

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

MEETING AGENDA

January 14, 2019 – 9:00-10:30 A.M.

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

- I. Welcome and Introductions** (Violeta Mora) **5 minutes**
- II. Approval of Minutes** (Dori Gilbert) **5 minutes**
 - December 10, 2018- Handout
 - Review action items from December 2018 – See meeting minutes (Yael Koenig)
- III. Business Items** (Yael Koenig) **5 minutes**
 - HHS Ten Year Roadmap- Accomplishments Year Two (Handout)
 - Board of Supervisors-January 8, 2019 Minute Order 8:
Addressing the Impacts of the Migrant Shelter Crisis in San Diego County (Handout)
 - Children’s Bereavement Centers in Mission Valley (Handouts)
- IV. Mental Health Services Act (MHSA) Update** (Martin Dare) **10 minutes**
 - Community Engagement Report
 - Human-Centered Design for Innovation (Handout)
 - Annual Update outline
- V. Sectors “Hot Topics”** (Dori Gilbert) **50 minutes**
 - Bi-Annual Sub-Committee Discussion:

January 2019	February 2019
✓ Early Childhood	✓ Cultural Competence Resource Team (CCRT)
✓ Education Advisory	✓ Outcomes
✓ TAY Council	✓ Private
✓ CADRE	
✓ Family and Youth Liaison	
- VI. Announcements** (Violeta Mora) **5 minutes**
 - BHS Director Retirement Celebration- February 11, 2019- Flyer
- VII. Director’s Report** (Alfredo Aguirre) **10 minutes**

Next Executive Committee Conference Call:

Date: Monday, January 28, 2019
Time: 1:00-1:30 P.M.
Location: Via Conference Call

Next Council Meeting:

Date: Monday, February 11, 2019
Time: 9:00-10:30 A.M.
Location: Scottish Rite- Shell Room

Sub-Committees/Sectors/Workgroups Meetings Information:

CCRT: Meets the 1st Friday of the month-6367 Alvarado Court Ste. 105, San Diego, CA 92120 from 10:00 to 11:30 A.M.

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

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

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

Education Advisory Ad Hoc: Meets as needed.

Family and Youth As Partners: Meets the 3rd Thursday of the month at 5095 Murphy Canyon Road - Suite 320, San Diego, CA 92123 from 1:30 to 3:00 P.M.

Family/Youth Sector: Meets quarterly on 4th Thursday of the month at 5095 Murphy Canyon Road - Suite 320, San Diego, CA 92123 from 6:30 to 8:00 P.M.

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

Private Sector: Meets as needed.

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

For Council materials go to:

https://www.sandiegocounty.gov/content/sdc/hhsa/programs/bhs/mental_health_services_children/CYFBHSOCCouncil.html

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

Council Vision:

Wellness for children, youth and families throughout their lifespan.

Council Mission:

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

Council Principles:

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

May 1, 2018

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

MEETING MINUTES

December 10, 2018 – 9:00-10:30 A.M.

East Region Public Health Center – 367 N. Magnolia Ave. #101, El Cajon, CA 92020

+ = Member in Attendance O = Absent E = Excused

CONSTITUENCY	MEMBER	STATUS	ALTERNATE	STATUS	
PUBLIC SECTOR					
1	Behavioral Health Advisory Board (BHAB)	Rebecca Hernandez	O	Bill Stewart	+
2	Behavioral Health Services (BHS)	Dr. Laura Vleugels	+	VACANT	
3	Public Safety Group/ Probation	Dr. Geoff R. Twitchell	O	Chrystal Sweet	O
4	Child Welfare Services (CWS)	Cathi Palatella	O	Alice Kennedy	O
5	HHSA Regions	Dori Gilbert	+	Jennifer Sovay	O
6	Public Health	Dr. Thomas R. Coleman	+	Rhonda Freeman	O
7	Juvenile Court	H. Judge Kimberlee Lagotta	O	Beth Brown	+
8	First 5 Commission	Alethea Arguilez	O	Dulce Cahue-Aguilar	+
EDUCATION SECTOR					
9	Special Education Local Plan Area (SELPA)	Cara Schukoske	+	Jamie Tate - Symons	O
10	Regular Education Pupil Personnel Services	Heather Nemour	+	Mara Madrigal-Weiss	+
11	School Board	Barbara Ryan	E	Sharon Whitehurst-Payne	O
12	Special Education	Aidee Angulo	O	Yuka Sakamoto	+
PRIVATE SECTOR					
13	San Diego Regional Center (SDRC) for Developmentally Disabled	Peggy Webb	+	VACANT	
14	Alcohol and Drug Service Provider Association (ADSPA)	Angela Rowe	+	Marisa Varond	+
15	Mental Health Contractors Association	Delrena Swaggerty	O	Steven Jella	O
16	Mental Health Contractors Association	Michelle Ly	+	Michelle Hogan	O
17	San Diego Nonprofit Association (SDNA)	Margaret Iwanaga Penrose	O	Rosa Ana Lozada	+
18	Fee- For-Service (FFS) Network	Dr. Sherry Casper	O	VACANT	
19	Managed Care Health Plan	George Scolari	+	Kathleen Lang	+
20	Healthcare/ Pediatrician	Dr. Pradeep Gidwani	O	VACANT	

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

CYF Council Staff: Edith Mohler, Grisel Ortega and Darwin Espejo.

I. Welcome and Introductions (Violeta Mora)

- Meeting agenda order changed to start with the Director's report.

II. Director's Report (Alfredo Aguirre)

- National Updates
 - ✓ Recent changes at the Federal Congress level may bring changes to the Affordable Care Act (ACA).
 - ✓ The ACA enrollment is lower than last year.
- State Updates
 - ✓ Last October, the California Behavioral Health Director's Association (CBHDA) presented the following to the Department of Health Care Health Services (DHCS) Care Coordination Advisory Committee:
 - Current County Behavioral Health Services
 - Counties' role in the future of Medi-Cal
 - Strategies for improving care and preparing for the future
 The presentation will be sent to the CYF Council electronic distribution list
 - ✓ CBHDA members will meet with the newly elected Governor's staff to provide an overview on the current California's behavioral health system and system integration recommendations.
- Local Updates
 - ✓ Approximately, 4500 individuals from Honduras are seeking asylum to the United States along the Tijuana, México border. The Federal government is processing approximate 80 asylum applications each day with a 5% success rate
 - Several organizations are providing support services, including but not limited to food, clothing, and shelter to these individuals/families. More information can be found at: <http://rapidresponsesd.org/http://www.rapidresponsesd.org/>
 - County leadership is monitoring the situation and will provide updates as appropriate.
 - ✓ An Industry Day on Alcohol and Drug Use Prevention Strategies will be announced in the near future. Detailed information will be available at: <https://buynet.sdcountry.ca.gov/>

III. Approval of Minutes (Yael Koenig)

- Review of action items from September 9, 2018. See Meeting Minutes.
- September 9, 2018 Meeting Minutes – Approved.

IV. Business Items (Yael Koenig)

- Special Education Contact List-handout
 - ✓ Cara Schukoske of San Diego County Office of Education (SDCOE) provided the Council a listing of contacts for all special education programs within San Diego county.
 - The list will be posted at: https://www.sandiegocounty.gov/content/sdc/hhsa/programs/bhs/mental_health_services_children/CYFBHSOCCouncil.html .
 - Special Education contact list information can also be accessed through the SDCOE website in the San Diego School Districts directory section at: <https://www.sdcoe.net/about-sdcoe/Pages/San-Diego-County-School-Districts.aspx>
- Bylaws vote on adding training access to Council members (Handout)
 - ✓ The motion to add the following language to Article Three-Membership of the Council bylaws was approved:
 - “Current CYFBHSOCC members and alternates shall have access to the trainings provided by the BHS training contractor. To gain access, a written request shall be submitted to Council staff for processing”.
- Stop Firearm Suicide San Diego (Adrienne Yancey) (video and brochures)

This presentation included a video:
https://www.dropbox.com/s/gc9ebvxrolbcxkn/HD_Original_Civilian_StopFirearmSuicideSD_110218_1920x1080.mp4?dl=0

Statistics provided by the County of San Diego Emergency Medical Services (EMS) indicate that:

 - ✓ Suicide is the second leading cause of non-natural death in the County
 - ✓ In 2017 there were 457 deaths by suicide
 - ✓ Firearms have been identified as the leading method of suicide.

