



Children and Youth Behavioral Health Initiative: Quarterly Public Webinar

Discussion document

July 15, 2022



Agenda for CYBHI Public Webinar July 15, 2022

As of July 13, 2022

Topic	Time	Sub-topics
Welcome	2:00-2:05	Welcome from Melissa Stafford Jones
Youth reflections	2:05-2:15	
Initiative-level updates	2:15-2:30	Stakeholder engagement updates Initiative-level outcomes and evaluation Equity Working Group
Workstream updates	2:30-3:00	Recent accomplishments and upcoming milestones across selected workstreams
Workstream deep-dives	3:00-3:40	BH Virtual Services Platform (DHCS) BH Coach Workforce in the context of the broader BH workforce (HCAI)
Q&A	3:40-4:00	

Source: California Health and Human Services Agency



Welcome and introductions

Youth reflections

The Children's Partnership: Youth-Centered strategies for Hope, Healing, and Health

As of July 13, 2022

Lizeth M.

Youth Leader for the report, Youth Centered Strategies for Hope, Health, Healing, and Health

Alexis Martin

Policy Associate, The Children's Partnership

Angela M. Vázquez

Policy Director, The Children's Partnership

The H3 collective is a youth-led policy council formed by The Children's Partnership and the National Black Women's Justice institute.

The collective aims to expand the availability and accessibility of culturally-responsive and gender affirming mental health services and support to marginalized youth.

Source: https://childrenspartnership.org/wp-content/uploads/2022/05/Youth-Centered-Strategies-for-Hope-Healing-and-Health_H3-Collective-Final-Report.pdf

CYBHI updates on selected initiative-wide topics

Overview of the Children and Youth Behavioral Health Initiative



The goal of the **Children and Youth Behavioral Health Initiative** is to **reimagine** the way behavioral health support is provided to **all children and youth in California**, by **aligning the systems that support behavioral health** for children and youth to create an **ecosystem that fosters social and emotional well-being and addresses the behavioral health challenges** facing children and youth

The initiative takes a **whole system approach** by creating **cross-system partnerships** to ensure that **the reimaged ecosystem is child and youth-centered and equity-focused**

Source: California Health and Human Services Agency

Overview of Initiative-wide updates

As of July 13, 2022

NOT EXHAUSTIVE

Recent highlights (Spring – mid-Summer 2022)	Upcoming milestones (Late Summer – Fall 2022)
<p>CYBHI initiative-wide updates</p> <ul style="list-style-type: none">▪ 6 partnerships with children, youth, and family organizations and 2 additional in development (37 completed and 7 planned focus groups, 10 planned 1:1 interviews with parents and 10 planned with children and youth)▪ Participation in Children’s Mental Health Awareness Week▪ Ongoing work to develop landscape analysis of BH efforts in CA▪ SME interviews on BH ecosystem design	<p>Initiative-wide milestones</p> <ul style="list-style-type: none">• Equity Working Group launch• Prevention and Wellness Working Group launch• Community Engagement Sessions• RFP release for initiative-wide evaluation and evaluation partner selection for the CYBHI• Draft of the BH Ecosystem white paper• Release of initiative-wide outcome measures
<p>Ongoing efforts to address urgent needs in children’s BH</p> <ul style="list-style-type: none">▪ Additional funding focused on children and youth behavioral health included in the 2022-23 State Budget – \$290M for Youth Suicide Prevention and Behavioral Health▪ Children and Youth Mental Health Resource Hub	

Source: CalHHS, DHCS, DMHC, HCAI, CDPH, OSG; 2022-23 California State Budget



Partnership and Engagement Overview

As of July 13, 2022

The CYBHI is designed to meet the needs of young people, families, and other stakeholders. We are engaging in extensive outreach, interviews, and listening sessions to ensure that our work is shaped by their voices, insights, and experiences.

575

organizations engaged, including:

188

Local, county, and state government entities

131

providers of health care, education and social services

30

child, youth, and family organizations

Source: CalHHS, DHCS, DMHC, HCAI, CDPH, OSG

1,200

registrants recorded for CYBHI public webinars

257

Stakeholder and expert interviews conducted

25+

roundtables and existing forums hosted or participated in



Overview of CYBHI approach to stakeholder engagement

As of July 13, 2022

Past 6 months General focus: Listening and understanding	Upcoming 6 months General focus: Design and testing
Engagement goals: <ol style="list-style-type: none">1. Building awareness of the initiative and its goals2. Understanding the needs of children, youth, families, and partners (e.g., education and healthcare stakeholders), focusing on broad priority areas for the CYBHI (e.g., school-linked services)3. Defining CYBHI aspiration, outcomes, and how to measure the success of the initiative	Engagement goals: <ol style="list-style-type: none">1. Soliciting targeted inputs on initiative and workstream design (e.g., collaboration with ongoing BH efforts, future BH ecosystem, pressure testing grant and platform design hypotheses)2. Building ongoing relationships for consistent, continued engagement3. Sharing regular updates about priorities, accomplishments, and plans across workstreams
Engagement formats: CYBHI-specific channels, focus groups through trusted partners, and participation in existing forums	Engagement formats: existing forums, 1:1 session, community engagement sessions, as well as forums / working groups focused on co-designing and testing ideas
Stakeholder engagement goals, timelines, and formats vary by workstream with the CYBHI	Stakeholder engagement goals, timelines, and formats vary by workstream with the CYBHI

