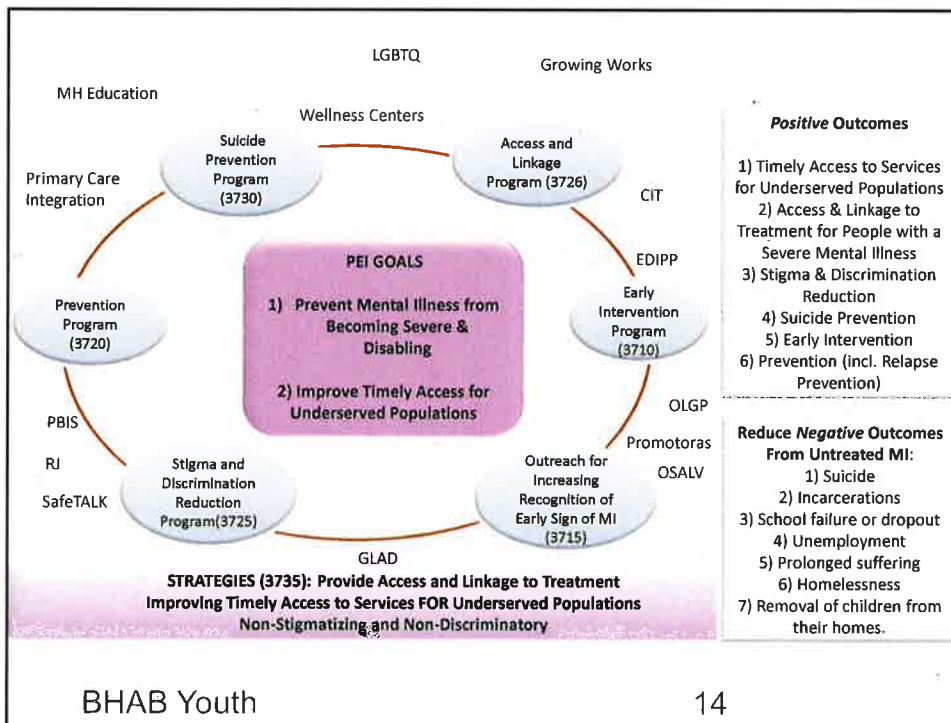
An Ounce of Prevention is
Worth a Pound of Cure
- Benjamin Franklin -



12

Prevention and Early Intervention (PEI)

- ❖ Incorporates values of cultural competence, consumer and community empowerment, collaboration and inclusion in providing services that emphasize recovery, wellness and resiliency.
- ❖ Programs strive to
 - Meet the priority needs identified by local diverse community stakeholders
 - Meet the key community and priority population needs outlined in the MHSA PEI guidelines
 - Continue to transform the public mental health system.



Prevention and Early Intervention (PEI)

- ❖ Universal services are targeted at an entire community not identified on the basis of individual risk;
- ❖ Selective services provide strategies to deter the onset of a mental illness among individuals and change community circumstances that contribute to behavioral health problems;
- ❖ Early Intervention services are directed toward individuals exhibiting early signs of a mental illness or early onset of mental illness or emotional disturbance with psychotic features.
- ❖ Suicide Prevention efforts



15

PEI Regulation Update – SB 1004

- ❖ **What is it?** Requires Mental Health Services Oversight & Accountability Commission to establish priorities, a statewide data collection and monitoring strategy for, and a strategy for technical assistance to support the successful implementation of prevention and early intervention (PEI) funds provided by the MHSA.
- ❖ **Purpose:** Establishes a strategic, statewide focus for how counties utilize funds generated by the MHSA for prevention and intervention in the early stages of mental illness. This bill helps ensure that all children, transition-age youth, and young adults have access to effective, research-based treatment that can stem the progression of a serious brain illness well before it becomes disabling.