The County of San Diego has a vision of zero suicides and implemented a Means Reduction strategy based on the New Hampshire Gun Shop Project by the New Hampshire Firearm Safety Coalition (www.nhfsc.org) and the Harvard’s Means Matter Campaign by the Harvard T.H. Chan School of Public Health to prevent suicide by a firearm: www.StopFirearmSuicideSD.org. This campaign is under the umbrella of It’s Up to Us San Diego: <http://up2sd.org/>, a suicide prevention and mental health awareness campaign

 - ✓ The Stop Firearm Suicide San Diego campaign is aligned with one of the nine strategies (Means reduction) identified in the San Diego County Suicide Prevention Action Plan 2018 Update: <https://up2sd.org/wp-content/uploads/2018/05/Suicide-Prevention-Action-Plan-Update-2018.pdf>
 - ✓ Participants in the Stop Firearm Suicide San Diego project include:
 - County of San Diego Sheriff’s Department
 - American Foundation for Suicide Prevention San Diego
 - County BHS
 - United States Department of Veterans Affairs
 - San Diego County Suicide Prevention Council
 - Legal Council
 - Gun Shop Owners
 - ✓ Campaign phases/components:
 - Gun shops owners/gun owners awareness
 - Completed interviews with gun shop owners and managers. These interviews revealed that more than half had personal experience with suicide loss
 - Completed focus groups with gun owners and their spouses revealed that gun owners strongly believe in their second amendment rights, but they are open to messaging that focuses on keeping someone safe
 - Developed posters and brochures to offer information about suicide prevention as part of firearm safety practices. The majority of gun shop owners and managers agreed to share materials with their customers:
 - <https://up2sd.org/wp-content/uploads/2018/12/Gun-Shop-Poster-CA-SD.pdf>
 - <https://up2sd.org/wp-content/uploads/2018/12/Gun-Shop-Brochure-CA-SD.pdf>

- Clinicians Counseling on Access to Lethal Means (CALM) online training
- Collaboration with different organizations and agencies for Awareness of the Gun Violence Restraining Order (GVRO) law
- ✓ Although this campaign is geared more towards adults, it recognizes that children living in the households with gun owners, tend to know the gun(s) location and how to access it/them
- ✓ The campaign is also collaborating with other organizations and agencies to:
 - Follow protocols to confiscate weapons with gun owners involved in a “15150” situation
 - Successfully disseminate campaign materials in local military installations

V. Mental Health Services Act (MHSA) Update (Adrienne Yancey)

- Community Forums
 - ✓ Data obtained at the forums is being analyzed and will be presented in a report tentatively scheduled for January 2019.
- Cycle 5 Innovation: “Human Centered Design”
 - ✓ The San Diego State University (SDSU) School of Social Work-Social Policy Institute will coordinate the Human Centered Design” to develop innovation projects. This process involves designs through in-depth client feedback during the development process
 - ✓ Innovation Project – Early Psychosis
 The Statewide Early Psychosis Learning Health Care Network Innovation Project intends to assess the effectiveness of California’s early psychosis programs. The University of California Davis (UCD) is organizing the proposed multi-County collaborative for coordinating and sharing outcome results, and seeks to improve interventions for individuals experiencing early psychosis symptoms by identifying best practices.
 - UCD will present the Early Psychosis project for approval on December 17, 2018 to the Mental Health Services Oversight and Accountability Commission (MHSOAC)
 - The “Kickstart” program was originally an Innovation project that was established to provide services to children and youth ages 10 to 25 and their families with emerging symptoms of psychosis. Additional Kickstart program information can be found at: <http://www.kickstartsd.org/>

VI. Sector Hot Topics (Dori Gilbert)

- Presentation on Organized Support Companion in an Emergency Situation (OscER) and OscER Jr. (Valerie Hebert and Linda Ketterer)-handout
 - ✓ OscER (Adults) and OscER Jr. (Child and Adolescent) are free cloud-based phone and computer applications designed to assist clients and their families before, during and after a mental health crisis. Both applications offer:
 - Crisis support (FAQ’s)
 - Community resources
 - Legal Information (patient’s rights)
 - Educational resources
 - Various support tools (relaxing audioescapes)
 - ✓ The County of San Diego Sheriff’s Department and various first responders already use both applications.
 - ✓ These cloud-based applications are available in English and Spanish but will be expanded to six threshold languages.
- Center for Child and Youth Psychiatry (CCYP) Presentation(Eileen Quinn-O’Malley and Betsy Pierce)-handout
 The CCYP was developed as a result of the “Medication Clinic” Innovation plan. This is a countywide program that provides psychotropic medication services through office based clinics and tele-psychiatry. CCYP also benefits children with co-occurring complex physical health conditions
 - ✓ CCYP Authorized Referrals for children and youth up to age 21 that:
 - Completed a treatment episode with a system of care mental health program
 - Are receiving services through the new Innovation Telemental Health program
 - Are receiving services with Substance Use Disorder (SUD) treatment programs
 - For referrals contact CCYP at: CCYPreferrals@newalternatives.org
 - ✓ CCYP Exceptions:
 An exception process was presented at a CYF Program managers meeting and includes but it is not limited to mental health treatment programs without current psychiatrist or with long wait times for psychiatry.

- CCYP does not replace psychiatry services at mental health programs with psychiatry services
- Exceptions will be reviewed by the CYF program monitors prior approval
- Programs needing help recruiting psychiatrists can contact Dr. Laura Vleugels
- ✓ CCYP:
 - Holds monthly community resource fairs that offer healthcare information, videos and books
 - Ability to dispense long-acting injectable psychotropic medications when necessary
 - Provide in-home services or to locations more accessible to the client
 - Capacity for 400 children/youth.

Action Items	Action By	Action Due
1. Send the CBHDA October 2018 presentation to DHCS Care Coordination Advisory Committee to the CYF Council's electronic distribution lists.	<ul style="list-style-type: none"> • CYF Council staff 	<ul style="list-style-type: none"> • Completed via e-mail on December 18, 2018.
2. Update Council on current immigration events.	<ul style="list-style-type: none"> • CYF Council staff • Jewish Family Service (Kate Clark) 	<ul style="list-style-type: none"> • Board of Supervisors-January 8, 2019 Minute Order 8: Addressing the Impacts of the Migrant Shelter Crisis in San Diego County included in the January 14, 2019 meeting packet. • Tentatively for March 11, 2019 Council meeting.
3. Disseminate to the Council: <ul style="list-style-type: none"> • "Stop Firearm Suicide SD" campaign video • Prevent Firearm Suicide brochure and poster. 	<ul style="list-style-type: none"> • Adrienne Yancey/CYF Council staff 	<ul style="list-style-type: none"> • Completed via e-mail on December 18, 2018. • Video link: https://www.dropbox.com/s/gc9ebvxrolbcxkn/HD_Original_Civilian_StopFirearmSuicideSD_110218_1920x1080.mp4?dl=0
4. Provide Suicide in San Diego County 2016 and 2017 PowerPoint by HHS Medical Care Services Division-Emergency Medical Services.	<ul style="list-style-type: none"> • Adrienne Yancey/Violeta Mora/CYF Council staff 	<ul style="list-style-type: none"> • Completed via e-mail on December 18, 2018 (2017) and January 10, 2019 (2016).
5. 2018 San Diego County Suicide Prevention Council Annual Report to the Community (Report Card).	<ul style="list-style-type: none"> • Adrienne Yancey/Violeta Mora/CYF Council staff 	<ul style="list-style-type: none"> • Completed via e-mail on December 18, 2018 and January 10, 2019. • Link: http://www.sdchip.org/wp-content/uploads/2018/09/SPC-Report-Card-2018-Final-8-24-18.pdf
6. Provide Community Health Improvement Partners (CHIP) Report and Resources link.	<ul style="list-style-type: none"> • CYF Council staff/Violeta Mora 	<ul style="list-style-type: none"> • Completed via e-mail on January 10, 2019. • Link: https://www.sdchip.org/initiatives/suicide-prevention-council/reports-resources/

Next CYF Council Meeting: January 14, 2019, 9:00-10:30 A.M. at the Scottish Rite Center

Sub-Committees/Sectors/Workgroups Meetings Information:

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

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

Education Advisory Ad Hoc: Meets As Needed.