Source: CalHHS, DHCS, DMHC, HCAI, CDPH, OSG

Learnings to guide upcoming stakeholder engagement

As of July 13, 2022

Improve clarity of stakeholder engagement goals and stakeholder roles	Engage stakeholders through existing forums	Match engagement formats to specific goals	Integrate information about stakeholder engagement opportunities
<p>e.g., helping stakeholders understand what phase of engagement they are a part of (overall and for specific workstreams), how they can be most helpful, and when key decisions are expected to be made</p>	<p>e.g., regular meetings of the committees, task forces, and associations; conferences, to ensure availability and accessibility of attendance</p>	<p>e.g., small groups and 1:1 expert interviews for foundational understanding, larger forums to generate a range perspectives to inform planning and design, mid-sized groups to effectively engage in co-development and co-design, public comment to gather detailed feedback</p>	<p>e.g., by maintaining a resource hub and making information about initiative-wide and workstream-specific stakeholder engagement easily available</p>

Source: CalHHS, DHCS, DMHC, HCAI, CDPH, OSG



Upcoming stakeholder engagement across departments

As of July 13, 2022

	Summer/Fall 2022	Fall/Winter 2022-23
CalHHS	<ul style="list-style-type: none"> Initiative-level community sessions to engage diverse stakeholders and build relationships with communities across the state Initial cross-sector and cross-agency working sessions to explore opportunities for collaboration with ongoing BH efforts 	<ul style="list-style-type: none"> Expansion of children, youth, and family engagement network, with opportunities for ongoing engagement over time Continued cross-sector, cross-agency, and community working sessions to explore opportunities for collaboration with ongoing BH efforts
CDPH	<ul style="list-style-type: none"> Continued working sessions with national experts on youth mental health and internal SME workgroup 	<ul style="list-style-type: none"> Series of focus groups with priority populations and CBOs
DHCS	<ul style="list-style-type: none"> Continued youth engagement and seeking public input for BH Virtual Services Platform Input on selection of evidence based and community defined practices Engagement with education, health plan partners and counties on statewide all payer-fee schedule and grant structure 	<ul style="list-style-type: none"> Public input process for first round of evidence-based and community defined practices grants Public comment on school-linked partnership and capacity grants Continued youth engagement for platform and school-based BH services
DHCS / DMHC¹		<ul style="list-style-type: none"> Input on scope of benefits and services for statewide all-payer fee schedule for school-linked BH services
HCAI	<ul style="list-style-type: none"> Education partners, BH professionals, and youth engagement to inform implementation plan for BH Coach role in schools and communities Interviews with SUD professionals and service providers, to inform design of SUD BH workforce programs 	<ul style="list-style-type: none"> Continued feedback and engagement on BH Coach role, including implementation plan Learning sessions on SUD workforce and opportunities to alleviate workforce challenges
OSG	<ul style="list-style-type: none"> Recruiting SME panel for Trauma-Informed Training for Educators 	<ul style="list-style-type: none"> Soliciting feedback on development of ACEs and Toxic Stress Public Awareness Campaign

1. DHMC collaborates with DHCS on Statewide All-Payer Fee Schedule for School-Linked BH Services

Source: California Health and Human Services Agency

Overview of the aspiration, initiative-level outcomes, and outcome measures for the CYBHI

As of July 13, 2022

CYBHI aspiration	CYBHI initiative-level outcomes	CYBHI initiative-level outcome measures
<ul style="list-style-type: none">• Cultivate commitment from all stakeholders and teams involved in the initiative• Enable clear communication and system-level alignment across multiple, cross-sector stakeholders	<ul style="list-style-type: none">• Facilitate strategic decision-making and prioritization of efforts• Inform workstream-specific efforts, ensuring alignment across departments and workstreams	<ul style="list-style-type: none">• Reflect the overall vision and impact to be enabled by the initiative• Set specific and measurable goals, offering a view that represents CYBHI progress across workstreams

Source: California Health and Human Services Agency, CYBHI department teams; US Agency for Healthcare Research and Quality; Measurement Resources



Approach and timeline for developing CYBHI outcomes

As of July 13, 2022

Source: California Health and Human Services Agency



CYBHI aspiration and initiative-wide outcomes

As of July 13, 2022

1. Mental health disorder prevention aims at “reducing incidence, prevalence, recurrence of mental disorders, the time spent with symptoms, or the risk condition for a mental illness, preventing or delaying recurrences and also decreasing the impact of illness in the affected person, their families and the society” (WHO Report, 2005)

