### Sutter-Yuba Behavioral Health Behavioral Health Advisory Board Regular Meeting and Public Hearing MHSA Public Hearing

Thursday, January 12, 2023 5:00 p.m.

#### 1. Call to Order

Chair Clarkson called the meeting to order at 5:11 p.m. and welcomed everyone to the meeting.

#### 2. Roll Call

The following members were in attendance: Chair Lesley Clarkson, Supervisor Don Blaser, Heather Esemann and Manny Cardoza.

The following members were excused: Secretary Mary Page, Vice Chair Jay Kaze, Renick House, Meagan Andersen and Maggie Walker.

The following members were absent: Supervisor Mat Conant and Tom McWhorter.

Also, in attendance: Rick Bingham, Assistant Director of Health & Human Services and Local Behavioral Health Director; Betsy Gowan, Adult Services Branch Director; Phillip Hernandez, SYBH Program Manager, Sarah Eberhardt-Rios, HHS Director; Amy Bryer, SYBH Staff Analyst; Jesse Hallford, SYBH Staff Analyst; Darrin Whittaker, SYBH Program Manager; John Floe, SYBH Program Manager; Rodolfo Rodriguez, SYBH Prevention Services Coordinator; John Nicoletti, Diane Jaeger, David Read, Myra Tahir, Jo Miller, Mike G., and Sue Hopper, Executive Secretary.

#### **Public Comment:**

Mr. David Read spoke regarding the Yuba Sutter Arts Council.

Adjourn to Public Hearing - 5:14 p.m.

- 3. Mental Health Services Act FY 22/23 Annual Update, Appendix Item L PEI Plans for FY 18/19, 19/20, and 20/21 Betsy Gowan, Adult Services Branch Director provided an overview of the Mental Health Services Act Annual Update.
  - ➤ Please see attached Executive Summary and PowerPoint Presentation

Close Public Hearing/Reconvene Board Meeting - 6:20 p.m.

#### 4. Action Items:

a. Approve the SYBH MHSA FY 22/23 Annual Update to add Appendix Item L (PEI Plans for FY 18/19, 19/20 and 20/21) – this item will be reviewed/approved at the February 9, 2023, Behavioral Health Advisory meeting due to a lack of a quorum.

- b. Approve November 10, 2022, Meeting Minutes this item will be reviewed/approved at the February 9, 2023, Behavioral Health Advisory meeting due to a lack of a quorum.
- c. Review and Approve Site Visit Form will be reviewed/approved at the February 9, 2023, meeting. Clarification was provided on the forms. One form will be provided to the program before a BHAB site visit; and the other form will be used by the BHAB during the site visit.
- d. Approve to enact Emergency Allowances during the COVID-19 Pandemic to allow the Sutter-Yuba Behavioral Health Advisory Board to meet via Video or Teleconference this item will be reviewed/approved at the February 9, 2023, Behavioral Health Advisory meeting due to a lack of a quorum.
- e. MHSA Steering Committee Attendees Committee meets monthly on the third Tuesday from 3:00 p.m. 4:00 p.m. Members may attend virtually or in-person.

#### 5. SUDS Program Update - Phillip Hernandez, Program Manager

- Tuesday, January 24, 2023, at 5:30 p.m. the Opioid Community Response Team is offering "Taco Tuesday" at Adventist Health Rideout Conference Center. The team will be distributing Narcan and providing training on how to use Narcan.
- The First Steps Perinatal and Options for Change Co-Ed programs are close to full capacity. Most likely due to the WellPath Community Care Clinic closing down at the end of December. Both programs are being monitored.
- 6. **Behavioral Health Director's Report** Rick Bingham, HHS Assistant Director and Local Mental Health Director reported on the following:
  - Announced Betsy Gowan as the new Adult Services Branch Director.
  - Announced Phillip Hernandez as the new Deputy Branch Director of Adult Services. Mr. Hernandez will continue to oversee the Substance Use Disorder Services program until a replacement is secured.
  - > SYBH Medical Director Dr. Singh will be interviewing on the Punjabi Radio channel along with Supervisor Bains.
  - > Sutter County Supervisor Micheli recently toured SYBH.

#### 7. New Business:

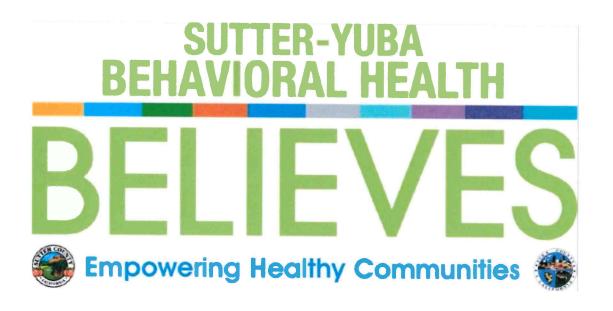
- ➤ Discussion on the BHAB Site Visit Form next program available to utilize this form would be Adult Urgent Services. Ms. Clarkson suggested that site visit rotation be added to the agenda for February.
- 8. Old Business: None addressed.

#### 9. Other Announcements/Correspondence

a. CALBH/C Announcements and Upcoming Trainings – informational only.

#### 10. Adjournment:

There being no further business brought forward Chair Clarkson thanked everyone for their participation and adjourned the meeting at 6:36 p.m.



## SUTTER-YUBA BEHAVIORAL HEALTH

**Mental Health Services Act (MHSA)** 

# Executive Summary FY 22/23-Annual Update

Scheduled for 30-day Public Review and Comment:

December 13, 2022, to January 12, 2023 Public Hearing- January 12, 2022

#### **EXECUTIVE SUMMARY**

This summary provides the background and strategies Sutter-Yuba Behavioral Health (SYBH) employed to develop the FY 22/23 Annual Update. In addition, it identifies how the values, learnings and stakeholder input informed the update for this plan.

The MHSA Team consists of the Adult Services Branch Director and the Children's Branch Director as most MHSA programs are operated within these two branches. Rounding out the MHSA team is the Adult Services Deputy Branch director, who is also the county MHSA Coordinator, two Staff Analysts assigned to the Children's and Adult's Services branches, the Community Services Program Manager, and the Prevention Early Intervention Services Coordinator.

The MHSA team developed a timeline to ensure timely completion of each phase and activity related to the plan (See attached MHSA Timeline in Appendices). The MHSA Team also engaged the MHSA Steering Committee that was founded with the FY 17/20 Three-Year Program and Expenditure Plan. The MHSA team met with the MHSA Steering Committee for multiple sessions to review the previous Three-Year Program and Expenditure Plan as well as the FY 20/21 Annual Update to obtain feedback for future updates and provide comments on current programs.

Following review of all the relevant MHSA regulations and prior plans, the MHSA Team asked for feedback from the Branch Directors and Program Managers over each of their respective MHSA programs. All managers were sent a draft and asked to complete, review, and update the information with their supervisors and staff, identifying goals, targets, sources of data collection, and opportunities for improvement. The draft was also used to identify requests for expansion and new initiatives. The MHSA team has implemented monthly program development meetings with the full management team comprised of the Behavioral Health Director, Branch Directors, and Program Managers to look at the MHSA services, including background and data on each MHSA component, to receive budget updates and aid in prioritizing services for expansion as well as updates on any new initiatives introduced during this reporting period and in previous plans.