16

PEI Regulation Update – SB 1004

- ❖ **Priorities to include, but not limited to:**
 - ***Childhood trauma prevention and early intervention***
 - ***Early psychosis and mood disorder detection and intervention***
 - Outreach and engagement strategies that target transition-age youth, with a priority on partnership with college mental health programs
 - Culturally competent and linguistically appropriate prevention and intervention
 - Other programs the Commission identifies, with stakeholder participation, that are proven effective in achieving, and are reflective of, the goals of PEI programs to prevent mental illnesses from becoming severe and disabling



17

PEI Regulation Update – SB 1004

- ❖ **County impact?** Programs must align with Commission statewide strategy, established metrics from Commission and justify when there is an exception. Increased statewide prescriptive nature, visibility and accountability.
- ❖ **When would it go into effect?** Commission to establish priorities by Jan. 1, 2020

<https://trackbill.com/bill/california-senate-bill-1004-mental-health-services-and-prevention-and-early-intervention/1550256/>



18

PEI Programs – FY 18/19							
PROGRAMS	Prevention ¹	Early Intervention ¹	Outreach for Increasing Recognition of Early Signs of MI ^{1,4}	Access and Linkage To Services for People with a Severe MI ^{1,2}	Stigma Reduction/Discrimination Reduction ^{1,2}	Improve Timely Access To Service for Underserved Populations ^{2,3}	Suicide Prevention ¹
Positive Behavior Intervention & Supports (PBIS): Ventura County Office of Education	PS			x	AKB	x	
Restorative Justice (RJ): Ventura County Office of Education	PS			x	AKB	x	
TAY Wellness Center, Pacific Clinics	PS			x	AKB	x	
Adult Wellness Center, Turning Point Foundation	PS			x	AKB	x	
One Step a La Vez	PS			x	AKB	x	
Our Lady of Guadalupe Project Esperanza	PS			x	AKB	x	
Tri-County GLAD	PS			x	AKB	x	
Rainbow Umbrella	PS			x	AKB	x	
Promotoras MICOP	PS			x	AKB	x	
Promotoras y Promotoras Foundation	PS			x	AKB	x	
Primary Care Program: Clinicas del Camino Real, Inc.		PS		x	AKB	x	
Early Detection and Intervention for the Prevention of Psychosis (EDIPP): Telecare Corporation		PS		x	AKB	x	
COMPASS		PS		x		x	
safeTALK: Ventura County Office of Education			x	x	AKB	x	AKBS
Suicide Prevention			x	x	AKB	x	AKBS
Crisis Intervention Team (CIT): Ventura County Law Enforcement & VCBH Collaborative			x	x	AKB	x	



PEI Programs – FY 17/18 Cost			
	# Served	Total Cost / Program	Avg Cost per Participant/Year
One Step A La Vez	225	\$54,093	\$240
Project Esperanza	187	\$54,093	\$289
Tri-County GLAD	6	\$56,307	\$9,385
Rainbow Umbrella	142	\$48,396	\$341
VIPS - EDIPP	70	\$920,266	\$13,147
Positive Behavior & Intervention Support (PBIS)	1346	\$10,754	\$8
Restorative Justice	54	\$10,754	\$199
safeTALK	700	\$43,015	\$61
Primary Care Integration	430	\$299,063	\$696
Adult Wellness Center	468	\$688,601	\$1,471
TAY Wellness Center	285	\$554,762	\$1,947
Crisis Intervention Team (CIT)	137	\$105,446	\$770
Promotoras Program – MICOP	380	\$61,471	\$162
Promotoras Program – PYPF	209	\$31,511	\$151
MHFA	381	\$23,894	\$63
Wellness Everyday Website (Incl. Social Media Outreach)	N/A	\$105,037	N/A
Totals:	5,020	\$3,067,463	