Source: Notes from 1. Behavioral Health Task Force meeting convened on March 9, 2022, 2. Early Childhood Briefing convened on March 24, 2022, 3. Child Welfare Council Meeting convened on April 6, 2022; CalHHS; Feedback from cross-department meeting on May 6, 2022

Examples of potential outcome measures

As of July 13, 2022

1. **Increase in overall mental well-being for children and youth** (e.g., children and youth who feel happy)
2. **Decrease in mental health challenges** (e.g., children and youth with major depression, anxiety, feelings of sadness and hopelessness)
3. **Increase in children and youth who received BH services and supports** (as % of those who need services and supports)
4. **Decrease in rates of suicidal ideation for vulnerable populations** (e.g., for LGBTQ+ children and youth)
5. **Decrease in rates of school absenteeism**
6. **Decrease in emergency room visits and hospitalizations for children and youth with mental health and substance use related conditions**
7. **Increase in substance use prevention strategies** (e.g., measured as decrease of substance use in younger ages)
8. **Decrease in stigmatizing attitudes toward behavioral health**
9. **Improvement of experience with BH services and supports for children, youth, and families** (e.g., self-reported level of satisfaction with getting services and supports, ease of navigating BH services and supports)
10. **Increased knowledge of available BH supports and services**
11. **Increase in culturally and linguistically competent workforce**, especially in vulnerable / underserved communities
12. **Increase in preventive services for children ages 0-5 and increase in family supports** (e.g., adoption of dyadic therapy services)
13. **Decrease in barriers to care for children and youth from vulnerable communities** (e.g., decrease in individuals paying for BH services out of pocket)
14. **Increase in cross-sector collaboration and adoption of continuous improvement approaches** (e.g., based on process metrics for Implementation of a multisector collaborative approaches)
15. **Increased utilization of the school-linked statewide fee schedule**

Source: CalHHS; Targeted research; Expert interviews; First5 Center for Children's Policy's Prevention Memo (Feb, 19, 2022); Notes from the Behavioral Health Task Force meeting convened on March 9, 2022, the Early Childhood Briefing convened on March 24, 2022, the Child Welfare Council Meeting convened on April 6, 2022, CSESA Small Group Discussions on May 19, 2022; Feedback from cross-department meeting on May 6, 2022; The Children's Partnership Recommendations for Children and Youth Mental Health Outcome Measures (May 2022)

Initiative-wide Equity Working Group: overview

As of July 13, 2022

Overall purpose:

Ensure that equity is embedded into the processes, design, planning and implementation of the overall approach to the CYBHI as well as activities, services, programs, and policies of the individual workstreams

Potential role for the Equity EWG:

- **Develop and help apply a recommended equity framework** for the CYBHI (including defining key dimensions of equity, developing an equity tool, supporting capability building, and developing a set of recommendations for how to embed a focus on equity through continuous learning and improvement)
- **Support the use of data to advance equity**
- **Serve as thought partner and go-to resource for department teams** on advancing equity through the work of the CYBHI

Timeline and next steps:

- 100 applicants for the public members seats were received and selected applicants will be notified mid-July
- First Equity Working Group meeting is planned in late July

Additional resources:

[CYBHI Equity Working Group Purpose and Description](#)

Source: California Health and Human Services Agency

Addressing Urgent and Emergent Needs: 2022-23 Additional State Budget Investments

As of July 13, 2022

- **Children and Youth Wellbeing, Resilience, Parent Support Programs Grants Program, DHCS (\$75 million)**
- **Children and Youth Suicide Prevention Grants and Outreach Campaign, CDPH (\$40 million)**
- **Parent Support and Training Videos, DHCS (\$15 million)**
- **Youth Suicide Reporting and Crisis Response, pilot program, CDPH (\$50 million)**
- **Early Talents Workforce Development Pipeline Program, HCAI (\$25 million)**
- **Leverage Emerging Technologies to Develop Next Generation Digital Supports, DHCS (\$75 million)**
- **Youth Peer-to-Peer Support Program Development and Promotion, DHCS (\$10 million)**

Source: California Enacted Budget 2022-23, <https://www.ebudget.ca.gov/FullBudgetSummary.pdf>



Workstream updates

Reminder: Focus areas and workstreams for the CYBHI

As of July 13, 2022

1. Adverse childhood experiences

Source: California Health and Human Services Agency



Broad BH Workforce Capacity – HCAI

James Regan
Caryn Rizell

Broad BH Workforce Capacity (HCAI)