The MHSA team hosted three stakeholder forums or focus groups, one of which was conducted in Hmong and English and one conducted in Spanish and English. MHSA Stakeholder Forum participants were advised on current SYBH MHSA programs, planning and development, the Mental Health Services Act and Community Program Planning Process. Flyers publicizing the MHSA stakeholder forums were posted at the location of each forum. Flyers were also shared at existing mental health services support groups and meetings. Informational emails were sent to the staff at each location and verbally communicated to their partners and consumers. The MHSA stakeholder forums are listed as follows:

- Tuesday, August 23, 2022, 10:30-11:30 AM hosted by the Hmong Outreach Community Center
- Tuesday, August 23, 2022, 4:00-5:00 PM hosted by the Latino Outreach Center during the Latino Outreach Center regularly scheduled weekly group meeting.
- Wednesday, August 24, 2022, 3:00-4:00 PM hosted at the Public Health Auditorium and via ZOOM

SYBH held CPPP meetings virtually in February of 2022, for the FY 20/21 Annual Update. Our participation and attendance rate were the highest we have seen in years. Due to the necessity of a FY 22/23 Annual Update, additional CPPP meetings were scheduled within 6 months of the completion of the FY 20/21 Annual Update. While these CPPP meetings were not as highly attended, there was a much more robust discussion that was able to take place. These in person meetings allowed for a round table feel and allowed the conversation to flow. SYBH had 46 stakeholders in attendance of which 18 completed stakeholder forum surveys. According to surveys completed, 70.59 % of attendees who completed the stakeholder forum survey resided in Yuba County and 23.53% resided in Sutter County. 5.88% of respondents resided in neighboring counties, however, work with Sutter-Yuba Behavioral Health in some capacity.

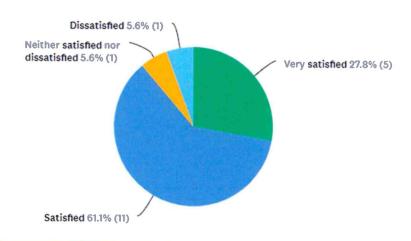
Survey participants also reflected a broad range of ethnic and cultural backgrounds with 22.2 % of participants identifying as White or Caucasian, 5.56.% identifying as black or African American, 66.67% identifying as Asian, South Asian, or Pacific Islander, and another 5.56% identified as other with no specification. According to 2020 US Census Bureau data, 75.5% of Sutter and Yuba Counties' population identified as White or Caucasian. However, according to stakeholder surveys completed, 22.22% of attendees identified as White or Caucasian. Although there was lower representation from the White or Caucasian population at the focus groups for the FY 22/23 Annual Update, SYBH met its goal of representation from the unserved, underserved, and inappropriately served populations. For example, there was significant representation of Asian populations. Compared to the 2020 US Census Bureau data for Sutter and Yuba Counties, 12.7% is Asian, South Asian, or Pacific Islander. However, among the Asian participants 12 out of 13, or 92.3% identified as Hmong leaving .07% as other Asian. The Sutter and Yuba Counties communities reports a large South Asian population indicating a disparity in the representation of South Asian participants.

### Satisfaction with Mental Health Services and with MHSA Update

When asked whether stakeholders were satisfied with mental health services in Sutter and Yuba Counties, a total of 88.89% of stakeholders who completed feedback forms indicated they were satisfied or very satisfied. On the other hand, 5.56% of stakeholders were unsatisfied or very unsatisfied with mental health services in Sutter and Yuba Counties and 5.56% were neutral.

How satisfied are you with Mental Health services in Sutter and Yuba counties?

Answered: 18 Skipped: 0



When asked for their opinions of aspects of the MHSA Annual Update they saw as most valuable and important, common themes that the community valued and thought were of the most importance was having services that are easily accessible, having help with system navigation, and having increased education regarding behavioral health issues.

## **COMMUNITY SERVICES AND SUPPORTS (CSS)**

Overall, the MHSA has a goal to develop and implement an integrated service model for clients and families with a focus on unserved, underserved and inappropriately served populations. CSS programs provide a wide array of client and family driven mental health services that focus on community collaboration, cultural competence, wellness, recovery, and resilience. MHSA CSS services include Full-Service Partnerships (FSPs) which must be offered for all MHSA defined age groups. CSS also includes General System Development (GSD), which addresses developing a system which works together to meet the needs of clients and families.

### Early Childhood and Children's Full-Service Partnership (FSP) Services

The children and youth Full-Service Partnership (FSP) programs provides a wide array of services to keep children, youth, and their families healthy, safe, and successful in school and in their transition into adulthood, while living in a home and community that supports recovery

and wellness. The programs assist children and youth in accessing behavioral support services such as: assessments, individual, group and family therapy, medication support services, and case management assistance (which includes, but is not limited to assistance with transportation, obtaining housing, basic needs, concrete supports, care coordination, and linkage to community resources).

#### **Number Served:**

• FY 21/22, SYBH served 119 unduplicated children in the 0-15 age group.

#### **Challenges & Successes**

Due to the COVID-19 pandemic, the Early Childhood and Children's FSP programs faced some challenges in managing the safety need of staff and clients while providing specialty mental health services.

Despite the safety restrictions associated with the COVID-19 pandemic, the Early Childhood and Children's FSP programs were able to implement and utilize telehealth services to meet the treatment needs of clients, including medication support services.

#### Changes to 2021-2024 Three-Year Program and Expenditure Plan

There are no significant changes to the Early Childhood and Children's Full-Service Partnership Services.

## Transitional-Aged Youth Full-Service Partnership

#### **Number Served:**

In FY 21/22, the TAY FSP Program served 40 unduplicated youth.

#### **Challenges & Successes**

In FY 21/22, the TAY FSP program had 9 clients graduate from the program. The TAY FSP program has also been able to improve processes increasing efficiency in accessing flex funding which has helped in the provision of services and supports for TAY FSP clients.

#### Changes to 2021-2024 Three-Year Program and Expenditure Plan:

SYBH will be assessing challenges to identify if policy changes need to be made to improve services and review transportation issues to see if there are anyways to decrease the challenges of transportation. If there is need and resources for program changes, SYBH will report any changes that may occur in the next Annual Update.

#### **Children and Youth General Services Development**

#### **Youth Urgent Services**

The Youth Urgent Services program provides expedited access to outpatient behavioral health services for youth who have utilized Psychiatric Emergency Services (PES) and those being released from a psychiatric hospital. Youth Urgent Services are designed to stabilize clients and

triage to the necessary level of care for ongoing treatment services. It provides behavioral health assessments, psychotherapy, medication support and referrals services for children and youth between zero and twenty years of age. The Youth Urgent Services team will refer clients to ongoing behavioral health services or stabilize the youth and family to discharge. Staff members conduct weekly reviews with a multidisciplinary team to ensure every child who visits PES or is hospitalized has been offered expedited and adequate care. Youth Urgent Services are available by referral only from PES or psychiatric hospitals.

#### **Numbers Served:**

In FY 21/22 50 unduplicated children and youth were served.

#### **Challenges Faced:**

In FY 20/21, Youth Urgent Services has seen an increase in symptom acuity resulting in more hospitalizations. It is unknown, though likely that this is a result of the COVID 19 pandemic. This has resulted in more referrals from hospitalization compared to referrals from PES where staff attempt to stabilize youth first to prevent hospitalization.

#### Successes:

Due to the COVID-19 pandemic, the Youth Urgent Services team successfully implemented and utilized telehealth to provide necessary services. As offices began to reopen, the Youth Urgent Services team have now successfully transitioned back to face-to-face services. Telehealth is now offered as a mode of service when clinically appropriate

#### Changes to 2021-2024 Three-Year Program and Expenditure Plan:

SYBH will be reviewing the Youth Urgent Services Program to identify ways to increase access and to see how to decrease referrals from hospitalization and increase the number of youths they are able to stabilize to remain in their homes before hospitalization. SYBH will report any changes that may occur to address these needs in the next Annual Update.

#### Adult and Older Adult Full-Service Partnerships (FSP)

FSP services include intensive case management and rehabilitation services to adults with serious mental health conditions or co-occurring mental health and substance use disorders. Participants FSP services receive intensive support towards recovery goals and are encouraged to fully participate in Wellness and Recovery Center services. The goal of this program is to help participants reach and maintain stability, participate fully in community life, decrease isolation, increase independence, and support a sense of belonging. Services are provided based upon participants individual wellness and recovery goals. Staff are available to clients on a 24/7 basis.

## Healthy Options for Promoting Empowerment (HOPE) Adult Full-Service Partnership Numbers Served:

• In FY 21/22, HOPE served 43clients.

#### SUPPORT HOPE INDEPENDENCE NEW EMPOWERMENT(SHINE)

During FY 21/22 SYBH developed a contract with Telecare to implement an Adult/Older FSP to serve 30 clients.