Approx. 40% of Cost for Y&F PEI Targeted Programs



PEI Programs – FY 18/19, 19/20							
Programs/Categories/Strategies	Prevention ¹	Early Intervention ¹	Outreach for Increasing Recognition of Early Signs of MI ^{1,4}	Access and Linkage To Services for People with a Severe MI ^{1,2}	Stigma Reduction/Discrimination Reduction ^{1,2}	Improve Timely Access To Service for Underserved Populations ^{2,3}	Suicide Prevention ¹
Positive Behavior Intervention & Supports (PBIS): Ventura County Office of Education	PS			X	AKB	X	
Restorative Justice (RJ): Ventura County Office of Education	PS			X	AKB	X	
VCOE							
One Step a La Vez	PS			X	AKB	X	
Our Lady of Guadalupe Project Esperanza	PS			X	AKB	X	
Tri-County GLAD	PS			X	AKB	X	
Diversity Collective (Rainbow Umbrella Group)	PS			X	AKB	X	
Promotoras MICOP	PS			X	AKB	X	
Promotores y Promotoras Foundation (PyPF)	PS			X	AKB	X	
Primary Care Program: Clinicas del Camino Real, Inc.		PS		X	AKB	X	
Early Detection and Intervention for the Prevention of Psychosis (EDIPP)		PS		X	AKB	X	
COMPASS		PS		X	AKB	X	
Familia-a-Familia		PS		X	AKB	X	
Family & Friends		PS		X	AKB	X	
Eating Disorders		PS		X	AKB	X	
Provider Education Program (PEP)			X	X	AKB	X	
Crisis Intervention Team (CIT): Ventura County Law Enforcement & VCBH Collaborative			X	X	AKB	X	
Diversity Collective (RISE Presentations)			X	X	AKB	X	
In Our Own Voice				X	AKB	X	

COMMUNITY SERVICES AND SUPPORTS (CSS)



Community Services and Supports (CSS)

- ❖ 23 Programs Serving, 4 Housing, Transportation, Linguistic Services
 - **Child/Youth/Families (0-15)**
 - **Transitional Age Youth (TAY) (16-25)**
 - Adults (26-59)
 - Older Adults (60+)
- ❖ Previously approved programs and targets:
 - Seriously Emotionally Disturbed (SED) children and youth with difficulty functioning in multiple life domains such as school, home, and/or community.
 - Serious Mental Illness (SMI) as defined by Federal regulations that describe mental disorders that significantly interfere with some area of functioning.



23

Community Services and Supports (CSS)

- ❖ This component has greatly contributed to the ongoing transformation of the public mental health system by:
 - Augmenting existing services.
 - Establishing a system of care for crisis services.
 - Developing programming to address the needs of Transitional Age Youth (TAY).
 - Developing supportive housing and maximizing MHSA funds for housing opportunities.
 - Enhancing and expanding wrap-around services to children.



24

Community Services and Supports (CSS)

- ❖ Funding: Eighty-percent (80%)
- ❖ Provides access to mental health services through our previously approved programs and targets:
- ❖ Seriously Emotionally Disturbed, (SED) (refers to children and youth with difficulty functioning in multiple life domains such as school, home, and/or community).



25

Community Services and Supports (CSS)

- ❖ Outreach and Engagement (O&E) - To reach out to people who may need services but are not getting them. (RISE, VCBH Health Equity and Ethnic Services)
- ❖ General System Development (GSD) - To improve mental health services and supports for people who receive mental health services.
 - Eighteen (18) programs (Crisis Intervention/Stabilization, peer support, treatment, needs assessment, peer services coordination, case management, family/provider education & support)
- ❖ Housing – Includes residential care for elderly, board and cares, TAY transitional housing, permanent



26

Community Services and Supports (CSS)

- ❖ Full Service Partnerships (FSP) –
 - According to CCR, “the collaborative relationship between the County and the client, and when appropriate the client’s family, through which the County plans for and provides the full spectrum of community services so that the client can achieve the identified goals.”
 - Comprehensively address client and family needs and “do whatever it takes” to meet those needs, including intensive services and supports and strong connections to community resources with a focus on resilience and recovery.
 - Over fifty percent of CSS funds (>50%) on annual basis



27

Community Services and Supports (CSS)

- ❖ Full Service Partnerships (FSP) –
 - Eligibility – Children and adolescents per WIC Section 5600.3(a) and Adults and Older adults per subdivision (b). See Handout
 - ISSP-Driven - Necessary services and supports to help clients achieve their mental health and treatment plan goals.
 - Specific State Mandated Data Requirements for 4 Age Groupings (**Child/Youth 0-15**, **TAY 16-25**, Adult 26-59, Older Adult 60+)