As of July 13, 2022

Workstream objectives	Accomplishments since March 2022	Detail: SUD workforce planning
<ul style="list-style-type: none">• Increase the behavioral health workforce that is culturally and linguistically proficient and capable of providing age-appropriate services to children, youth, and families.• Expand training capacity for behavioral health professions.• Provide financial support to existing and future behavioral health professionals.	<ul style="list-style-type: none">• Funded UC Irvine Train New Trainers Primary Care Psychiatry Fellowship• Launched psychiatry capacity expansion grant funding application• Launched BH workforce pipeline grant funding application• Completed Peer Personnel expansion grant funding cycle.• Initiated SUD stakeholder engagement	<p>Four primary SUD Workforce investment areas planned for SUD workforce in the coming year:</p> <ol style="list-style-type: none">1. SUD Earn & Learn program grant opportunity2. SUD training for non-provider adults such as CBO employees3. Financial support for SUD professionals to get certified4. SUD training for existing health care providers.
Total Funding	Upcoming milestones	
<ul style="list-style-type: none">• \$440M	<ul style="list-style-type: none">• Aug 2022: Launch social work educational capacity expansion grant funding application and finalize plan for social work stipends.• Sept - Dec 2022: Finalize program design for SUD and justice/system-involved youth workstreams.• Dec 2022: Launch first SUD grant funding application.	

Source: CYBHI, HCAI



BH Coach Workforce (HCAI)

As of July 13, 2022

Workstream objectives	Accomplishments since March 2022	Detail: Stakeholder Workshops and Interviews
<ul style="list-style-type: none">• Create a BH Coach workforce to fill unmet behavioral health needs for children and youth• Complement and support the existing behavioral health workforce• Develop the behavioral health career ladder leading to masters level and licensed professions	<ul style="list-style-type: none">• Prepared preliminary summary of potential design options for BH coach role• Conducted multiple rounds of stakeholder workshops and interviews• Developed multi-year implementation outline, with initial focus on potential funding options	<p>HCAI conducted stakeholder workshops and interviews to test potential role design options.</p> <p>Refined the draft BH Coach model including scope of services, training, and certification to incorporate stakeholder input.</p>
Total Funding <ul style="list-style-type: none">• \$360M	Upcoming milestones <ul style="list-style-type: none">• July 2022: Continued stakeholder engagement and model refinement• Aug 2022: BH Coach model release• Sept - Dec 2022: BH Coach training curriculum development	

Source: CYBHI, HCAI



**Statewide All-Payer Fee Schedule and BH
Provider Network – DHCS / DHMC**

**School-linked Capacity, Infrastructure,
and Partnership Grants – DHCS**

**Evidence-Based and Community Defined
Practices – DHCS**

**Amanda Levy (DMHC)
Autumn Boylan (DHCS)**

Statewide All-Payer Fee Schedule and BH Provider Network (DHCS/DMHC)

As of July 13, 2022

Objective

- By January 1, 2024, DHCS, in collaboration with the DHMC, will develop and maintain:
 - A school-linked statewide fee schedule for outpatient MH and SUD services provided to a student, 25 years of age or younger, at or near a school-site.
 - A school-linked statewide provider network at or near school-site BH counselors

Timeline and Milestones

- **2022** - Stakeholder engagement; Define scope of services/benefit for fee schedule
- **2023** - Develop fee schedule rate structure; Ongoing stakeholder engagement
- **2024** - Implement fee schedule

Payer Responsibilities

- Medi-Cal delivery system AND commercial health plans are required to reimburse providers for the predefined services in the fee schedule when provided to a student, 25 years of age or younger, at or near a school-site.

Source: CYBHI, DHCS, DHMC

Statewide All Payer Fee Schedule - Considerations

As of July 13, 2022

Vision

To **leverage the fee schedule as a sustainable funding source** for school-linked BH care, using the fee schedule to:

- **Ensure ALL children and youth have access** to school-based BH services
- Create a **more approachable** billing model for schools and LEAs
- **Ease burdens** related to contracting, rate negotiation, and navigation across delivery systems
- **Reduce uncertainty** around students' coverage

What investments will schools and school-linked providers need to make (e.g., billing and reimbursement, space) to realize the objectives for school-based BH services billing?

1. See [Children and Youth Behavioral Health Initiative Act](#), § 5961.4 (a) (1) – (4);

Source: CYBHI, DHCS, DHMC

Statewide All Payer Fee Schedule – Process Flow

As of July 13, 2022

Source: CYBHI, DHCS, DHMC



School-linked Capacity, Infrastructure, and Partnership Grants (DHCS)

As of July 13, 2022

Workstream objectives	Accomplishments since March 2022	Detail: Potential EBPs / CDPs for inclusion in grant portfolio
<ul style="list-style-type: none">• Issue grants to support BH services to students (0-25) provided by schools, BH providers at or near a school site, school-affiliated CBOs, or school-based health centers• Support readiness to implement statewide all-payer school-linked fee schedule• Grantees will share outcomes along pre-defined impact metrics	<ul style="list-style-type: none">• Completed 8 Listening Tours• Engaged ~350 educational partners and stakeholders (including youth)• Collected insights from stakeholders to inform landscape of BH needs across early education, K – 12, and higher education settings• Stakeholders generated ideas for improving school-linked BH services with grant funding at or near school settings	<p>Stakeholders generated 100+ potential ideas for inclusion in granting programs, and programs were categorized based on setting of care (e.g., K – 12, higher ed) and potential outcomes</p>
Total Funding, \$M <ul style="list-style-type: none">• \$550M	Upcoming milestones <ul style="list-style-type: none">• August – October 2022: Begin roundtable discussions for grant funding rounds and open applications	