#### Numbers Served: In FY 21/22, SHINE served 23 clients. Challenges and Successes

The COVID-19 pandemic brought on several challenges in including limited ability to see clients in-person and social distancing requirements. However, the HOPE team was able to continue to see clients and remain open during this time. Staffing shortages in SYBH were another challenge faced by this program

The staff are proud that they successfully, kept services going during the pandemic. Additionally, developing the contract with Telecare for the new SHINE FSP is considered a success and it will expand SYBH's capacity to provide FSP services for adults and older adults.

#### Changes to 2021-2024 Three-Year Program and Expenditure Plan:

SYBH will be reviewing both Adult FSP programs to identify gaps in services and changes that may be made to the 2021-2024 Three-Year Program and Expenditure Plan. At this point it appears that significant changes will not be made. SYBH will report any changes to the 2021-2024 Three-Year Program and Expenditure Plan that may occur to address these needs in the next Annual Update.

#### Adult General Services Development

The Urgent Services Team provides timely access to behavioral health services to those who have moderate to severe behavioral health conditions who are in psychiatric distress. A goal of the Urgent Services team is to provide treatment to clients with severe behavioral health conditions that have gone untreated or have been significantly under treated, or misdiagnosed. The urgent services team is a client centered program that seeks to provide immediate relief to families and clients in distress, if we do not have a service that meets your immediate need we will work with you to find a service in the community that does. As a walk-in clinic we welcome anyone who needs a psychiatric assessment over the age of 18, regardless of their ability to pay.

Therapist in the urgent services department provide triage services, intakes assessments, treatment planning, individual therapy, group therapy, and linkage to community services. The Urgent team is comprised of therapist, resources specialist, and an access coordinator who links clients to services that are clinically appropriate for the clients presenting behavioral health needs.

#### **Adult Urgent Services**

#### **Number Served:**

In FY 21/22, 649 unduplicated clients were served.

#### **Challenges and Successes**

The COVID-19 pandemic brought on several challenges, including limited ability to see clients in-person and social distancing requirements. While providing phone services there have been challenges in contacting clients. During these times, we will make three attempts over the course of three days to make contact. Due to a National and Statewide health care staffing shortage and impact of COVID 19, SYBH has been minimally staffed and this has led to staff feeling overwhelmed. As a result of limited staff, in early 2020 Open Access Clinic (OAC) was reduced to three days a week.

The COVID-19 pandemic allowed for phone/telehealth services to be provided which subsequently led to clients being seen in a timely fashion and assessments being completed efficiently.

#### Changes to 2021-2024 Three-Year Program and Expenditure Plan:

SYBH will be reviewing both Adult Urgent Services to identify gaps in services and changes that may be made to the 2021-2024 Three-Year Program and Expenditure Plan. SYBH will report any changes to the 2021-2024 Three-Year Program and Expenditure Plan that may occur to address these needs in the next Annual Update.

#### **Bi-County Elder Services Team (BEST)**

The BEST Program serves older adults (age 60+) in both Sutter and Yuba counties with serious mental health conditions as well as co-occurring mental health and substance use conditions. The BEST therapist provides outreach, assessment, individual therapy, case management, linkage to other adult services such as medication support or substance use disorder treatment and linkage to community resource and supports.

#### **Numbers Served:**

In FY 21/22, 37 unduplicated clients were served.

#### **Challenges and Successes**

The current challenges faced for the BEST program, are a result of the COVID-19 pandemic. Clients have an increase in needs and face new challenges of isolation. Staffing shortages have also become an issue, and at times it becomes difficult to support the client's needs due to a high caseload.

#### Changes to 2021-2024 Three-Year Program and Expenditure Plan:

SYBH does not anticipate changes to this program which would veer away from the 2021-2024 Three-Year Program and Expenditure Plan. If changes are needed SYBH will address these needs in the next Annual Update.

#### **Ethnic Outreach Services**

The Ethnic Services Centers and Outreach Program consists of Spanish-speaking and Hmong speaking providers that have a cultural understanding of the behavioral health and other special needs of the persons they serve. The services provided through Sutter-Yuba's Outreach Centers include bilingual counseling, referrals and linkage, outreach provided in settings such as schools, homes, local primary care clinics, community agencies, and at the Outreach Centers and other Sutter-Yuba office locations.

#### **Numbers Served:**

In FY 21/22 the Ethnic Services Program served 251unduplicated clients.

Hmong Outreach: 53Latino Outreach: 198

#### **Challenges and Successes**

The challenges for the Ethnic Outreach Programs revolved around COVID -19 restrictions making it difficult to provide services and the ongoing staffing shortage impacting SYBH.

The successes were finding creative ways to continue to serve the Latino and Hmong communities.

#### Changes to 2021-2024 Three-Year Program and Expenditure Plan:

SYBH will be reviewing stakeholder feedback to identify how to implement the ideas that were put forth during the CPPP. These include specific ideas which are presented in detail in the full Annual Update, for both the Hmong and Latino outreach services. Additionally, SYBH will follow through on suggestions to explore providing outreach services to the Eastern Indian populations in Sutter and Yuba Counties.

#### Wellness and Recovery Program

The Wellness and Recovery Program offers wellness-oriented groups and individual support to consumers with serious mental health conditions or co-occurring mental health and substance use disorders. Team members include Mental Health Therapists, Peer Specialists, and Resource Specialists. The program also partners with Sutter County Schools to provide an onsite Adult Education and Work Wellness program. Together, these programs help consumers work toward their social, occupational, and educational goals.

In person groups have resumed as of February 2022. There are a few individuals who still receive packets when their health issues prohibit participation in person.

FY 21/22 unduplicated count of individuals served was 119.

#### Changes to 2021-2024 Three-Year Program and Expenditure Plan:

SYBH will keep updated on the new process for State certification of peer advocates to make sure that our peer advocates are trained, and eligible for certification.

#### **Supportive Housing Services**

New Haven Court is a permanent supported housing (PSH) apartment complex where unsheltered individuals are housed using a "Housing First" model. Residents of 19 of the 40 units receive daily MHSA funded supportive housing services to help residents retain housing, build life skills, and address behavioral health conditions. New Haven Court began moving in residents in May of 2021. SYBH developed a contract with Telecare to provide onsite Supportive Housing Services for the 19 SYBH apartments at the complex. That contract was effective July 2021. Detailed information regarding these services will be reported in the next annual update.

Since 2021, construction has been taking place on a second No Place Like Home funded project: the Cedar Lane permanent supportive housing apartment complex on Cedar Lane in Olivehurst, CA. Like New Haven Court, Cedar Lane is a mixed-use housing complex for individuals experiencing chronic homelessness. The Cedar Lane complex closely mirrors the New Haven Court project. There are 40 total units, 19 of these units are specifically for individuals experiencing behavioral health challenges that meet the requirements for service by SYBH. 20 units are for other community members experiencing homelessness, and 1 unit is in use for the resident manager. Cedar Lane is slated to begin moving in residents in November of 2022.

#### Changes to 2021-2024 Three-Year Program and Expenditure Plan:

The new No Place Like Home funded project, Cedar Lane, is an addition to our approved 2021-2024 Three-Year Program and Expenditure Plan. This new supportive housing project and approved budget is being reported in this FY 22/23 Annual Update.

#### Overall Goals for CSS in the 2021-2024 Three-Year Program and Expenditure Plan

SYBH will be conducting an analysis of all MHSA programs to ensure that each program is in the component of services which best aligns with the goals of the individual program. MHSA was originally rolled out one component at a time which created some overlap in services. Additionally, there have been several updates to MHSA requirements. This has led to need to review all programs to ensure there is no duplication and that SYBH is maximizing budgetary categories and requirements to provide the best array of services possible for the SYBH community.

## PREVENTION AND EARLY INTERVENTION(PEI)

Prevention and Early Intervention (PEI) programs are designed to promote wellness, foster health, prevent suffering that can result from untreated mental illness, and improve mental health conditions in the early stages of its development. PEI services are provided in the following categories:

- Prevention
- Early Intervention
- Outreach Increasing Recognition of Early Signs of Mental Illness
- Stigma and Discrimination Reduction
- Suicide Prevention
- Access and Linkage to Treatment
- Timely Access to Treatment

#### Prevention

The following activities were provided under the Prevention category:

#### The Council

These are school based groups provided with the to decrease risk factors and increase in protective factors.