28

Community Services and Supports (CSS)

- ❖ Full Service Partnerships (FSP) Forms
 - **Partnership Assessment Form (PAF)** – Completed once upon establishment of partnership
 - **Key Event Tracking (KET)** – Completed when change in key area occurs
 - **Quarterly Assessment (3M)** – Completed every 3 months
- ❖ Full Service Partnerships (FSP) – Forms available for 4 age groups:
 - **Child/Youth (0-15)**
 - **TAY (16-25)**
 - Adults (26-59)
 - Older Adults (60+)



29

Community Services and Supports (CSS)

- ❖ Full Service Partnerships (FSP) – PAF Domain
 - Residential (includes hospitalization & incarceration)
 - Education
 - Employment
 - Sources of Financial Support
 - Legal Issues/Designations
 - Emergency Intervention
 - Health Status
 - Substance Abuse
 - ADL/IADL (Older Adults only)



30

Community Services and Supports (CSS)

- ❖ Full Service Partnerships (FSP) – KET completed when change in the following:
 - Administrative Information
 - Residential (includes hospitalization and incarceration)
 - Education
 - Employment
 - Legal Issues/Designations
 - Emergency Intervention



31

Community Services and Supports (CSS)

- ❖ Full Service Partnerships (FSP) – 3M completed every 3 months to assess changes in the following:
 - Education
 - Sources of Financial Support
 - Legal Issues/Designations
 - Health Status
 - Substance Abuse
 - ADL/IADL – Older Adults Only




32

Community Services and Supports (CSS) – FY 17/18		
Program	Ages Served*	Component – Category-Type
Children & Youth FSP (INSIGHTS)	Up to 18	CSS-FSP-Children & Family
Rapid Integrated Support and Engagement (RISE)	All	CSS-O&E
VCBH Outreach	All	CSS-O&E
County-Wide Crisis Team (CT)	All	CSS-SD-Crisis Intervention/Stabilization
Crisis Stabilization Unit (CSU)	6-17	CSS-SD-Crisis Intervention/Stabilization
COMPASS for Children	12-17	CSS-SD-Crisis Intervention/Stabilization
Screening, Triage, Assessment, and Referral (STAR)	All	CSS-SD-Individual Needs Assessment
Child/Youth Treatment (Non-FSP)	0-17	CSS-SD-Treatment
Fillmore Community Project	0-18	CSS-SD-Treatment
TAY Treatment (Non-FSP)	16-25	CSS-SD-Treatment
Transitional Age Youth (TAY) Outpatient (Transitions)	16-25	CSS-SD-Treatment
Children's Outpatient Services	13-19	CSS-SD-Treatment
The Client Network (CN)	All	CSS-SD-Peer Support
Transformational Liaison (TL)	All	CSS-SD-Peer Service Coord/Case Mgmt
Family Access Support Team (FAST)	All	CSS-SD-Peer Service Coord/Case Mgmt
National Alliance on Mental Illness (NAMI)	All	CSS-SD-Fam, Provider Ed & Supt Services
Transportation	All	CSS-SD-Access Support
Language Services	All	CSS-SD-Access Support