TAY Council: Meets the 4th Wednesday of the month 3:00 to 4:30 P.M. – New meeting location TBD.

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

CCRT: Meets 1st Friday of the month at 6367 Alvarado Ct. Ste. 105, San Diego, CA 92120 from 10:00 to 11:30 A.M.

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

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

Private Sector: Ad Hoc/Meets As Needed.

DRAFT

HHSA Ten Year Roadmap Behavioral Health Services

Accomplishments: Year Two

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

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

The table below outlines the **Accomplishments** for the Roadmap in Year Two (Fiscal Year 2017-18) as related to **12 Priorities**. Each **Priority** is guided by a **Ten Year Vision** with clear **Strategies** that outline our efforts to accomplish the Vision. Please see below for BHS accomplishments with a call for behavioral health partner contributions, detailed on page six.

TEN YEAR ROADMAP ACCOMPLISHMENTS: YEAR TWO

Fiscal Year 2017-18

Aging Population

- Vulnerable older adults with serious mental illness receive integrated, geographically accessible, age-appropriate services to address their complex needs.
 - ◆ Support caregivers in their role and prevent the onset or progression of their mental health conditions by educating and connecting them to resources.
 - Performed 465 assessments and evaluations through the Caregivers of Alzheimer’s Disease and other Dementia Clients Support Services program, and served 375 caregivers who reported 96% satisfaction in classroom training
 - ◆ Continue and expand training of geriatric specialist staff to include early identification of cognitive deficits in older adults receiving treatment in mental health programs.
 - Held two geriatric training academies with 32 graduated
 - Held classroom and eLearning training on geriatric behavioral health issues with 194 participants

Care Coordination

- Persons with serious mental health and/or substance use disorders have all needs met in a timely manner through an integrated continuum of care.
 - ◆ Apply whole person-centered principles to intensify and further develop care coordination models that are tailored to the needs and level of care for the individual.
 - Included care coordination and “warm handoff” language in all BHS contracts, including Opioid Treatment Programs under the Drug Medi-cal Organized Delivery System (DMC-ODS), and the BHS provider handbooks
 - Improved post discharge outpatient follow up by more than 50%
 - Incorporated mental health screenings and provided training to providers of Driving Under the Influence (DUI) programs

Priority

- Ten Year Vision
 - ◆ Strategy
 - Year Two Accomplishment

Care Coordination (continued)

- ◆ Promote integration of Whole Person Wellness by advancing relationships with the community including private, public, family, consumer and education partners.
 - Developed MOAs with the seven Health Plans to strengthen care coordination and relationships under DMC-ODS
 - Collaborated with Public Health Services to administer Hepatitis A vaccines for high-risk BHS clients
 - Participated in various community forums to advance the Whole Person Wellness model
 - Promoted information sharing and partnership through the BHS System of Care Councils, with topics impacting San Diego County communities
- ◆ Utilize and broaden the use of various IT systems, including ConnectWellSD and San Diego Health Connect, to promote care coordination and to offer those in need of services innovative platforms including digital solutions.
 - Participated in planning, testing, training and implementation of ConnectWellSD
 - Created a DMC-ODS Project Team that developed both a Substance Use Disorder (SUD) consumer website and a DMC-ODS provider-facing website (landing page), that strategically links providers to various care coordination forms and resources
 - Enhanced the SanWITS application to collect data for the July 2018 rollout of DMC-ODS

Children and Youth Population

- Children and youth are healthy, safe, lawful, successful in school and in their transition to adulthood, while living in nurturing homes with families.
 - ◆ Ensure a full continuum of care through family-centered and youth-informed services that are compassionate and sensitive to the unique developmental needs of children and youth.
 - Designed and secured funding for the Center for Child and Youth Psychiatry which expands the array of services to include a centralized medication clinic supporting children and youth with complex medication needs
 - Expanded countywide telepsychiatry capacity
 - Provided Positive Parenting Seminars and Prevention and Early Intervention services to more than 4,500 children throughout the county
 - ◆ Provide services that empower children and youth to build a healthy sense of self and have confidence to make sound decisions so they thrive in an ever-changing world.
 - Collaborated with Child Welfare Services and Probation to develop a Child Family Team Facilitation service that elevates the family voice and promotes wellbeing
 - Aligned service practices with state requirements to ensure timely access of mental health services for foster youth placed out of their county of jurisdiction
 - Advanced Continuum of Care Reform by facilitating system transformation from Group Homes to Short-Term Residential Therapeutic Programs with a goal of transitioning youth back into a family environment
 - ◆ Strengthen partnerships with children/youth's circle of influence to create a supportive environment.
 - Created the infrastructure and system training to implement a State-mandated outcome measures which will serve as a common language to support children, youth and families identify their areas of need and build on their strengths

Crisis Services

- All persons experiencing a psychiatric emergency have access to timely and appropriate services to ensure their safety and that of the community.
 - ◆ Develop a service model that ensures timely, trauma-informed, culturally-competent crisis intervention services while considering the unique needs across the lifespan.
 - Enhanced BHS services by securing funding to increase Psychiatric Emergency Response Teams (PERT), as well as telepsychiatry treatment programs as an alternative to other outpatient care for both youth and adults who are transitioning out of inpatient care
 - ◆ Utilize community-based, peer-driven and family-informed crisis intervention models to reduce the reliance on law enforcement intervention and emergency department utilization.
 - Supported clients seeking outpatient care and/or community-based services via the NAMI Next Steps program; nearly 50% of those tracked at intake did not need emergency interventions by their 30-day follow-up
 - Established a Memorandum of Understanding between North Region Children, Youth and Families crisis response providers and a hospital which allow program staff to provide services onsite at the hospital, alleviating reliance on law enforcement and emergency departments
 - ◆ Ensure all crisis centers can serve as a point of entry in the full continuum of care.
 - Completed the youth crisis stabilization buildout and expansion project by increasing available beds from 4 to 12 in a central location, resulting in a 32% increase in crisis stabilization service utilization