#### **Numbers Served:**

Due to the COVID-19 in person school restrictions, our annual attendance and number of students reached is low.

• In FY 21/22, 47 unduplicated clients were served.

#### **Girls Circle**

These school-based groups are provided to reduce negative outcomes of untreated mental illness by counteracting social and interpersonal forces that impede girls' growth and development by promoting an emotionally safe setting and structure within which girls can develop caring relationships and use authentic voices.

#### **Numbers Served:**

Due to the COVID-19 in person school restrictions, our annual attendance and number of students reached is low.

In FY 21/22, 166 unduplicated clients were served.

#### **Unity Circle**

The goal of the Unity Circle groups is to counter isolation, internalized self-rejection, and other adverse health and mental health effects on LGBTQ+ youth due to marginalization. With respect for individual safety, control, and preference, and with no requirement for self-disclosure, the circle promotes belonging, inherent value, and community resilience.

#### **Numbers Served:**

• FY21/22, 26 unduplicated clients were served.

#### **Nurtured Heart Approach**

The Nurtured Heart Approach® (NHA) is more than just a parenting or educator behavior management strategy. It is a philosophy for creating healthy relationships with the people in your life. NHA consists of a set of strategies that assists children in further developing their self-regulation and has been found effective with children of all ages. It focuses on transforming the way children perceive themselves, their caregivers, and the world around them. Children learn to understand that they will receive endless amounts of praise, energy, recognition, and reward through the positive behavior they display, and this supports children to build a positive portfolio of themselves.

#### **Numbers Served:**

• In FY 21/22, 100 unduplicated clients were served.

The PEI staff have adapted this program to a virtual learning environment. This has allowed the program to continue to be taught in schools via ZOOM.

#### Cyberbullying

Cyberbullying: A Prevention Curriculum for Grades 6 –12 is a program that deals with attitudes and behaviors associated with cyberbullying. It consists of eight, 50 minute -sessions with additional reproduceable resources.

Goals: This program strives to achieve these goals:

Numbers Served: FY 21/22, 44 unduplicated clients were served

#### **Camptonville Community Partnership**

The Camptonville Community Partnership Program is an activity that targets members of stressed families, students at risk of school failure, underserved populations, and those at risk of a potentially serious mental illness. The Program's target population is Yuba County upper foothills youth aged 8 to 18 years of age. These efforts will increase the foothill community capacity to provide prevention and early intervention opportunities for youth. Referrals for the program come from the schools and foothills community members. The Camptonville Community Partnership Program helps strengthening relationships between family members, classmates and teachers through activities that provide teamwork and building their communication skills.

#### **Numbers Served:**

Mentorship/ Skill Building	Number of youths served (unduplicated #'s)	Total attendance	<u>Ages</u>
Camptonville After School	51	199	5-14
Program			
Rally Point	0	0	10-16

Chaperoned Internet	5	31	
assistance for schoolwork			
Mentorship opportunities	6	22	10-13
Total youth served	56	252	5-16

#### **Stopping The Pain**

Stopping the Pain, the Signs of Self-Injury prevention program, is designed to address the problems of self-injury through the school environment. The exercises in *Stopping the Pain* will help explore why anyone would self-injure and give ideas on how to stop. The workbook provides high school students with tools to prevent and respond to self-injury. These tools are targeted for use by students, school staff, and parents. This workbook was designed to provide and learn new skills for dealing with issues in life, reduce stress, and reach out to others when need it. The work through the workbook, is your own personal and private road map to regaining control of your life.

#### **Numbers Served:**

• In FY 21/22, 22 students completed the program.

#### **Challenges and Successes**

Prevention services are predominately provided to students at schools. This made it very difficult to provide services when schools were closed. Overall, the numbers served were down during this reporting period.

The team was able to identify new services to be implemented in FY 21/22 which should increase participation and meet the needs of the community.

Changes to 2021-2024 Three-Year Program and Expenditure Plan: SYBH already has plans for three new activities beginning FY 21/22. Based on the needs of the community and requests from schools, additional Unity Circle and Cyberbullying groups will be implemented, and a new grief support activity will be implemented.

#### **NEW PREVENTION PROGRAMS FOR FY 22/23**

Activity: Women's Circle

**Description:** The women's circle is a support group for women to share, explore, build skills, and encourage one another to live authentically in mind, body, heart, and spirit; through discussions and creative arts activities, women address and build skills in the areas of relationships, self-care, clarifying purpose, goal setting, money, conflicts, skills in work and professional life. The 10-week program focuses on holistic health and wellness using a variety of creative processes such as collage, games, surveys, case studies, and analysis, along with guided visualization, stress relief, and inspirational role models to explore self-care and how to support one another. Themes include physical, emotional, spiritual, occupational, and financial wellness, intimacy, and sexual wellness in women's lives.

**Goals:** By participating in meaningful, gender-relevant discussions and capacity-building activities, women reinforce their vital roles within the community and society. Women grow through and toward relationships as they share diverse strengths and capabilities that shape their lives and communities.

**Numbers Served: 0** 

Annual target of individuals served: 20 to 25

NEW PREVENTION PROGRAMS FOR FY 22/23
Activity: My Journey Grief Support Group

#### **Description:**

- My Journey Grief support, a comprehensive, intervention-based program to support students after the death of an important person in their life (parent, caregiver, sibling, grandparent, friend, etc.).
- The My Journey Grief model is peer support, which consists of bringing grieving people together to form a compassionate and caring community who support and grow alongside one another, by creating a space for "kids to be kids" through a variety of methods including play, music, art, drama, and reflective sharing

#### Goals:

- Support groups helps students build resilience to overcome loss and adversity in their lives and grow from this loss and adversity.
- address the needs of the whole child: breaking down isolation and stigmas
- equipping families with coping strategies and communication skills
- promoting good mental and physical health.
- provide unlimited, and accessible support and advocacy to children and teens.

**Numbers Served: 0** 

Annual target of individuals served: 20 to 25

## **Early Intervention Programs**

#### **Strengthening Families**

Strengthening Families is an evidence-based prevention program that is intended for high-risk and general population families. This evidence-based family skills training program has significantly improved parenting skills and family relationships, reduced problem behaviors, delinquency, and alcohol and drug abuse in youth ages 10 to 14, and improved social competencies and school performance. The Strengthening Families Program is three hours program offered locally as a seven-week program for families. Families are provided with dinner; parents and youth participate in separate classes for age-appropriate skills building,

activities, and discussion on the second hour. Families reunite to work together in a family class.

This is a very popular and successful program. Due to COVID -19 restrictions this service was not offered in FY 20/21.

#### **Aggression Replacement training**

Aggression Replacement Training is a ten-week course for adolescents on a high school campus. It is a cognitive-behavioral intervention that trains participants to cope with their aggressive and violent behaviors. The program is taught in one-hour class per week, focusing on Social Skills, Anger Control Training, and Moral Reasoning. Participants are selected by the school administration, not to exceed 10 participants per course. The Public Health PEI Team provides trained instructors and all materials to a limited number of high schools.

#### **Numbers Served:**

• In FY 21/22, 6 unduplicated clients were served.

#### **Second Step Bullying prevention**

The Second Step Bullying Prevention includes training and resources for school staff, classroom lessons, games, activities, and Home Link materials for families, which build on the foundation of Social Emotional Learning (SEL) to give schools the tools to prevent bullying. The Second Step Bullying Prevention Unit, combined with SEL, empowers schools to engage in comprehensive research-based bullying prevention, starting in kindergarten.

In FY 21/22, 808 unduplicated clients were served.

#### **PACES – Prevent Adverse Childhood Experiences Website**

The member provider list on this website has increased from 4 members to 92 members.

#### Changes to 2021-2024 Three-Year Program and Expenditure Plan:

At this point in time there no changes are anticipated o the 2021-2024 Three-Year Program and Expenditure Plan. Any needed changes will be reported in the next Annual Update.