Community Services and Supports (CSS) - FY 17/18			
	# Served ¹	Cost ²	Annual Cost per Participant ³
CSS - Full-Service Partnership (FSP)			
Child/Youth/Family (0-15) ³	35	\$244,236	\$6,978
Transitional Age Youth - TAY (16-25) ⁴	66	\$1,189,552	\$18,024
Adult (26-59) ⁵	220	\$2,900,785	\$13,185
Older Adult (60+)	172	\$2,105,375	\$12,241
FSP Totals⁶	483	\$6,439,947	\$13,333
CSS - Outreach and Engagement (O&E)			
RISE	2,068	\$1,995,254	\$965
Office of Health Equity and Cultural Diversity Outreach Services	7,168	\$108,576	\$15
O&E Totals	9,236	\$2,103,830	\$228
CSS – System Development (SD) – Crisis Intervention and Stabilization			
Crisis Team	2,627	\$2,697,894	\$1,027
Crisis Stabilization Unit (CSU)	401	\$2,911,375	\$7,260
COMPASS	37	\$1,264,596	\$34,178
Crisis Residential Treatment (CRT)	280	\$1,967,172	\$7,026
Crisis Intervention & Stabilization Totals	3,345	\$8,841,037	\$2,643
CSS – SD - Assessment			
Screening, Triage, Assessment and Referral (STAR)	2,144	\$3,207,801	\$1,496
CSS – SD - Treatment (Specialty Services) – Non-FSP			
Child/Youth/Family 0-15	1,711	\$388,455	\$227
Transitional Age Youth - TAY 16-25	267	\$1,238,988	\$4,640
Adult 26-59	3,966	\$17,343,429	\$4,373
Older Adult 60+	591	\$6,114	\$10
Treatment – Non FSP Totals⁴	6,535	\$18,976,986	\$2,904
CSS – SD - Peer Services Coordination & Case Management			
Family Access Support Team (FAST)	465	\$940,551	\$2,023
CSS – SD - Family & Provider Education Services			
NAMI	992	\$118,463	\$119
CSS – SD - Other Access Support Services			
Transportation	3,131	\$163,391	\$52
Language Access Service (Interpreters: Spanish, Mixtec, Deaf or Hard of Hearing)	23,429	\$279,897	\$12
Other Access Support Services Totals	26,560	\$443,288	\$17

INNOVATION



VENTURA COUNTY
BEHAVIORAL HEALTH

35

Innovation

MHSA Legislative Goals

- ❖ Implement and test time-limited, novel, creative, or ingenious mental health approaches that are expected to contribute to learning, transformation, and the integration of the mental health system.
- ❖ Every Innovation project must identify one of the following primary purposes:
 - **Increase access to underserved groups**
 - **Increase the quality of services, including better outcomes**
 - **Increase access to services**
 - **Promote interagency collaboration**



VENTURA COUNTY
BEHAVIORAL HEALTH

36

Current Innovation Projects	Target Age	Years	Purpose
Children's Accelerated Access to Treatment and Services (CAATS)	0-21	2017-2020	To improve access and quality of mental health services through a comprehensive intake process that includes mental health assessments, coordinated interagency services linkages, medication support, and clinical intervention for all youth entering the child welfare system.
Push Technology	6-60	2018-2021	To improve post-discharge outcomes through the employment of mobile ecological momentary interventions (EMI) through automated push technology provided in partnership our local 211 services provider.
Conocimiento: Addressing ACEs through Core Competencies	13-19	Planned 2019-2023	Prevention program aiming to utilize community collaboration to reduce adverse outcomes in adolescents living in poverty or with ACEs by increasing core competencies and building resilience.

Participants	Time Frame	Totals
Total Referrals	Feb-June 2018	128
CANS Assessments	April-June 2018	<ul style="list-style-type: none"> • 59 Intakes • 13 Discharges
Males	Feb-June 2018	56%
Females	Feb-June 2018	44%
Mexican/Mexican American	Feb-June 2018	36%
Other Hispanic/Latino	Feb-June 2018	5%
Mixteco	Feb-June 2018	2%
Not Hispanic	Feb-June 2018	12%
Unknown/Not Reported	Feb-June 2018	32%
Average time from referral to assessment (Goal is 10 days)		7.5 days (49% seen in 5 or fewer days)
Total % of youth in dependency eligible for services		95% (Previously 65%)