Source: CYBHI, DHCS

Evidence-Based and Community Defined Practices (DHCS)

As of July 13, 2022

Workstream objectives	Accomplishments since March 2022	Detail: Potential EBPs / CDPs for inclusion in grant portfolio
<ul style="list-style-type: none">• With input from stakeholders, DHCS will select a limited number of evidence-based practices (EBPs) and community- defined practices (CDPs) to scale throughout the state based on robust evidence for effectiveness, impact on racial equity, and sustainability• Grantees will share standardized data in a statewide BH dashboard	<ul style="list-style-type: none">• 4 Think Tank sessions and 2 public Workgroup meetings completed, engaging ~30 Think Tank members and ~35 Workgroup members• Stakeholders provided input to generate list of potential EBPs and CDPs for consideration in grant portfolio• Stakeholders informed ways to develop and refine potential EBP / CDP selection criteria	<p>Stakeholders provided input to generate list of 90+ potential EBPs / CDPs for consideration, and practices were categorized based on areas of focus and potential outcomes. Think Tank and Workgroup members completed prioritization activity to assess potential EBP / CDP categories for inclusion</p>
Total Funding, \$M <ul style="list-style-type: none">• \$429M	Upcoming milestones <ul style="list-style-type: none">• July 29, 2022: Third public Workgroup meeting at 2pm PT• September 2022: Begin roundtable discussions for grant application Round 1 area of focus	

Source: CYBHI, DHCS

Public Education and Change Campaign - CDPH

Ana Bolaños

Public Education and Change Campaign (CDPH)

As of July 13, 2022

Workstream objectives	Accomplishments since March 2022	Parameters for Meaningful Stakeholder Engagement
<ul style="list-style-type: none"> Develop public education change campaigns for youth that are co-designed by youth Develop culturally specific public education change campaigns which increase behavioral health literacy, and decrease stigma 	<ul style="list-style-type: none"> Convened Brain Trust of national and CA experts on Behavioral Health Set parameters for meaningful stakeholder engagement throughout all aspects of campaign development 	<p>Community led: communities define what behavioral health looks like for them</p> <p>Community shaped: communities inform CDPH on ways this public health education campaigns can help them meet their distinct community behavioral health needs</p>
<p>Total Funding Five Year Funding:</p> <ul style="list-style-type: none"> \$100 Million 	<p>Upcoming milestones</p> <ul style="list-style-type: none"> July 2022: Envision - Interview youth/parents in multiple communities about what behavioral health looks like for them August – September 2022: Understand – Conduct Working and Focus Groups to understand how CDPH’s workstream can help meet their community behavioral health needs September – December 2022: Convene – build youth advisory council to shape core messages of campaign 	

Source: CYBHI, CDPH



ACEs + Toxic Stress Public Awareness Campaign - CA-OSG

Trauma-informed training for educators – CA-OSG

Kristen Kainer-Turner
Janne Olson-Morgan
Matt Schueller

ACEs + Toxic Stress Public Awareness Campaign (CA-OSG)

As of July 13, 2022

Ongoing efforts by OSG:

Proposal evaluation for the \$24M ACEs and Toxic Stress public awareness campaign

- Scheduled to announce intent to award the week of September 23rd
- Scheduled to award the contract the week of October 17th

Develop healthcare provider awareness presentation in advance of campaign launch

- Goal: ensure adequate knowledge about ACEs, educate on accessing the free online ACEs Aware training, and inform on the expanded coverage of ACE screenings with the October 2022 enactment of the ACE Equity ACT
- Intended audience: clinicians
- Presentation delivery: healthcare conferences, meetings and other gatherings that include clinicians

Source: CYBHI, OSG

Trauma-informed training for educators (CA-OSG)

As of July 13, 2022

OSG signed a contract with WestED to develop training models to be used for trauma

A review panel of subject matter experts will be created to generate and respond to training content.