# Outreach for Increasing Recognition of Early Signs of Mental Illness Program

#### **Mental Health First Aid Training**

Mental Health First Aid and Youth Mental Health First Aid is an interactive 8-hour course designed to present an overview of mental illness and substance use disorders. This training will give members of the public aged 18 and older critical skills to help someone who is developing a mental health problem or experiencing a mental health crisis. These trainings are free of charge to all participants, including workbooks and materials.

#### **Numbers Served:**

In FY 21/22, 324 unduplicated individuals completed this training.

#### **Behavioral Health Educational Videos**

SYBH is collaborating with a local video production company to create and produce a series of short 2–4-minute television-ready videos for the purpose of educating, outreach, advertising and promotion of Sutter-Yuba Behavioral Health services and the Mental Health First Aid (MHFA) program.

#### **Numbers Served:**

 This project recently launched in May of 2021 and SYBH is in the process of conducting research, content development, and identifying cast members.

#### Changes to 2021-2024 Three-Year Program and Expenditure Plan:

At this point in time there no changes are anticipated o the 2021-2024 Three-Year Program and Expenditure Plan. Any needed changes will be reported in the next Annual Update.

## Stigma and Discrimination Reduction Programs

#### **Tri-County Diversity**

Tri-County Diversity is working with all ages in our schools, Marysville Joint Unified School District, River Valley, Marysville and Yuba City High School's. Tri-County Diversity helps to further influence and create strong collaboration with schools and the public and private sectors of our community regarding issues surrounding LGBTQIA persons though collaborative efforts. Tri-County Diversity is connected to our community though outreach and events provided throughout Sutter and Yuba Counties. Tri County Diversity has a website to help provide access to their services. Tri County Diversity keeps in contact with school GSA groups for collaboration and is available to school administration as needed. Tri-County Diversity continues to participate in outreach events to include United Way Resource Fair, Summer Stroll, Peach Festival, connecting with all those interested in learning or just being able to get involved with activities for youth and adults.

#### **Numbers Served:**

• In FY 21/22, 313 unduplicated students were served.

#### **Hmong Impact Youth**

Hmong Impact Youth program was created to educate, raise awareness, and decrease mental health stigma and discrimination and support Hmong youth who may be experiencing mental health issues.

#### **Numbers Served:**

• In FY 21/22, 228 unduplicated clients were served.

#### Implicit Bias and Diversity, Equity, and Inclusion (DEI) in Mental Health

SYBH sponsored several Implicit Bias and Diversity, Equality, and Inclusion (DEI) trainings to improve cultural competency within SYBH as well as educate community members and stakeholders on issues of social/racial injustice, etc. and its implications on the behavioral health system and organizations in general

#### **Numbers Served:**

In FY 21/22, 444 Individuals participated and were trained.

#### Changes to 2021-2024 Three-Year Program and Expenditure Plan:

At this point in time there no changes are anticipated o the 2021-2024 Three-Year Program and Expenditure Plan. Any needed changes will be reported in the next Annual Update.

#### Suicide Prevention Activities

#### **Yellow Ribbon Suicide Prevention**

This activity is intended for high school students, their families, and the staff at their schools. Yellow Ribbon Suicide Prevention Trainings are designed to address youth/teen suicide prevention and suicide risk awareness in high school.

#### **Numbers Served:**

 In FY 21/22, 22 unduplicated clients were served. Due to the COVID-19 pandemic, restrictions around outreach events and gatherings limited the activities SYBH was able to hold.

#### **Applied Suicide Intervention Skills Training (ASIST)**

The Applied Suicide Intervention Skills Training (ASIST) workshop is for community members who want to feel more comfortable, confident, and competent in helping to prevent the immediate risk of suicide.

#### **Numbers Served:**

• In FY 21/22, 18 clients were served.

#### SafeTALK

SafeTALK is a training program that teaches participants to recognize and engage persons who might be having thoughts of suicide and connects them with community resources trained in suicide intervention.

#### **Numbers Served:**

• In FY 21/22, 78 clients were served.

#### **Signs of Suicide Prevention**

Signs of Suicide (SOS) is a middle school suicide prevention and risk awareness training. The SOS Signs of Suicide Prevention Program (SOS) is a universal, school-based depression awareness and suicide prevention program designed for middle-school (ages 11–13).

#### **Numbers Served:**

In FY 21/22, 2433 unduplicated clients were served

#### Changes to 2021-2024 Three-Year Program and Expenditure Plan:

At this point in time there no changes are anticipated o the 2021-2024 Three-Year Program and Expenditure Plan. Any needed changes will be reported in the next Annual Update.

### Access and Linkage to Treatment Services

#### **Promotores Project**

The Promotores program is designed to increase awareness of behavioral health services and resources in culturally distinct underserved communities

#### **Numbers Served:**

The Promotores Project was planned for and initiated during FY 18/19. But due to an unanticipated change in staffing, this activity could not be fully implemented. This activity was expected to be re-ignited during FY 19/20 and FY 20/21. However, in FY 19/20, PEI faced some challenges in staffing the program. In FY 20/21, COVID-19 prevented this program from initiating. In FY 20/21, two new staff members were hired and assigned to manage the Promotores program, but the COVID-19 pandemic prevented PEI from implementing the program. Nevertheless, Promotores staff provided community outreach regarding Mental Health Awareness, Each Mind Matters, and Knowing the Signs of Suicide in FY 20/21.

• In FY 21/22, 948 unduplicated clients were served

#### **Peer Resource Engagement Program (PREP)**

The Peer Resource Engagement Program (PREP) is founded around the idea that High School students understand the social and emotional stressors their peers are currently challenged. PREP provides a safe space to discuss, address, and examine youth stressors and issues and provide engaging activities to lessen the stressors. SYBH has entered into an identical MOU with both the Sutter County Superintendent of Schools Office and the Yuba County Office of Education to administer these programs for each county.

#### **Numbers Served:**

• In FY 21/22, 417 unduplicated clients were served.

#### Changes to 2021-2024 Three-Year Program and Expenditure Plan:

At this point in time there no changes are anticipated o the 2021-2024 Three-Year Program and Expenditure Plan. Any needed changes will be reported in the next Annual Update.

## Timely Access to Services

#### **Adult Early Intervention Program**

The PEI-funded Adult and Older Adult Early Intervention Program is focused on serving adults and older adults who are newly diagnosed with a moderate to severe mental health condition, adults who have been in previous treatment but who have been mis-diagnosed, or adults who are identified as having severe mental health conditions that have gone untreated or significantly under-treated.

The goal of the Early Intervention Program is to provide education, support, and therapeutic tools for mental health recovery. These interventions will be provided in six one-hour weekly or bi-weekly therapy sessions after initial referral to the program. Adult therapists will combine education with tools from the following evidence-based treatments for early intervention: Cognitive Behavioral Therapy for anxiety and depression, Dialectical Behavior Therapy for personality disorder, emotion regulation disorders and co-occurring disorders, Seeking Safety for co-occurring trauma and substance use, NAVIGATE for psychotic disorders, and Motivational Interviewing for engagement across diagnostic categories. Participants will also be eligible to participate in weekly group therapy if desired. After the six initial hour-long sessions, participants in the program will continue to be eligible to participate in weekly group sessions as well as 30-minute individual therapy sessions every two, three, or four weeks as determined by the client and clinician. Clients may participate in the Early Intervention Program for up to 18 months after being received into the program.

The pandemic and staffing shortages delayed the startup of this program. SYBH plans for a FY 22/23 implementation.

#### Family Urgent Response System (FURS)

The Family Urgent Response System (FURS) for Foster Youth and Caregivers is a coordinated statewide, regional, and county-level system that provides 24-hour mobile response services inhome, in-person crisis stabilization, conflict resolution and support services and resources to foster youth, former foster youth, and caregivers. The program aims to preserve placement for foster children and youth and strengthen relationships between the child or youth and their caregiver.