REPORTING



Regulations and Expectations

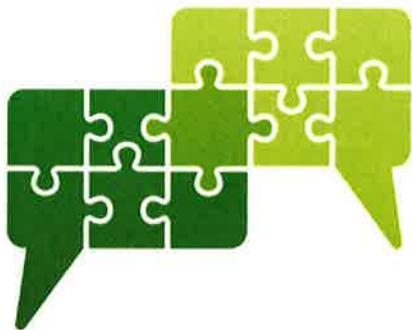
- ◇ Three-Year Program and Expenditure Plan (All components, fiscal, goals, etc)
- ◇ Annual Updates to the Plan
 - Most Current Annual Update to 3-Year Program and Expenditure Plan:
http://www.vchca.org/images/BH/PDF/MHSA/Mental_Health_Services_Act_MHSA_Fiscal_Year_2019-20_Annual_Update.pdf
- ◇ Prescribed Reporting
 - Demographics
 - Goals
 - Challenges, Successes, Lessons Learned, Relevant Examples
 - Data per Program Type and System(s)
 - Evaluation Reports
- ◇ PEI: Annual and 3-Year Evaluations
- ◇ CSS: Prescribed, clinical and program evaluation (against goals)
- ◇ FSP: DHCS Data Collection System

COMMUNITY PARTNERS: PROVIDERS AND STAKEHOLDERS



41

Stakeholders



- ❖ Experts from other agencies, general community members, consumers, and family members, in the decision-making of how resources are utilized.
- ❖ Consumer & Families
- ❖ BHABs
- ❖ BOS

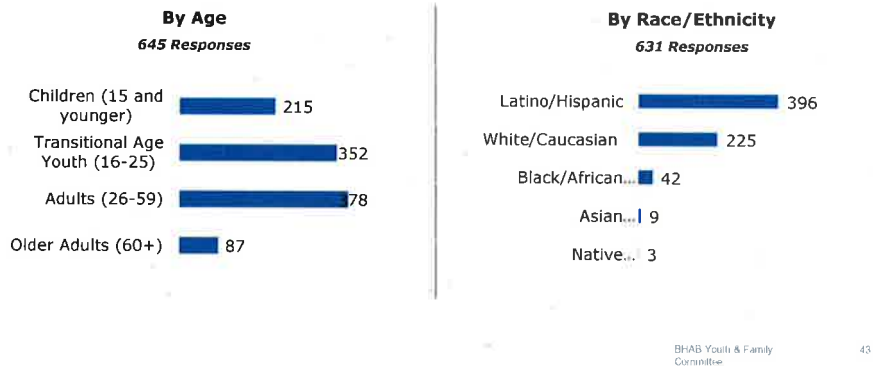


42

Groups in Greatest Need of Mental Health Services

Providers cited **TAY** and **adults 26-59** as the age groups in greatest need of services;

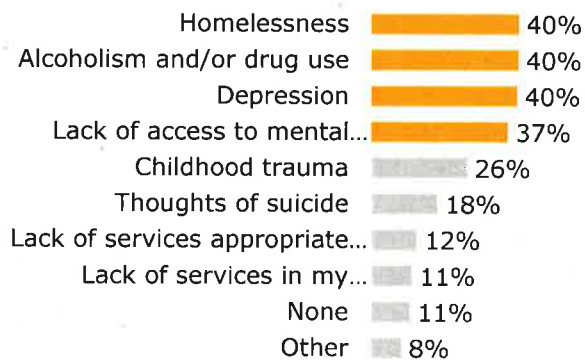
Hispanics/Latinxs were cited as the racial/ethnic group in greatest need



Community Mental Health Needs Rankings

Top 4 Issues:

1. Homelessness
2. Substance Use
3. Depression
4. Access to Services



QUESTIONS?



45



THANK YOU FOR YOUR ATTENTION!





PLEASE JOIN US FOR WEBINAR: MATERNAL MENTAL HEALTH

About the Webinar

This webinar will provide an overview about maternal mental health, including common symptoms, prevalence, as well as a discussion around common screening tools and treatment options.