- Targeted members: ~12
- Collective expertise in:
 - Early childhood
 - K-12
 - Trauma informed training for all age groups, including adults
 - Medical/somatic effects of trauma
 - Training of educators
 - National and State of California experience
- First working group session: August
- Primary task: set learning objectives

In addition to the SME review panel, additional interviews will be conducted with experts to inform the departments work.
For comments or feedback contact: OSGInfo@osg.ca.gov

Source: CYBHI, OSG

BH Coach Workforce deep-dive

James Regan
Caryn Rizell

HCAI: BH Coach Workforce in the context of the broader BH workforce work

As of July 13, 2022

Select observations

- **The BH coach role is designed to be an additional opportunity in the ladder**, bridging the gap between roles with minimum to no training to Master's level training
- **The behavioral health career lattice offers flexibility** where supervised BH professionals can move laterally along the lattice or obtain further education and training to step into independent practitioner roles
- **BH coaches can move laterally into peer support and SUD counselor roles (or vice versa) and/or earn further education and training** to advance to other independent practitioner roles

1. Or degree equivalent 2. Includes peer support roles (e.g., peer specialist, family support specialist, recovery coach, peer navigators) 3. Pupil Personnel Services 4. Examples include organizational psychology, behavioral analysis, and others

Source: CYBHI, HCAI

Behavioral Health Virtual Services Platform deep-dive

Autumn Boylan

Behavioral Health Virtual Services (BHVS) Overview

As of July 13, 2022

Vision & Overview

Build and drive adoption of the Behavioral Health Virtual Services (BHVS) for all children, youth and families in California

Support delivery of equitable, appropriate, and timely behavioral health services from prevention to treatment to recovery

Provide an E-Consult capability for pediatric and primary care providers to E-Consult with BH providers

Potential Recipients

- Children and youth
- Parents and caregivers
- Educators
- Pediatricians and primary care physicians (E-Consult)

Key Milestones

Platform launch: **January 1, 2024**

Note: Date subject to change

Source: CYBHI, DHCS

Potential BHVS High Level Goals

As of July 13, 2022

Improve behavioral health (BH) equity by delivering and improving access to culturally relevant resources for historically underrepresented groups and those with higher risk of BH challenges (e.g., BIPOC, LGBTQ+, tribal, rural)

Improve emotional and social wellbeing of children, youth, and families by providing tools to better understand and manage BH, build resilience, and address challenges in healthy, constructive ways

Improve access to BH support by augmenting the current delivery system with free, on-demand, representative, engaging, and confidential virtual services

Improve BH outcomes by connecting children, youth, and families with appropriate and trusted resources (e.g., health plans, county BH, school-linked counselors, community organizations)

Source: CYBHI, DHCS

Potential BH Platform Capabilities

As of July 13, 2022

Capability	Working description
1 Learn about BH	Engaging, age-tailored, searchable, informational material for a range of BH and wellness needs, potentially curated based on community and user input
2 Connect with other youth	Moderated forums, programs & events to connect with other youth and tell your story, provide encouragement, and/or get support
3 Assess & manage your BH	Self-assessments and other activities to help identify and manage BH, find resources and optionally track and share overtime
4 Get on-platform BH care	Free, multi-modal 1:1 session(s) with a BH professional providing live BH services
5 Connect with off-platform services	Self-service tool with live assistance option that helps connect children and youth to off-platform BH service options (potentially including counties, schools, affiliated CBO network, health plan providers)
6 E-Consult	Tool to enable providers and healthcare professionals ability to access, share and search for content, and video chat with BH experts

Source: CYBHI, DHCS

Work to date on BH Platform

As of July 13, 2022

1. Children & Youth Engagement¹

- Focus groups
- Surveys
- Recurring workshops
- Video diaries

2. Expert Engagement²

- Think Tank sessions
- 1:1 interviews
- Small group working sessions

3. Vendor Engagement³

- Market scan
- Informational calls & interviews
- Request For Information (RFI)

1. Defined as ages 0-25

2. Includes behavioral health experts and functional experts (e.g., technology, data security)

3. Includes service vendors, implementation / aggregation vendors

Source: CYBHI, DHCS

1. Children & Youth Engagement Update

As of July 13, 2022

California Youth Empowerment Network Focus Groups

25+

youth focus group participants across 4 youth-facilitated breakout sessions to discuss needs and preferences for the platform

Friday Night Live Youth Summit Platform Focus Group

30+

youth focus group participants across 4 youth-facilitated breakout sessions to discuss needs and preferences for the platform

Source: CYBHI, DHCS

2. Expert Engagement Update: Think Tank Sessions

As of July 13, 2022

- ① April 21st
 ② May 4th
 ③ May 19th
 ④ June 23rd & ⑤ June 24th
 ⑥ July 14th
 ⑦ July 28th
 ⑧ Sept



Kickoff

Align on objectives for the BH Virtual Services and E-Consult Platform workstream and the Think Tank (TT) sessions

Vision for the platform, user journeys, and outcomes

Gather perspective on the experience platform could deliver and discuss potential outcomes and metrics of success

Baseline capabilities for version 1 of the Platform

Gather input on potential platform features and ensure capabilities are comprehensive, accessible, and driving equity

Deep-dive on platform capabilities

Gather input on on-platform capabilities and connecting with off-platform tools

Deep-dive on platform capabilities (continued)