Currently, the FURS program has not required MHSA funding as initially planned. MHSA funding was allocated to the program initially with the anticipation that it may be required. However, funding from Child Welfare Services was able to meet the financial needs of the program. As the program grows, it is anticipated that additional funding may be needed from the MHSA to support the provision of services.

#### **Number Served:**

• In FY 20/21, 0 clients were served. The FURS Interim Plan was launched March 1, 2021 and the long-term plan fully launched July 1, 2021.

Overall Goals for PEI in the 2021-2024 Three-Year Program and Expenditure Plan

SYBH will be conducting an analysis of all MHSA programs to ensure that each program is in the component of services which best aligns with the goals of the individual program. MHSA was originally rolled out one component at a time which created some overlap in services. Additionally, there have been several updates to MHSA requirements. This has led to need to review all programs to ensure there is no duplication and that SYBH is maximizing budgetary categories and requirements to provide the best array of services possible for the SYBH community.

## Innovation (INN)

The iCARE mobile engagement team serves individuals that are high utilizers of emergency or inpatient care, calling law enforcement or emergency medical services repeatedly, or are unengaged in care and living with untreated severe and or chronic behavioral health conditions. The iCARE team is focused on getting to know clients, understanding their ideas about personal wellness, desires for their own life, building trust and spending time getting to know client needs. The iCARE mobile engagement team is not a crisis team or a case management team, but works closely with SYBH's crisis, case management and FSP teams. The iCARE engagement team will link clients when they are ready, with outpatient treatment and support resources, accompanying clients to treatment services as needed and upon client request.

FY 20/21 was an implementation year for the iCARE Innovation's project.

## **Workforce Education and Training (WET)**

SYBH has joined the Central Region Collaborative which will implement a five-year plan to support the behavioral health workforce. As a part of this plan SYBH will be offering a Loan Repayment program for current staff and a Loan Repayment Program as a hiring incentive for new staff. To be eligible for the Loan Repayment Program participants will have to be in job classifications that have been hard to fill. At this point in time participants will receive up to \$10,000.00 in loan repayment. SYBH and the Central Region Collaborative has developed an MOU with CalMHSA who will work directly with the loan companies of participants. Once a service obligation has been completed CalMHSA will pay the agreed upon amount directly to the loan company. Service obligations for SYBH at this time are one year of service from the time a participant is approved for the Loan Repayment Program.

## **Capital Facilities and Technology Needs (CFTN)**

SYBH is not currently using MHSA funding for this category.

# Comments received during Public Comment Period 12/13/22 – 1/12/23

Below are comments which we received during the, 12/13/22 - 1/12/23, Public Comment Period. These comments have already been incorporated into the Annual Update. They are listed as part of this Executive Summary so that it easy to see what public comments have been added to the Annual Update without reading the entire plan.

Comments received 12/16/22

### Comment's reference Annual Update page number

#### Page 15, Last sentence Under the CCP:

In summary, although the community expressed needs in certain areas, there was overwhelming support for the MHSA FY 22/23 Annual Update. In the upcoming years, SYBH will include stakeholder feedback from the standing Sutter County Health and Welfare Committee, the Board of Supervisors, homeless services and support planning meetings, and the Behavioral Health Advisory Board in the summary stakeholder feedback for the CCP process. This will include public comments, feedback, or general thoughts on the issues related to community behavioral health issues and needs to include issues as discussed in the CalAIM community stakeholder forums and in the Sutter - Yuba Local Homeless Action Plan. Additionally, SYBH will be working to make the MHSA Annual Update and Three-Year Plan more community friendly. SYBH and Sutter County HHS has received feedback that the plan is long, hard to read and does not adequately communicate program outcomes. Over the next several years, SYBH will be working to improve the MHSA Annual Plan to address this feedback to include the addition of a public information officer, data and performance management supports, and community friendly report design and publication assistance.

#### Pg 17, Community Services and Supports:

In the Community Services and Supports section, you will find descriptions of the Full-Service Partnerships (FSP) and General Systems Development (GSD) programs funded by the Mental Health Services Act at Sutter-Yuba Behavioral Health. Additionally, over the next year and based on feedback received from several community members, if funding is available, SYBH will explore if a Neurofeedback Pilot would be possible under MHSA funding that could include CSS, PEI or Innovation dollars. This pilot would be explored in collaboration with managed care plan partners and would be required to meet all MHSA and stakeholder requirements including evaluation. Also, as the Department of Health Care Services provides instructions to counties on Care Court requirements, required mobile community crisis response teams, and the implementation of community supports and enhanced care management under CalAIM, and per stakeholder feedback and support, additional changes may be made in CSS program areas.

### **Pg 17 Community Services and Supports**

Currently, the children and youth FSP programs are broken down into three age groups: Early Childhood (0-5 years), Children's (6-15 years), and Transitional-Aged Youth (TAY) (16-25 years). The Early Childhood and Children's FSP programs are currently contracted out to Youth 4 Change, a 18 community-based organization with a long history of providing effective FSP services while the TAY FSP program is provided in-house. Also, as the Department of Health Care Services provides instructions to counties on Care Court requirements, required mobile community crisis response teams, the implementation of community supports and enhanced care management under CalAIM, and the California Children and Youth Behavioral Health Initiative, and per stakeholder feedback and support, additional changes to current programs may be made in CSS program areas.

## Pg 19, graphs are blurry, please work with IT to get clear graphs included in the final draft

Pg 47, youth that are Anxious and dressed should read as youth that are anxious and depressed

#### Pg 34, PEI,

Prevention and Early Intervention programs use a variety of trainings and evidence-based practices to provide the community awareness, early interventions, and community campaign methods such as Knowing the Signs of Suicide and Each Mind Matters. Each activity within the program works to address the needs of subpopulations within the community. Program changes under PEI will include the addition of a funded public information officer position to help with information sharing, social media management, community forums, public education addressing stigma, discrimination, services access, and other behavioral health topics in the coming budget year. This position will help integrate important behavioral health topics into public health community education efforts. Additionally, if funding is available, SYBH will work to develop more adult focused PEI programming in alignment with stakeholder feedback to include partnering with other public entities such as the Sutter County Museum and Library around culture and community resilience, as well as brief solution focused therapy approaches, neurofeedback or other PEI supports focused on adults.

#### Pg 69, Heart Team

The overwhelming amount of community input regarding the need to address the issue of homelessness in the Yuba-Sutter area, as well as the need to provide behavioral health informed services to the homeless, led to the creation of a Community Services Manager position, to be funded partially by Public Health dollars and partially by Sutter Yuba Behavioral Health MHSA dollars. This will allow homeless services to be brought together under one program with one manager. As funding allows, additional program changes may be made to ensure that SYBH, HEART and iCARE team is coordinating with CalAIM services (community supports and enhanced care management) to support those who are homeless, and strategically evolving program performance to ensure effective integration with the efforts identified in the Sutter – Yuba Local Homeless Action Plan. If funding allows, these changes could include joint training opportunities for collaborating teams, enhancements in allowable data sharing efforts, focused work on integration and increased access to Substance Use Disorder Treatment services. Lastly, for those beneficiaries that the HEART or ICARE team houses, welcome home packages for critical household items will be provided to include kitchen utensils, cooking items, bedding and sheets, towels, and other allowable/reasonable items.