Learning Objectives

Upon completion of the training, participants should be able to:

- To identify the prevalence and impact of perinatal depression
- To demonstrate knowledge of systems of care to support Maternal Mental Health
- To identify common therapeutic techniques for treatment
- To select appropriate screening tools to identify perinatal depression
- To list pathways to refer members for mental health services

Presenter

Dr. Jessica Langenhan. Jessica Langenhan, MD, MBA, CHCQM is the Medical Director with Beacon Health Options as well as providing patient care through tele-psychiatry services. She serves as an Attending Psychiatrist at the Riverside University Health System Emergency Treatment Services and is an Assistant Clinical Professor at the Department of Psychiatry and Neuroscience at the UC Riverside School of Medicine. She has worked in various other treatment settings in community mental health and private practice, including serving as an Associate Medical Director at the Laguna Treatment Hospital, a residential SUD treatment program, and an Attending Psychiatrist at the Royale Therapeutic Residential Center.

Who Should Attend?

This workshop is designed for all levels of mental health professionals including Social Workers, Licensed Therapists, Psychologists, Nurses, Physicians, Care Coordinators, Navigators, and Peer Support Counselors

Training Date/s: May 13, 2019 and May 31, 2019

Training Time: 11:00 – 12:00 pm PST for both dates

Register to Attend: To RSVP, please register using the appropriate link.

May 13:

<https://beaconhealthoptions.webex.com/beaconhealthoptions/onstage/g.php?MTID=e3db68157e848b5ea316d7dd2092133d8>

May 31:

<https://beaconhealthoptions.webex.com/beaconhealthoptions/onstage/g.php?MTID=e04bb70c5ebda5539933e7927f5436e09>

*****Continuing Education Units of 1 hour will be provided for certain professional levels*****

For information about CE's, please visit the registration links [here](#) (5/13/2019) and [here](#) (5/31/2019)

Any questions? Contact: Elizabeth Patel (Elizabeth.Patel@beaconhealthoptions.com)

There is no deadline to register for either webinar dates.

Attendees will be asked to complete an evaluation to receive a certificate.

continued



Note: It is the participant's responsibility to check with their individual state boards to verify CE requirements for their state.

Additional Information:

Fees: There are no fees for this session.

Special Accommodations or Concerns: Please contact the Talent Management and Learning department at Talent.Management@beaconhealthoptions.com if you need special accommodations or if you have questions or concerns.

Concerns or Complaints: Upon completion of the workshop, if there are any concerns or complaints, please reach out to Talent.Management@beaconhealthoptions.com with the date of attendance, your contact information and a description of your concern or complaint. All concerns/complaints will be forwarded to Irena Djordjevic Behery, Vice President, Talent Management and Learning to follow up within 48 hours of receipt.

Continuing Education:

Continuing Education credit for this program is awarded by Commonwealth Educational Seminars (CES) for the following professions. Please click this link to view covered licenses and states: <https://www.commonwealthseminars.com/seminar-ce-credit.html>

- **Psychologists:** Commonwealth Educational Seminars is approved by the American Psychological Association to sponsor continuing education for psychologists. Commonwealth Educational Seminars maintains responsibility for this program and its content.
- **Licensed Professional Counselors/Licensed Mental Health Counselors:** Commonwealth Educational Seminars (CES) is entitled to award continuing education credit for Licensed Professional Counselors/Licensed Mental Health Counselors. Please visit [CES CE CREDIT](#) to see all states that are covered for LPCs/LMHCs. CES maintains responsibility for this program and its content.
- **Social Workers:** Commonwealth Educational Seminars (CES) is entitled to award continuing education credit for Social Workers. Please visit [CES CE CREDIT](#) to see all states that are covered for Social Workers. CES maintains responsibility for this program and its content.
- **Licensed Marriage & Family Therapists:** Commonwealth Educational Seminars (CES) is entitled to award continuing education credit for Licensed Marriage & Family Therapists. Please visit [CES CE CREDIT](#) to see all states that are covered for LMFTs. CES maintains responsibility for this program and its content.
- **Nurses:** As an American Psychological Association (APA) approved provider, CES programs are accepted by the American Nurses Credentialing Center (ANCC). These courses can be utilized by nurses to renew their certification and will be accepted by the ANCC. Every state Board of Nursing accepts ANCC approved programs except California and Iowa, however CES is also an approved Continuing Education provider by the California Board of Registered Nursing (Provider # CEP15567) which is also accepted by the Iowa Board of Nursing.