Gather input on self-service tools

Factors to 'operationalize' version 1 of the Platform

Identify enablers which could support bringing the future state journey to life

Synthesis

Regroup and readout of next steps

Source: CYBHI, DHCS

3. Vendor Engagement Update: Request For Information (RFI) for BH Virtual Services and E-Consult Platform

As of July 13, 2022

RFI GOALS AND QUESTIONS DEFINED BY DHCS

The purpose of the RFI is to **inform design, development and launch of the Behavioral Health Virtual Services (BHVS)**. The insights gained will be used to refine solution scope and schedule, and to establish a timeline for launch

The RFI will also provide **understanding of vendors and their services**, as well as any product (e.g., tech), operational (e.g. workforce), and implementation (e.g., change management) solutions they offer

We are seeking to learn about **‘best in class’ solutions** and/or **comprehensive solutions** (e.g., offers multiple capabilities and integration services), **approach to scale** (e.g., to a large user base), potential **integration and timeline** considerations, and **successful examples** of solutions being customized and implemented

Link to RFI: https://www.dhcs.ca.gov/provgovpart/rfa_rfp/Pages/CDcybhiHOME.aspx

Source: CYBHI, DHCS, RFI 22-011

3. RFI Question Types

As of July 13, 2022

RFI GOALS AND QUESTIONS DEFINED BY DHCS

Vendor profile

- **General background** (e.g., mission, size, user base)
- **Public sector experience** (e.g., references)
- **Ability to scale** (e.g., technical)

Capability – specific

- **Use cases** (e.g., on-platform care)
- **Technical solution** (e.g., accessible via API)

Cross-capability

- **Breadth of services network** (e.g., schools, CBOs)
- **Implementation partners** (e.g., SI partner)
- **Data & security** protocols and support systems (e.g., certifications, user customizability, storage)
- **Marketing and outreach** to engage youth
- **Customizable/tailored content** to youth

Cost

- **Cost model** by component parts (if applicable)
- **Pricing of provided services** (build, maintenance)

Vendors with **relevant capabilities** (including integration experience) **and/or relevant experience** (e.g., children and youth, partnerships with community organizations) are encouraged to participate

Source: CYBHI, DHCS, RFI 22-011

Insights from stakeholder engagements (1/3)

As of July 13, 2022

Theme: Trust and Safety

Stakeholder insights



Anonymity could help create a **safe atmosphere** and foster **trust** between users and the platform



Certain features from social media, such as **likes and unmoderated posts**, could become a **source of stress**



The word “**government**” could foster **distrust** for the platform, particular among **youths in foster care**

Potential platform features / characteristics

Guest account option to receive care **without having to create an account** or share sensitive information

Hidden mode which could **disguise the platform** as a generic app (e.g., calculator) if others obtain unwanted access to a user’s phone

Connecting with other youth through **pre-moderated forums** which could foster safe and positive conversations

Branding the platform as a **public health initiative** could foster **trust**

Source: Friday Night Live Youth Summit on 6/17/22 and 6/19/22, CAYEN TAY days at the capital focus groups on June 7, 2022, Think Tank Sessions on June 23-24, 2022

Insights from stakeholder engagements (2/3)

As of July 13, 2022

Theme: User adoption and engagement

Stakeholder insights



Accessibility and easy-of use could be key drivers of children and youth platform adoption



Personalization of resources and services could make users more likely to **use** and **return** to the platform



Timely care, even if **simple**, could be an important driver of platform usage- youth shared they would only wait **3-10 minutes** to talk to someone

Potential platform features / characteristics

Minimalistic and organized interface could allow for **ease of use**

Pre-installation of the platform **on school devices** could reduce barriers to access (e.g., lack of devices, not wanting to download a new app, lack of storage space)

Mood tracking over time could allow users to reflect and track progress

Personalized resources based on previous platform usage data

Making proper use of anonymized user metrics may provide quick insights to drive engagement and retention

Games, music, videos, and puzzles that could **quickly** calm users and provide distraction from negative thoughts

On-demand support with **waiting times** and option to **schedule** could create **transparency** and set clear expectations

Source: Friday Night Live Youth Summit on 6/17/22 and 6/19/22, CAYEN TAY days at the capital focus groups on June 7, 2022, Think Tank Sessions on June 23-24, 2022

Insights from stakeholder engagements (3/3)

As of July 13, 2022

Theme: Operationalizing on-platform and off-platform care

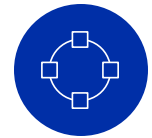
Stakeholder insights



Fostering **authentic relationships** could increase user engagement and impact of services provided

Potential platform features / characteristics

Staffing a workforce that is heavily comprised of similar profiles (i.e., peers) could facilitate stronger connections through common lived experiences



Building a network of off-platform organizations may be operationally intensive and require planning well in advance of expected launch date

Partnering with schools and community-based organizations could allow platform to effectively reach diverse groups of youth across California.