Priority

- Ten Year Vision
 - ◆ Strategy
 - Year Two Accomplishment

Homeless Population

- All persons with serious mental health and/or substance use disorders who are experiencing homelessness have treatment and housing to support their recovery.
 - ◆ Ensure the appropriate level of care for persons experiencing homelessness and implement an array of housing options that promote community integration.
 - Implemented 335 new treatment slots for homeless persons with serious mental illness (SMI) in support of Project One for All
 - Secured 75 new treatment slots for homeless persons with Substance Use Disorders
 - Secured permanent and/or bridge housing for 365 clients with SMI
 - Implemented the Tenant Peer Support Services (TPSS) program to provide housing navigation and ongoing tenancy-related supportive services for clients receiving treatment through outpatient mental health clinics in the East, South, North Inland and North Coastal Regions
 - Participated in the Youth Homelessness Subcommittee of the Regional Taskforce on the Homeless to form a Youth Homelessness Demonstration Project grant proposal, which was subsequently awarded to San Diego to assess and address local needs
 - ◆ Work in partnership with housing authorities and developers to acquire permanent supportive housing.
 - Acquired permanent supportive housing, provided housing vouchers and increased permanent housing stock for clients enrolled in Full Service Partnership / Assertive Community Treatment (FSP/ACT), Strengths-Based Case Management and outpatient mental health programs, specifically:
 - Housing and Community Development Services (HCDS) housing vouchers were provided to 25 homeless BHS clients
 - An additional 320 housing vouchers from San Diego Housing Commission (SDHC) and HCDS were distributed to FSP/ACT programs throughout the county working with homeless clients
 - 25 additional housing units were created at the Mission Cove and New Palace Hotel developments
 - ◆ Reduce stigma through education, as well as incentivize and collaborate with landlords to increase housing inventory.
 - Worked with HCDS to educate and incentivize landlords to secure permanent supportive housing for formerly homeless BHS clients with HCDS housing vouchers
 - Utilized resources through SDHC's Landlord Engagement and Assistance Program (LEAP) for clients with SDHC vouchers
 - Hosted a special training for over 200 attendees on "Understanding the Unique Needs of Children Youth and Families Experiencing Homelessness"

Justice-Involved Population

- Persons with serious mental illness or substance use disorders who are justice-involved have access to integrated treatment and supportive services to increase public safety and reduce recidivism.
 - ◆ Increase access and connectivity between the justice system and behavioral health to ensure clients are receiving the appropriate level of care.
 - Augmented two existing outpatient SUD programs and initiated a new contract resulting in service to 55 additional clients to begin July 1, 2018
 - Provided unfunded collaborative support for approximately 25 defendants on the Behavioral Health Oversight Treatment (BHOT) calendar to address problems presented by offenders with mental illness
 - Advanced the Stepping Up Initiative to develop a justice-focused ACT program and mapping process within DMC-ODS to maximize positive outcomes and reduce anticipated implementation problems
 - Collaborated with justice partners to enhance care coordination by developing and procuring a new program supporting youth involved in the Juvenile Justice System to begin July 1, 2018
 - ◆ Deliver best practice services demonstrated to improve wellness and reduce recidivism for justice-involved individuals, including those transitioning from custody to the community.
 - Participated in Probation's Corrections Program Checklist reviews and trained/certified two new Behavioral Health Program Coordinators
 - Produced and promoted the Justice-Involved Services Training Academy
 - Continued to work with the Sheriff's Department to design the PROGRESS program - a residential program serving individuals with moderate mental illness and co-occurring diagnoses transitioning out of custody into the community
 - Initiated the Health and Justice Integration Committee to anticipate and address concerns associated with DMC-ODS implementation
 - Expanded Project In-Reach, the East Region Successful Treatment and Re-Entry Pilot, and Faith-Based bridging programs to offer in-custody engagement and bridging services to individuals with serious mental illness

Priority

- Ten Year Vision
 - ◆ Strategy
 - Year Two Accomplishment

Justice-Involved Population (continued)

- ◆ Evaluate impact and pursue process improvement using standard data and definitions to improve outcomes and support recovery.
 - In preparation for Drug Medi-Cal implementation, multiple SUD treatment providers attended American Society of Addiction Medicine (ASAM) and Medication Assisted Treatment (MAT) trainings to better serve clients involved in the justice system

Long-Term Care

- Persons receiving treatment for serious mental illness in long-term care settings successfully reintegrate into the community.
 - ◆ Support recovery in the least restrictive level of care.
 - Added 22 more beds at skilled nursing facilities (SNF) across four different locations
 - Extended the contract at Vista Knoll SNF for 27 neurobehavioral health beds
 - Initiated discussions with CalMHSA regarding utilizing a facility in Paso Robles for 20 LPS beds and an additional 10 to serve as an alternative to State Hospital beds
 - ◆ Strengthen existing transitional step-down care to maximize the individual's reintegration into the community.
 - Added seven transitional residential beds and issued a Request for Proposal for an additional 16
 - ◆ Evaluate and develop preventative treatment and housing strategies to minimize the need for long-term care.
 - Developed treatment and housing strategies to minimize Long Term Care (LTC) by implementing a three-year LTC Expansion Plan focusing on resource development and issuing a Request for Information to receive provider input related to minimizing the need for acute care

Organized Delivery System for Substance Use Disorders

- An integrated, whole person system of care that utilizes best practices based on an individual's specific needs and within the appropriate level of care to promote successful recovery.
 - ◆ Support those on the recovery journey by implementing best practices to increase access, ensure treatment effectiveness and improve outcomes.
 - Developed educational materials to support providers in implementing best practices on a new DMC-ODS website
 - Developed and implemented training and system expectations around evidence-based practices, including motivational interviewing, MAT and ASAM training
 - Developed an SUD consumer-facing website
 - Established written guidance for Recovery Residences to improve access to housing for those in treatment
 - Expanded the BHS SUD provider handbook and Substance Use Disorder Uniform Record Manual to include whole person assessment, person-centered treatment planning, evidence-based practices, and warm-handoff process to assist clients moving through the continuum of care based on their unique needs
 - ◆ Promote a culture of acceptance for persons needing services.
 - Amended the statements of work for SUD providers to include recovery-oriented language
 - Conducted multiple DMC-ODS presentations and monthly SUD Provider meetings to promote Medication Assisted Treatment and reinforce trauma-informed, person-centered and recovery-oriented principles
 - Developed a written policy of acceptance of all clients
 - ◆ Advocate for federal legislative change to allow for appropriate, timely sharing of vital health information to optimize quality care.
 - Incorporated federal regulations related to sharing of health information into the BHS SUD provider handbook and delivered provider training to mitigate information sharing barriers

Prevention

- All persons are connected within their community and empowered to take action before there is a need.
 - ◆ Pursue policy and community change to ensure all persons live in an environment free of substance use harm.
 - Promoted prevention and environments free of substance use harm by releasing the 2017 Meth Strike Force (MSF) and Prescription Drug Abuse Task Force (PDATF) Report Cards and provided stakeholder education on opioid and methamphetamine use within the County
 - ◆ Champion efforts to train individuals to be able to recognize and support fellow community members impacted by mental health and/or substance use issues.
 - Coordinated the "Active Minds Send Silence Packing" exhibit to educate college students, staff and faculty on suicide prevention
 - Sponsored the annual May is Mental Health Awareness Month campaign and resource fair
 - Contracted with NAMI's Family Adult Peer Support program to establish services in 39 hospital and psychiatric treatment locations, provided the In Your Own Voice presentations to 1,485 people, and served over 3,300 family members and friends

Priority

- Ten Year Vision
 - ◆ Strategy
 - Year Two Accomplishment

Prevention (continued)

- ◆ Foster communities free of stigma in which persons affected by mental health and/or substance use issues are able and willing to seek services.
 - Provided Mental Health First Aid trainings to over 5,000 individuals and the two-day “It Takes a Village” training on gang prevention
 - Served over 2,700 clients and provided depression screenings to 740 individuals through the Positive Solutions program, achieving an 83% reported reduction in symptoms of depression

Suicide Prevention

- There are zero suicides in San Diego County.
 - ◆ Foster an ongoing expectation of organizations to implement zero suicide strategies.
 - Through the San Diego Youth Services HERE Now program, presented Signs of Suicide Curriculum to over 32,000 students who learned about the warning signs and support strategies for dealing with depression
 - Over 4,800 students participated in an individual assessment for suicidal ideation and other safety concerns; over 500 of those students received a referral for additional services
 - ◆ Advance goals consistent with the recommendations from the San Diego County Zero Suicide Strategic Plan.
 - Updated the Suicide Prevention Plan and trained over 5,000 community members to enhance awareness of the warning signs of suicide and mental health crises and available resources
 - Organized the County Suicide Prevention Forum which provided training on suicide prevention, building resiliency, clinical interviewing and improving medication adherence
 - Initiated the utilization of the Columbia Suicide Severity Rating Scale in the BHS SUD system of care
 - ◆ Leverage innovative methods to measure the impact of prevention and intervention strategies.
 - Longer term strategy