## FY 2020-21 Through FY 2022-2023 Three-Year Mental Health Services Act Expenditure Plan Funding Summary

County: Sutter-Yuba Behavioral Health Date: 3/25/20

	MHSA Funding						
	Α	В	С	D	E	F	
	Community Services and Supports	Prevention and Early Intervention	Innovation	Workforce Education and Training	Capital Facilities and Technological Needs	Prudent Reserve	
A. Estimated FY 2020-21 Funding							
Estimated Unspent Funds from Prior Fiscal Years	5,644,806	3,388,216	1,953,138	65,000	0		
2. Estimated New FY2020-21 Funding	8,084,671	2,021,168	100,000				
3. Transfer in FY2020-21						0	
4. Access Local Prudent Reserve in FY2020-21						0	
5. Estimated Available Funding for FY2020-21	13,729,477	5,409,384	2,053,138	65,000	0		
B. Estimated FY2020-21 MHSA Expenditures	6,858,925	1,739,400	1,475,800	65,000	0		
C. Estimated FY2021-22 Funding							
Estimated Unspent Funds from Prior Fiscal Years	6,870,551	3,669,984	577,338	0	0		
2. Estimated New FY2021-22 Funding	8,165,518	2,041,379	854,162				
3. Transfer in FY2021-22						0	
4. Access Local Prudent Reserve in FY2021-22				The Lates		0	
5. Estimated Available Funding for FY2021-22	15,036,069	5,711,363	1,431,500	0	0	ALT.	
D. Estimated FY2021-22 Expenditures	6,927,514	1,756,794	1,431,500	0	0		
E. Estimated FY2022-23 Funding							
1. Estimated Unspent Funds from Prior Fiscal Years	8,108,555	3,954,569	0	0	0		
2. Estimated New FY2022-23 Funding	8,083,862	2,020,966	1,209,300		THE THE		
3. Transfer in FY2022-23						0	
4. Access Local Prudent Reserve in FY2022-23				N. COL	A TOWN	0	
5. Estimated Available Funding for FY2022-23	16,192,417	5,975,535	1,209,300	0	0		
F. Estimated FY2022-23 Expenditures	6,996,790	1,774,362	1,209,300	0	0	100	
G. Estimated FY2022-23 Unspent Fund Balance	9,195,627	4,201,173	0	0	0		

1. Estimated Local Prudent Reserve Balance on June 30, 2020	521
	321,
2. Contributions to the Local Prudent Reserve in FY 2020-21	
3. Distributions from the Local Prudent Reserve in FY 2020-21	
4. Estimated Local Prudent Reserve Balance on June 30, 2021	521,
5. Contributions to the Local Prudent Reserve in FY 2021-22	
6. Distributions from the Local Prudent Reserve in FY 2021-22	
7. Estimated Local Prudent Reserve Balance on June 30, 2022	521,
8. Contributions to the Local Prudent Reserve in FY 2022-23	
9. Distributions from the Local Prudent Reserve in FY 2022-23	
10. Estimated Local Prudent Reserve Balance on June 30, 2023	521,

## Mental Health Services Act (MHSA) Annual Update FY 22/23

Betsy Gowan, Adult Services Branch Director
January 12, 2023



HEALTH AND HUMAN SERVICES

1

### How Did We Get Here?

- MHSA requires a Three-Year Program and Expenditure Plan, or an Annual Update be submitted to DHCS each year.
- On 10/27/22 the BHAB voted to recommend the 22/23 Annual Update for approval by the BOS.
- After BHAB recommendation, DHCS informed SYBH that we had not had the PEI information approved in the appropriate format.
- Given this new information, we pulled the 22/23 Annual Update from the BOS agenda, to resubmit and include the PEI plans for approval
- This meant we needed to have BHAB Recommend approval on the PEI information in the correct format with the 22/23 Annual Update as one document

## Purpose of Tonight's Public Hearing

- To present an overview of The Mental Health Services Act (MHSA)
- To present an updated overview of the 2022 2023 Annual Update
- To highlight public input received during the reposting of the updated plan during the public comment period
- To gather public input from community members during the Public Hearing
- To ask the BHAB to vote to recommend that the BOS approve the FY 22/23 Annual Update

3

## What is the Mental Health Services Act

- The Mental Health Services Act was approved by California voters in 2004
- It is a one percent income tax on personal income in excess of one million dollars per year
- Designed to expand and transform California's Behavioral Health System
- Requires funding be spent in a categorical way
  - Community Services and Supports (76%)
  - Prevention Early Intervention (19%)
  - Innovation (5%)
- Requires Community Input through the Community Program Planning Process

## **Executive Summary**

- Overview of the CPPP for the 2022 -2023 MHSA Annual Update
- Overview of the MHSA Programs
- Public Comment from December 13, 2022 January 12, 2023
- FY 2020-2021 Through FY 2022-2023 Expenditure Plan

5

**Public Comment** 

Increased input from community members will be included in future updates :BOS, community members attending the board, BHAB, community members feedback in general provided to staff, including stakeholder feedback from the Sutter Yuba Homeless Consortium regional homeless plan.

7

Beyond what we offer, additional Behavioral Health interventions should be considered such as neurofeedback.

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As funding allows, additional program changes may be made to ensure that SYBH, HEART and iCARE team is coordinating with CalAIM services (community supports and enhanced care management) to support those who are homeless, and strategically evolving program performance to ensure effective integration with the efforts identified in the Sutter — Yuba Local Homeless Action Plan.

These changes could include joint training opportunities for collaborating teams, allowable data sharing efforts, and increased access to Substance Use Disorder Treatment services.

9

The Annual Update should be easier to read and include performance outcomes and measurable results.

# Outcome Data

11

## Child and Adolescent Needs and Strengths (CANS)

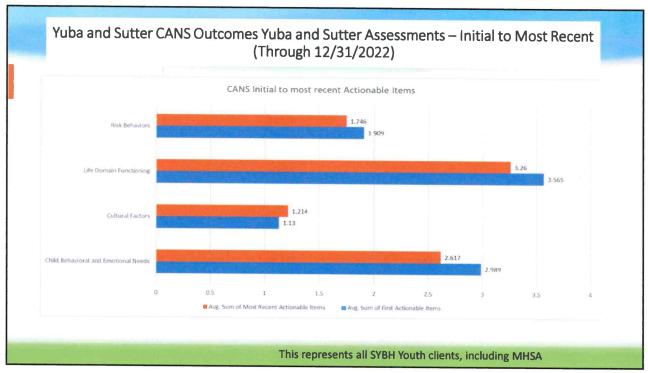
CANS covers 4 Domains and consists of several "Actionable" items including, but not limited to:

Child Behavioral and Emotional Needs –

Adjustment to Trauma Anger Control Anxiety Conduct Depression Oppositional Substance Use

Cultural Factors – Language Traditions and Rituals Life Domain Functioning – Decision-Making Living Situation School Attendance

Risk Behaviors – Danger to Others Non-Suicide Self Injury Suicide

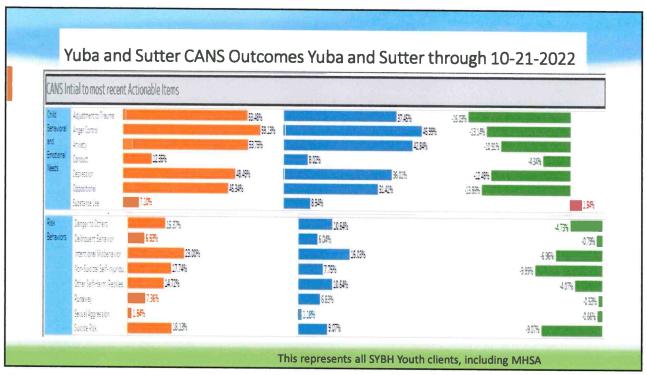


## What are the strengths of program/service?

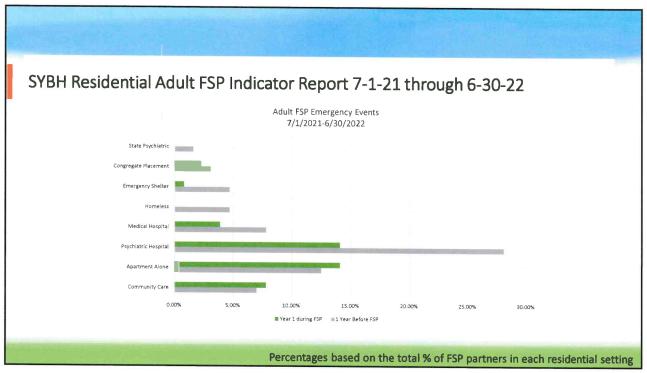
As indicated by the CANS-IP strengths and outcomes on the next slide there are improvements in:

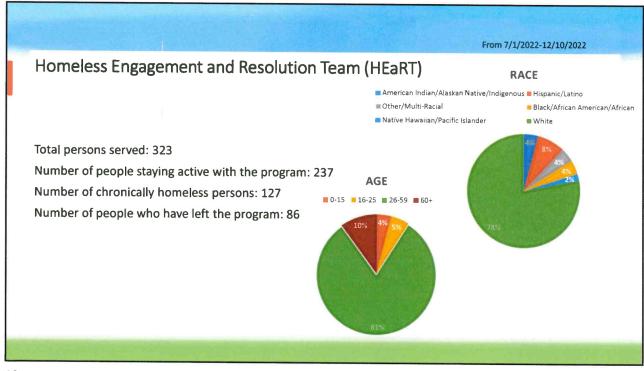
- suicide risk
- non-suicidal self-injury
- · danger to others
- anxiety
- trauma response
- anger control

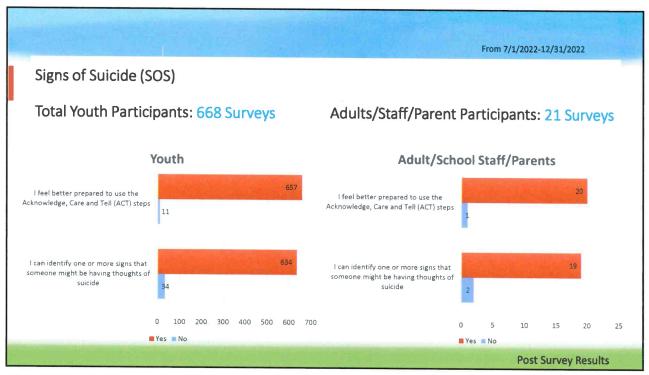
However, Substance Abuse issues have increased indicating a need for more awareness and services.

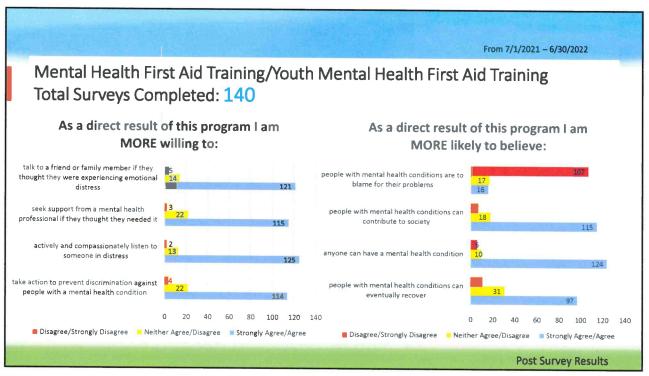


ult Mental Healtl		rach/	V EVO	ntc		
ator Report 7-1-	21 thr	ougn	6-30	-22		
7/1/2021- 6/30/2022	Total Partners Served	Partners wi Health Em Ever	nergency			Change in Events from Baseline (1 Year Before FSP)
SYBH Adult FSP				Events / Total Partners	Events/ Partners with Events	Events
FSP Data Reported for Partner	s Who: Wen	e Served Ar	ny Point Du	ring Service		
Year Prior to FSP Services	44	24	54.50%	1.91	3.5	
FSP Data Reported for Partner	s Who: Com	pleted at Le	east 1 Year			
Year Prior to FSP Services	24	11	45.80%	1.96	4.27	
First Year with FSP Services	24		16.70%	0.21	1.25	42 decreased events
FSP Data Reported for Partner	s Who: Com	pleted at Le	east 2 Years	JULIA		ET THE REAL PROPERTY.
Year Prior to FSP Services	18		44.40%	0.83	1.88	
First Year with FSP Services	18		5.60%	0.06	1	14 decreased events
Second Year with FSP Services	18		0.00%	0	0	15 decreased events









## New Prevention Survey developed and in use this School Year

In order to get consistent evaluation data a Pre and Post Prevention survey tool was developed in collaboration with Sutter County Superintendent of Schools and Yuba County Offices of Education and SYBH.

This survey is based on the Brief Universal Prevention Program Survey (BUPPS) designed by L.A. County.

The new survey is designed for 2 specific age groups, ages 6-11, and ages 12+ All responses are anonymous

The tool was implemented this school year beginning 8/23.

21

## **Questions & Comments**

#### **Community Services and Supports**

#### **Children & Youth Full-Service Partnerships**

CSOC

TAY

**Children & Youth General Services Development** 

**Youth Urgent Services** 

**Adult & Older Adult Full-Service Partnerships** 

HOPE

SHINE

**Adult General Services Development** 

**Adult Urgent Services** 

**BEST** 

**Ethnic Outreach Services** 

**Hmong Outreach** 

Latino Outreach

**Wellness & Recovery** 

**Supportive Housing Services** 

#### **Prevention and Early Intervention**

#### **Prevention Programs and Activities**

The Council

Girls Circle

**Unity Circle** 

**Nurtured Heart Approach** 

Camptonville Community Partnership

Cyberbullying

Stopping the Pain

#### **Early Intervention Programs and Activities**

**Strengthening Families** 

**Aggression Replacement Training** 

Second Step Bullying Prevention

## Outreach for Increasing Recognition of Early Signs of Mental Illness Programs and Activities

**MHFA** 

Behavioral Health Educational Videos/Each Mind Matters

#### Stigma and Discrimination Reduction Programs and Activities

**Tri-County Diversity** 

**Hmong Impact Youth** 

#### **Suicide Prevention Programs and Activities**

Yellow Ribbon Suicide Prevention

**ASIST** 

SafeTALK

Signs of Suicide Prevention

#### **Access and Linkage to Treatment Program and Activities**

**Promotores Project** 

PREP

HEART

## FY 2020-21 Through FY 2022-2023 Three-Year Mental Health Services Act Expenditure Plan Funding Summary

County: Sutter-Yuba Behavioral Health Date: 3/25/20

County. Sutter-Tuba benavioral nearth					Date:	3/25/2
				Funding		
	Community Services and Supports	Prevention and Early Intervention	Innovation	D Workforce Education and Training	E Capital Facilities and Technological Needs	F Prudent Reserve
A. Estimated FY 2020-21 Funding						
1. Estimated Unspent Funds from Prior Fiscal Years	5,644,806	3,388,216	1,953,138	65,000	0	
2. Estimated New FY2020-21 Funding	8,084,671	2,021,168	100,000			
3. Transfer in FY2020-21						
4. Access Local Prudent Reserve in FY2020-21						
5. Estimated Available Funding for FY2020-21	13,729,477	5,409,384	2,053,138	65,000	0	
B. Estimated FY2020-21 MHSA Expenditures	6,858,925	1,739,400	1,475,800	65,000	0	
C. Estimated FY2021-22 Funding	E- Person					
1. Estimated Unspent Funds from Prior Fiscal Years	6,870,551	3,669,984	577,338	0	0	
2. Estimated New FY2021-22 Funding	8,165,518	2,041,379	854,162			
3. Transfer in FY2021-22						
4. Access Local Prudent Reserve in FY2021-22						(
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5. Estimated Available Funding for FY2022-23	16,192,417	5,975,535	1,209,300	0	0	
F. Estimated FY2022-23 Expenditures	6,996,790	1,774,362	1,209,300	0	0	
G. Estimated FY2022-23 Unspent Fund Balance	9,195,627	4,201,173	0	0	0	
H. Estimated Local Prudent Reserve Balance						
1. Estimated Local Prudent Reserve Balance on June 30, 2020		521,836				
2. Contributions to the Local Prudent Reserve in FY 2020-21		0				
3. Distributions from the Local Prudent Reserve in FY 2020-21		0				
4. Estimated Local Prudent Reserve Balance on June 30, 2021		521,836				
5. Contributions to the Local Prudent Reserve in FY 2021-22		0				
6. Distributions from the Local Prudent Reserve in FY 2021-22		0				
7. Estimated Local Prudent Reserve Balance on Jun	ne 30, 2022	521,836				
8. Contributions to the Local Prudent Reserve in F	Y 2022-23	0				
9. Distributions from the Local Prudent Reserve in	FY 2022-23	0				
10. Estimated Local Prudent Reserve Balance on Ju	ine 30, 2023	521,836				