Seeking integrations with existing communication tools / platforms used by organizations (e.g., schools) could efficiently scale this capability in early stages

Reflecting community in design of platform builds trusts (e.g., services provided in dominant language of local population)

Source: Friday Night Live Youth Summit on 6/17/22 and 6/19/22, CAYEN TAY days at the capital focus groups on June 7, 2022, Think Tank Sessions on June 23-24, 2022

Recap: Potential BH Platform Capabilities

As of July 13, 2022

 Example user journeys to follow

Capability	Working description
1 Learn about BH	Engaging, age-tailored, searchable, informational material for a range of BH and wellness needs, potentially curated based on community and user input
2 Connect with other youth	Moderated forums, programs & events to connect with other youth and tell your story, provide encouragement, and/or get support
3 Assess & manage your BH	Self-assessments and other activities to help identify and manage BH, find resources and optionally track and share overtime
4 Get on-platform BH care	Free, multi-modal 1:1 session(s) with a BH professional providing live BH services
5 Connect with off-platform services	Self-service tool with live assistance option that helps connect children and youth to off-platform BH service options (potentially including counties, schools, affiliated CBO network, health plan providers)
6 E-Consult	Tool to enable providers and healthcare professionals' ability to access, share and search for content, and video chat with BH experts

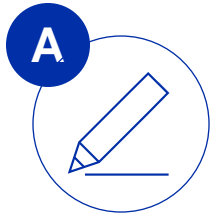
Source: CYBHI, DHCS

Example: Potential reimagined experience for on-platform care

As of July 13, 2022

ILLUSTRATIVE

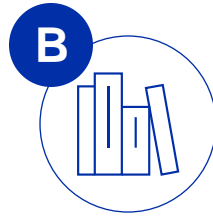
NON-EXHAUSTIVE



A

Assess need for support & care

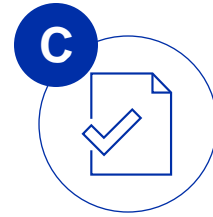
Take a quick, simple assessment to reflect on and understand feelings before speaking to someone and preserve anonymity



B

Identify support & care options

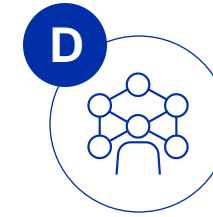
Explore support options through a personalized list of resources, navigation directory, and chat support with an option to create a profile



C

Choose support & provider

Filter on specific support and preferences (e.g., counselor/peer with a similar background) and type of connection (e.g., text/chat, phone, video)



D

Recieve & sustain support

Connect with a specific counselor on the platform for free, short-term counseling. Set up an optional profile to stay in touch

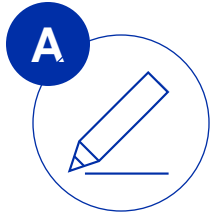
Source: CYBHI, DHCS

Example: Potential reimagined experience for connection to off-platform services

As of July 13, 2022

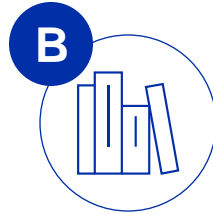
ILLUSTRATIVE

NON-EXHAUSTIVE



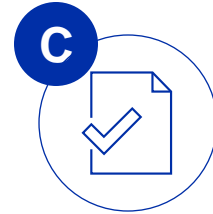
A Assess need for support & care

Take a quick and simple self assessment to help reflect on and understand feelings without speaking to someone, and preserving anonymity



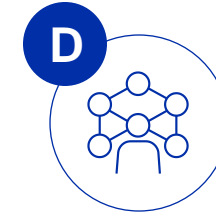
B Identify support & care options

Based on input, explore in-person support options through a geography-based directory and chat support with an AI chatbot or navigator



C Choose support & provider

Filter and narrow in on specific support with a specialist, based on preferences (e.g., location, insurance coverage). Connect to off-platform provider for an introductory call



D Recieve & sustain support

Facilitate connection with therapist in-person after proper checks have been done.

Source: CYBHI, DHCS

Q&A

As of July 13, 2022

CYBHI contacts and resources

- To provide input on initiative-wide topics or sign up to receive regular updates about the CYBHI, please email CYBHI@chhs.ca.gov
- To engage on workstream-specific topics, please use the following contact information and resources:
 - Department of Health Care Services:
 - Contact information for questions/feedback: CYBHI@dhcs.ca.gov
 - Children & Youth Behavioral Health Initiative [Webpage](#)
 - Student Behavioral Health Incentive Program (SBHIP) [Webpage](#)
 - Behavioral Health Continuum Infrastructure Program (BHCIP) [Webpage](#)
 - CalHOPE Student Support [Webpage](#)
 - Department of Health Care Access and Information (HCAI): CYBHI@hcai.ca.gov
 - Department of Managed Health Care: CYBHI@dmhc.ca.gov
 - California Department of Public Health: CYBHI@cdph.ca.gov
 - Office of the California Surgeon General: OSGinfo@osg.ca.gov

Source: California Health and Human Services Agency