Unservd and Underserved Populations

- Diverse unserved and underserved communities are aware, empowered and able to access services appropriate to their unique needs.
 - ◆ Recognize the impact of social determinants of health, disproportionality and health disparities to align prevention and systems of care strategies.
 - Incorporated Adverse Childhood Experiences (ACEs) and Trauma-Informed language requirements into all SUD prevention contracts
 - Participated in health fairs for East African Communities and other activities to address service gaps
 - Ensured SUD treatment contracts include Trauma-Informed language requirements
 - ◆ Foster an inclusive, accepting and culturally-competent environment that celebrates diversity.
 - Provided outreach to hard-to-reach populations and updated the Cultural Competence Handbook to reflect community input and changes in existing tools
 - Reduced language barriers through the adoption of Farsi as another threshold language, as well as translated key survey findings into Spanish
 - Embraced Culturally and Linguistically Appropriate Services (CLAS) standards set forth by the State’s Cultural Competency Quality Improvement Strategic Plan by adopting two of the Plan’s assessment tools
 - Facilitated outreach and needs assessments to enhance services in the East African and Refugee communities, including special focus on youth
 - Provided outreach and needed services to support LGBTQ community through the “Our Safe Place” program
 - Coordinated and participated in the HHS Cross-Border Health Committee at the October Bi-National Health Symposium in Tijuana
 - ◆ Offer culturally relevant and accessible services to address the needs of diverse populations.
 - Opened the iCare program and participated in the development of the RISE Court for commercially sexually exploited youth
 - Procured a countywide program to provide cultural and language-specific outpatient services for Asian Pacific Islanders, Latino Youth, and LGBTQ youth
 - Served over 1,100 seniors, including 216 senior refugees/asylees
 - Ensured all BHS staff completed annual cultural competency training

Priority

- Ten Year Vision
 - ◆ Strategy
 - Year Two Accomplishment

Workforce

- Our system of care has a skilled, adaptive and diverse workforce that meets the needs of those we serve.
 - ◆ Advocate for policies and processes that establish innovative recruitment, hiring and retention of a skilled and diverse workforce.
 - Worked with the San Diego Workforce Partnership to develop and implement strategies to improve hiring and retention of Transition Age Youth (TAY) clients as well as recruitment of individuals with a serious mental illness
 - In collaboration with Southern Counties Regional Partnership, developed a recruitment video that highlights working in the public behavioral health system
 - Provided training to BHS staff and providers focused on cultural competency and trauma informed care
 - ◆ Pursue team based care and innovative workforce solutions to increase access, improve outcomes and increase efficiency.
 - Developed an implementation plan for the Supported Employment-Individual Placement and Support Model
 - Expanded the number of psychiatry residents exposed to the public mental health system, increased the number of hours each resident is placed at community sites, and included a Nurse Practitioner component
 - ◆ Develop a career ladder for assisting individuals with lived experience in competitive employment as well as designated peer positions.
 - Conducted a Peer Support Specialist Focus Groups to obtain feedback on program effectiveness
 - Offered a countywide recovery-oriented Peer Specialist and Peer Employment Training for TAY, adults and older adults
 - Offered a Public Mental Health Certification program (with 36 graduates to date) which provides academic and career counseling, mentorship and field placement assistance

Priority

- Ten Year Vision
 - ◆ Strategy
 - Year Two Accomplishment

Call for Partner Accomplishments

Deadline to Contribute: Friday, February 15, 2019

Audacious visions can only be achieved through the collective activities of our behavioral health partners. HHSB/BHS is opening up contributions to the Roadmap through Friday, February 15, 2019.

Please keep the following in mind:

1. Report accomplishments that occurred from July 1, 2017 through June 30, 2018, as this Year Two document encompasses Fiscal Year 2017-18 only.
2. Be sure to match your accomplishment with the appropriate strategy listed in the Roadmap.

Once partner accomplishments are received, they will be added to this document and finalized in March 2019. If you have questions, please email Traci Finch at Behavioral Health Services (traci.finch@sdcounty.ca.gov).

Complete details of the Ten Year Roadmap, including an archive of prior years, can be found on the Network of Care: www.sandiego.networkofcare.org/mh (click on **HHSB/BHS Ten Year Roadmap**).

**COUNTY OF SAN DIEGO
BOARD OF SUPERVISORS
TUESDAY, JANUARY 08, 2019**

MINUTE ORDER NO. 8

SUBJECT: ADDRESSING THE IMPACTS OF THE MIGRANT SHELTER CRISIS IN SAN DIEGO COUNTY (DISTRICTS: ALL)

OVERVIEW

The U.S. - Mexico border has seen a surge in Central American migrants seeking asylum from humanitarian abuse, often stemming from gang recruitment and violence from countries with some of the highest murder rates in the world. A majority of these asylum seekers are families, many who have traveled long distances with small children.

Due to this significant increase, the U.S. Immigration and Customs Enforcement (ICE) agency has seen a backlog in the number of applicants they are able to process. To make room for additional asylum seekers, ICE has been releasing asylum seeking families who have permission to stay in the U.S. legally as they await the outcome of their applications.

The San Diego Rapid Response Network (SDRRN), comprised of more than two-dozen non-profit organizations, has established a temporary shelter to ensure families have access to food, medical care, legal services and assistance with travel arrangements to their final destination. The average local stay for migrant families is twenty-four to forty-eight hours. SDRRN is trying to coordinate with ICE to drop off these families at the temporary shelter every day; however, the current shelter has at times been over capacity, creating an urgent need to identify additional locations for the State or an applicable entity to continue providing temporary shelter. If adequate shelter space is not identified swiftly, migrant families may have no choice but to seek accommodations at homeless shelters or on our streets. This would put an undue burden on already stressed homeless providers.

To date, the County of San Diego Health and Human Services Agency (HHSA) has provided vaccines for this migrant population, surveillance, monitoring, training and other support for shelter staff to address public health concerns. Daily, HHSA is providing County nurses and contracted health professionals to assist in health assessments, and social workers to assist in health assessments, translation, and linkage to local resources. In addition, the Department of Environmental Health has provided on-site assessments at shelters to ensure food safety. However, these efforts have no federal or State funding and, coupled with unclear roles and guidelines, makes it challenging for all parties to successfully maintain support over a prolonged period of time. These are federal and State issues, and as such should come with federal and State resources. However, to-date resources are lacking. As an example, on December 18, 2018, the California Office of Emergency Services (Cal OES) sent a letter to the County and impacted cities denying use of their National City armory to assist in the sheltering needs.

Today's action will allow the Chief Administrative Officer to continue efforts to pursue armories or other State properties with the Governor's Office for immediate assistance in sheltering this population. In addition, to ensure better coordination amongst different government agencies and local jurisdictions we ask for the formation of a regional working group made up of federal, State, County and local regional stakeholders to address both short and long-term solutions for the migrant crisis in San Diego County. Today's actions also allow the Chief Administrative Officer to identify County property for a temporary shelter; which the State, or an applicable entity could use to shelter asylum-seeking families

during this crisis period. Lastly, we also seek to work with our federal and State delegations on legislative policy that would allow the County to provide on-going services to asylum seeking families and receive reimbursement during this crisis.

RECOMMENDATION(S)

SUPERVISOR GREG COX AND SUPERVISOR NATHAN FLETCHER

1. Direct the Chief Administrative Officer to continue to pursue armories or other State properties with the Governor’s Office for assistance in sheltering this population.
2. Appoint Supervisor Cox and Supervisor Fletcher to a Board of Supervisors sub-committee to establish a regional working group made up of federal, State, County and local regional stakeholders to address both short-term and long-term solutions for the migrant crisis in San Diego County.
3. Direct the Chief Administrative Officer to identify County property for a potential temporary shelter that the State or applicable entity could use to shelter asylum seeking families.
4. Direct the Chief Administrative Officer to work with federal and State delegations on legislative policy, including funding resources, that would allow the County to provide on-going services to asylum seeking families and receive reimbursement, since immigration regulations are not under local authority.

FISCAL IMPACT

There is no fiscal impact associated with today’s actions. There will be no change in net General Fund costs and no additional staff years. However, in the absence of federal and State funding, the County is currently using existing General Purpose Revenue to proactively address health and safety concerns in order to protect the San Diego community.

BUSINESS IMPACT STATEMENT

N/A

ACTION 8.1:

ON MOTION of Supervisor Cox, Seconded by Supervisor Gaspar, the Board of Supervisors directed the Chief Administrative Officer to continue to pursue armories or other State properties with the Governor’s Office for assistance in sheltering this population.

AYES: Cox, Jacob, Gaspar, Fletcher, Desmond

ACTION 8.2:

ON MOTION of Supervisor Cox, Seconded by Supervisor Fletcher, the Board of Supervisors appointed Supervisor Cox and Supervisor Fletcher to a Board of Supervisors sub committee to establish a regional working group made up of federal, State, County and local regional stakeholders to address both short term and long term solutions for the migrant crisis in San Diego County; and directed the Chief Administrative Officer to establish the following conditions:

- The sub-committee is to be established for 180 days.
- The sub-committee is to report actions and recommendations to the Board of Supervisors within 90 days.
- Should the sub-committee fail to report substantive actions and recommendations to the Board of Supervisors within 90 days, it shall cease to exist.
- The sub-committee shall produce meeting minutes which shall include attendees.

AYES: Cox, Jacob, Gaspar, Fletcher, Desmond

ACTION 8.3:

ON MOTION of Supervisor Cox, Seconded by Supervisor Fletcher, the Board of Supervisors directed the Chief Administrative Officer to identify County property for a potential temporary shelter that the State or applicable entity could use to shelter asylum seeking families and directed the Chief Administrative Officer to look at all potential opportunities and to bring back any identified properties or recommendations to the Board for action.

AYES: Cox, Fletcher, Desmond

NOES: Jacob, Gaspar

ACTION 8.4:

ON MOTION of Supervisor Cox, Seconded by Supervisor Fletcher, the Board of Supervisors Directed the Chief Administrative Officer to work with federal and State delegations on legislative policy, including funding resources, that would allow the County to provide on going health services to asylum seeking families and receive reimbursement, since immigration regulations are not under local authority; directed the Chief Administrative Officer to seek federal and state funding for those non-profits that are providing the services currently; and directed the Chief Administrative Officer to return to the Board if there are any other additional costs that the county would incur.

AYES: Cox, Jacob, Gaspar, Fletcher, Desmond

State of California)
County of San Diego) §

I hereby certify that the foregoing is a full, true and correct copy of the Original entered in the Minutes of the Board of Supervisors.

DAVID HALL
Clerk of the Board of Supervisors



Signed
by Marvice Mazyck, Chief Deputy



No child should grieve alone.

Caring for community members is a key element of our mission at The Elizabeth Hospice. Highly trained, compassionate professionals and volunteers in our Children’s Bereavement Program support children through their grief and loss. Services are *free of charge* and *open to everyone* in San Diego County and Southwest Riverside.



Children’s Grief Support Groups

Bimonthly, 90-minute, evening sessions

Concurrent parent/guardian groups

Ages 3 to 17



Camp Erin® San Diego

Grief-related activities

Traditional camp fun

Ages 6 to 17



School-Based Grief Support Groups

8-week, onsite program

17 school districts

Preschool to Grade 12



Community Grief Education & Support

Crisis intervention for students and faculty

Grief and loss training for professionals

Speaking engagements

For information on these and our other grief support services, please contact us.



ESCONDIDO

930 Canterbury Place
Escondido, CA 92025
Melissa Lunardini
melissa.lunardini@ehospice.org
760.796.3705

The Elizabeth Hospice

elizabethhospice.org
800.797.2050

MISSION VALLEY

8989 Rio San Diego, Suite 190
San Diego, CA 92108
Samira Moosavi
samira.moosavi@ehospice.org
760.737.2050 x3393

You are invited
to tour



The latest addition to



The Elizabeth Hospice

Children's Bereavement Centers in Mission Valley

Open to all children and families in the
community grieving the death of a loved one

Be among the first to see our new innovative child-focused
space in Mission Valley where children, ages 3 to 17 years,
can rediscover hope for the future and find joy in cherished
memories.

Special Preview

Thursday, Jan. 31, 5:30 to 7:30 pm
8989 Rio San Diego Dr., Suite 190
San Diego 92108

Please RSVP by Jan. 22

<http://bit.ly/ehopenhouse>

760-796-3722

RSVP by January 22

<http://bit.ly/ehopenhouse>



BEHEALTH.TODAY
Creating Ideas to Impact Behavioral Health

Learn. Work. Develop. Present.

BeHealth.Today is a human-centered design process from the County of San Diego Health and Human Services Agency created to generate innovative proposals for behavioral health.

- A Learning Event to Understand the Process
- A Workshop to Generate New Ideas
- Plan to Develop a Proposal
- A Presentation to Potential Funders

Register at <https://behealth.today>.

Developed by [SDSU Social Policy Institute](#), [Community Health Improvement Partners](#) (CHIP) and [The Idea Guy](#)™, BeHealth.Today provides the opportunity for people with lived experience, family members and community groups to generate new approaches and uses of technology in behavioral health. To learn about BeHealth.Today, attend a Learning Event, a one-hour overview, advance workshop registration and networking with like-minded people.

- [Register for 1/15/2019](#) | 3:00-4:00pm Jacobs Center for Neighborhood Innovation, 404 Euclid Ave, San Diego, CA 92114.
- [Register for 2/13/2019](#) | 3:00-4:00pm Chula Vista Public Library, Civic Branch, 365 F Street, Chula Vista, CA 91910.
- [Register for 3/6/2019](#) | 3:00-4:00pm North Inland Live Well Center, Rooms A, B, C & D, 649 W Mission Avenue, Escondido, CA 92025.

Questions? Just Ask.

BeHealth.Today is committed to including everyone in our community. If you have any questions, just ask via email info@BeHealth.Today. If you need any help, just call 1.619.594.2243.

BEHEALTH FAQS

The Most Frequently Asked Questions

How do I register for events?

- Register online at <http://behealth.today/register>

What email can I use to ask questions?

- Send emails to info@behealth.today

Can I call someone on the phone?

- You can call **1.619.594.2243** to speak with us.

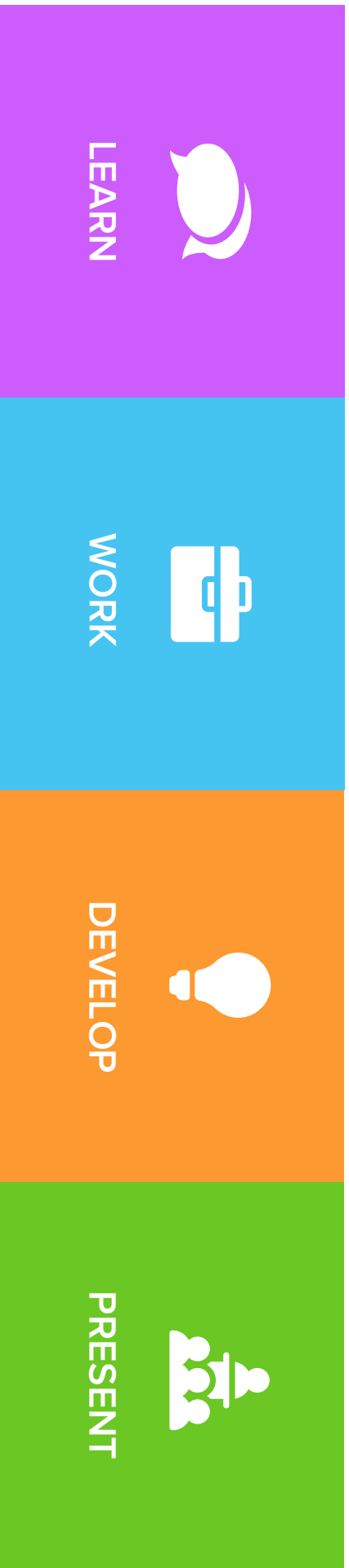
Can my idea be about anything?

- This program encourages ideas that impact behavioral health in San Diego County.



BEHEALTH.TODAY

Creating Ideas to Impact Behavioral Health



ABOUT BEHEALTH

A Program to Impact Behavioral Health

BeHealth.Today is a human-centered design process from County of San Diego Health and Human Services Agency created to generate innovative proposals.

- A Learning Event to Understand the Process
- A Workshop to Generate Concepts
- A Plan to Develop an Idea
- A Presentation to Funding Opportunities

BeHealth provides the opportunity for people with lived experience, family members and community groups to generate new approaches including prototypes, presentations and potential funding for your ideas.

ABOUT US

The People Behind the Program

BeHealth.Today has been developed by experts in the field of innovation and social issues.

- San Diego State University Social Policy Institute
- Community Health Improvement Partners (CHIP)
- The Idea Guy™

Together, we provide the education, experience and process to develop ideas to impact behavioral health.

HOW TO ENGAGE

A Step-By-Step Guide to Participate

To learn about the program, attend a **Learning Event.**, a one-hour overview of the program, advance registration and networking with like-minded people.

You can register for the learning event in advance, or walk in the day of the event. There is no cost to attend.

To generate a new idea that solves an behavioral health problem, attend the **Workshop**, a four-hour event designed to generate new ideas, a project plan and next steps for you, your colleagues or group.

You must register for the workshop in advance. There is no cost to participate.

To create your solution, you, your colleagues or group will work on your project plan, **develop ideas**, prototypes and do testing to identify potential impact.

You can request a consultant to coach your project development. There is no cost for consultants.

Attend **Presentations** to share your proposal. Workshop attendees will have an opportunity present their idea to potential funders for consideration. There is no cost to participate or attend.

Learn more at <http://behealth.today/program>.

**Sub-Committee Update Report to CYFBHSOC Council
January 14, 2019**

Sub-committee: ECMH

Lead: Autumn Weidman - autumnw@jfssd.org, Aisha Pope – apope@centerforchildren.org

Update

- Joined with the ECMH Leaders Collaborative to meet with representative from MHSA and get information on MHSA funds currently supporting ECMH and ways to promote ECMH for funding, innovations projects, and insure consideration at community forums
- Annual We Can't Wait Conference occurred in September and planning committee is working on this year's conference
- ECMH representation on ad-hoc committee for 2019 CYFSOC Conference

FY 18/19 Goals/Focus Area

1) PROMOTE AND EDUCATE

Provide information to improved systemwide understanding of early childhood mental health and integrate throughout the system of care.

2) ADVOCATE

Prioritize service/program areas for a united voice to have a "ready to go position" for funding opportunities.

3) PROMOTE SYSTEM CHANGE

Improve and promote system efforts by increased understanding of services currently available.

- Promote the importance of early childhood throughout the life span and advocate for additional funding
- Ensure inclusion of early childhood topics in trainings, conferences, presentations (BHETA, MHSA, CYFSOC)
- Strengthen our work by beginning to collaborate with other early childhood groups (ie: CalAIMH, ECMH Leaders Collaborative, Child Parent Psychotherapy Leaders, First 5, San Diego Trauma Informed Guide Team)
- Focus on strategies to address specific gaps:
 - Mental health and other support services in preschools to reduce expulsions and advance equity
 - Advocate for additional staff training and Early Childhood Endorsement

Sub-Committee has 4 sector representation

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


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

To join the sub-committee please contact Aisha Pope apope@centerforchildren.org or Autumn Weidman autumnw@ifssd.org

Committee meets on the 2nd Monday of the month from 11-12pm
SDCC FFAST office
8825 Aero Drive Suite 110
San Diego, CA 92123
858.633.4115

CYFBH-SOC
Early Childhood Committee

Purpose And Goals




1) EDUCATE
Provide information to improve and integrate understanding of early childhood mental health throughout the system of care.

2) ADVOCATE
Prioritize service areas for a united voice that is "ready to go" for funding opportunities.

3) PROMOTE CHANGE
Improve and promote system efforts to increase understanding of services currently available.

Advancing The Work



- Promote the importance of early childhood throughout the life span and advocate for additional funding
- Ensure inclusion of early childhood topics in trainings, conferences, presentations (BHETA, MHSA, CYFSOC)
- Strengthen our work by collaborating with other early childhood groups (ie: CalAIMH, ECMH Leaders Collaborative, Child Parent Psychotherapy Leaders, First 5, San Diego Trauma Informed Guide Team)
- Focus on strategies to address specific gaps:
 - Mental health and other support services in preschools to reduce expulsions and advance equity
 - Advocate for additional staff training and support for Early Childhood Endorsement

Why Invest In Early Childhood



Alignment With The 10 Year Road Map



Building positive relationships and experiences in early childhood is one of most effective preventative ways to achieve the goals of the 10 Year Road Map.

Children and Youth Population

1. Children and youth are **healthy, safe, lawful, successful** in school and in their transition to adulthood, while living in nurturing homes with families.
2. Ensure a **full continuum of care** through family-centered and youth-informed services that are compassionate and sensitive to the unique developmental needs of children and youth.
3. Provide services that empower children and youth to build a **healthy sense of self** and have confidence to make sound decisions so they thrive in an ever-changing world.
4. Strengthen partnerships with children/youth's circle of influence to **create a supportive environment**.

Engaged, Supported, Connected.



**Sub-Committee Update Report to CYFBHSOC Council
January 14, 2019**

Sub-committee: Education Advisory
Lead: Heather Nemour

Update

- To support districts in meeting the requirements of AB2246, SDCOE will be hosting a second one-day workshop on “Assessing Suicidal Students” in March 2019 for school and/or district teams that are the designated staff for suicide intervention
- A CYFBHSOCC presentation on SchoolLink was conducted by SDUSD in September 2018
- A CYFBHSOCC presentation on Project Cal-Well was provided in September 2018.
- SDCOE and HHSA, LIVE WELL San Diego hosted SDCOE’s Annual Summit on Student Engagement and Attendance in October 2018.
- SDCOE continues to conduct trainings and provide TA for the 42 school districts on mental health & well-being, positive school climate, suicide prevention, intervention and postvention.
- SDCOE developed a Youth Anxiety training in response to the growing requests and is now offered to all 42 districts
- SDCOE disseminated the suicide prevention resource guide to the 42 school districts.
- SDCOE participated in the Ninth District PTA’s Suicide Prevention Symposium in October 2018.
- Starting January, 2019, SDCOE will be chairing the Suicide Prevention Council’s Education Sub-Committee
- Education Sub-Committee will continue to meet at as needed.

FY 18/19 Goals/Focus Area

- A CYFBHSOCC presentation on SchoolLink will be conducted by SDUSD in September 2018
- A CYFBHSOCC presentation on Project Cal-Well will be conducted in September 2018.
- SDCOE will be hosting a one-day workshop on “Assessing Suicidal Students” by Dr. Lisa Boesky in September 2018 for educators that are the assigned suicide intervention staff at the school site. This meets the requirements of AB2246.
- SDCOE and HHSA, LIVE WELL San Diego will be co-hosting SDCOE’s Annual Summit on Student Engagement and Attendance in October 2018.
- SDCOE will continue to conduct trainings for the 42 school districts on mental health & well-being, suicide prevention, intervention and postvention.
- SDCOE will disseminate the suicide prevention resource guide to the 42 school districts.
- Education Sub-Committee will continue to meet at as needed.

Sub-Committee has 4 sector representation

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

Private Sector

- Public Sector
- Education Sector
- Family/Youth Sector

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

Sub-Committee meets- Ad-Hoc as needed

**TAY Council Update Report to CYFBHSOC Council
January 14, 2019**

Transition Age Youth (TAY) Council
CYF Lead: Michael Miller

Update

- TAY Employment report has been submitted to BHS executive team for consideration.

FY18/19 Goals/Focus Areas

- Completion of TAY Employment Subcommittee recommendation report to the Council.
- Three priority focus areas and subcommittees for 2018-2019 identified as:
 - TAY experiencing homelessness (current subcommittee).
 - TAY Transitioning - Bridging the gap for youth between CYF and AOA systems of care and/or transitioning to mild/moderate care through the managed health care plans.
 - LGBTQI TAY (underserved populations).

TAY Council has 4 sector representation

TAY Council currently has seat vacancies for:

- Foster Youth
- Law Enforcement
- Primary Health Care
- Refugee and Immigrant Populations
- San Diego Regional Center for the Developmentally Disabled
- Underserved Communities/CCRT
- Open Seat

TAY Council meetings:

National University 9388 Lightwave Ave. San Diego, CA 92123 Rm. 118
Held quarterly on the 4th Wednesday of the month from 3:00 to 4:30 P.M.
Next meeting: January 23, 2019

The TAY Council Subcommittee meets from 1:30 to 3pm at the same location.

To apply for a TAY Council seat please contact Cecily Thornton-Stearns at
Cecily.Thornton-Stearns@sdcounty.ca.gov

**Sub-Committee Update Report to CYFBHSOC Council
January 14, 2019**

Sub-committee: Change Agents Developing Recovery Excellence (CADRE)

Lead: Shannon Jackson, Julie McPherson, and Marisa Varond

Update

CADRE (Shannon Jackson)

- CADRE XIX training series will begin on February 5th. This train the trainer series will assist program in achieving co-occurring cable or enhanced status. With approval from the CADRE executive team, several Legal Entities are working to develop their own internal CADRE training series, including Telecare, Mental Health Systems, and McAlister.

CADRE CYF Subcommittee (Julie McPherson & Marisa Varond)

- Hosted San Diego County Marijuana Initiative for a presentation on trends for the leading drug of choice among San Diego youth.
- Invited BHS CYF COR to present on the Drug Medi-Cal Organized Delivery System (DMC-ODS) and discussed new services, referral pathways, eligibility criteria, and system gaps. Also included a robust discussion of activities to improve care coordination and facilitate greater access to services.

CADRE Tobacco Subcommittee

- The CADRE Tobacco Subcommittee recently completed their objective of developing a Tobacco Cessation Toolkit. This toolkit is available on the CADRE website, www.cadresandiego.org. The subcommittee will no longer be meeting and the goal of supporting programs and reducing smoking will be supported at the CADRE Quarterly meetings.

FY18/19 Goals/Focus Areas

- Support implementation of the Drug Medi-Cal Organized Delivery System (DMC-ODS) at the provider level to maximize new services like case management and to ensure seamless transitions in care
- Enhance care coordination between SUD and Mental Health programs:
 - Ensure collaboration is part of discharge planning
 - Continue to build relationships and connections between providers
 - Schedule tours of each other's program
 - Develop a contact card for program-to-program communication
- Provide ongoing in-service presentations to leverage and learn more about resources for youth and their families

Sub-Committee has 4 Sector Representation

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

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

To join the CADRE sub-committee please contact Shannon Jackson at Shannon.Jackson@sdcounty.ca.gov

Sub-Committee meets quarterly the 2nd Thursday of July, October, January and April from 1:30 – 3:00pm at NAMI San Diego (5095 Murphy Canyon Road, Suite 320, San Diego, CA 92123)

**Bi-Annual Sub-Committee Update Report to CYFBHSOC Council
January 14, 2019**

Sub-committee: CYF Liaison

Lead: Renee Cookson

Update

FY18/19 Goals/Focus Areas-

- Continued outreach for sector representation (i.e. education)
 - Public, Private, Family and Education Sector has been filled.
 - Mother/Daughter participation on sub-committee as well as on the CSOC Council (Family Sector), representation from Education and Legal Aid representation for the “Issue Resolution” perspective.
- Continued discussions on Hot Topics to bring education, resources and awareness to FYPs
 - Hot Topics included: Drug smuggling across border targeting High School Youth
 - Sex Trafficking still widespread throughout San Diego County
 - Opioid/Xanax counterfeit drugs-dosage unpredictable because it is counterfeit.
 - Immigration/Border concerns
 - Talk regarding “Illicit Drug” drop off center for family/caregivers who find illicit drugs in their homes. Came from the discussion of “prescription” drop off dates and locations.
- Continued observation of Senate Bill 906 to ensure lived experience and curriculum is relevant to peer support partner
 - Quarterly meeting held to gather authentic voice for SB10 (previously known as SB906). Adult and CYF involved (Edith Mohler and Linda Ketterer attend).
- FYP retreat/conference/symposium proposed
 - NAMI SD CYFL will host a Y/FSP celebration in March during our monthly Y/FSP Coaching Meeting
- Continued outreach for TAY community
 - NAMI SD CYFL hosting TAY Troop in North County (Oceanside Live Well Center), National City in collaboration with ARTS (A Reason To Survive) program.
 - Ending The Silence Presentations are being scheduled in a variety of Schools in order to engage TAY population and provide Mental Health support.
- May Children’s Mental Health Awareness event
 - Committee meetings started in January 2019
 - Representation from San Diego Youth Services, Family Sector, San Diego Center for Children, and TAY Representation on committee

- Location: ARTS Program (National City)
- Supplemental Grant received to help offset cost. SanaMente/Each Mind Matters mini grant, part of grant states, “a focused activity to be done in May focusing on the Latino Population’s Mental Health and Suicide Prevention”. Includes 1000 pieces of Mental Health Swag in Spanish.
- SAMHSA Theme will be “Suicide Prevention”, tag line to follow. (National Children’s Mental Health Awareness Day will be week of May 6-10)

FY18/19 Goals/Focus Areas

- Continued outreach for sector representation
- Continued discussions on Hot Topics to bring education, resources and awareness to Y/FSPs
- Continued observation of Senate Bill 10 to ensure lived experience and curriculum is relevant to peer support partner
- FYP retreat/conference/symposium proposed
- Continued outreach for TAY community
- May Children’s Mental Health Awareness event

Sub-Committee has 4 sector representation

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

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

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

Family and Youth As Partners:

Sub-Committee meets the 3rd Thursday of each month from 1:30 to 3:00 P.M. at NAMI San Diego, 5095 Murphy Canyon Rd, Ste. 320, San Diego, CA 92123

Family and Youth Sector:

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



LIVE WELL
SAN DIEGO

BHS DIRECTOR ALFREDO AGUIRRE IS RETIRING!

System of Care Council's (CYF, Housing, Adult, Older Adult and TAY) participants will be honoring Alfredo Aguirre, the BHS Director as he retires in March 2019.

February 11, 2019, 10-11A.M.

Scottish Rite- Shell Room

1895 Camino Del Rio South, San Diego, CA 92108

Please join us for pastries and coffee

(The CYF Council will adjourn @ 10AM and Adult Council will begin at their regular scheduled time of 11A.M.)

***No RSVP is needed for Council participants