



California's Children and Youth Behavioral Health Initiative

Quarterly Public Webinar
October 20, 2022



Agenda for CYBHI Public Webinar October 20, 2022

As of October 18, 2022

| Topic | Time | Sub-topics |
|------------------------------------|-----------|---|
| Welcome | 2:00-2:05 | <ul style="list-style-type: none">• Welcome from Melissa Stafford Jones (CalHHS) |
| Key Initiative-Wide Updates | 2:05-2:30 | <ul style="list-style-type: none">• CalHHS |
| Workstream Updates | 2:30-3:20 | <ul style="list-style-type: none">• Department of Health Care Services (DHCS) and Department of Managed Health Care (DMHC)• Department of Health Care Access and Information (HCAI)• California Department of Public Health (CDPH)• Office of the California Surgeon General (OSG) |
| Workstream deep-dives | 3:20-3:50 | <ul style="list-style-type: none">• Evidence-Based Practices/Community-Defined Practices (DHCS)• Trauma Informed Training for Educators (OSG) |
| Q&A | 3:50-4:00 | |

Source: California Health and Human Services Agency

Welcome and introductions

The Children and Youth Behavioral Health Initiative (CYBHI)

California's Youth Need Support

The State of California recognizes the scale and urgency of mental, emotional and behavioral health issues among young people and has responded with historic investments. The U.S. Surgeon General has said **we're facing a youth mental health crisis**.

Mental health issues are now the **leading cause of hospitalization** for children under 18 in California.¹

The rate of suicide among Black youth in California **doubled** between 2014 and 2020.²

One in three California 7th and 9th graders, and **nearly half** of 11th graders experienced chronic sadness.³

66% of LGBT youth reported feeling so sad or hopeless that they **stopped doing some usual activities**.⁴

Prevention and Early Intervention are Critical

The CYBHI aims to make the **strengthening of preventive measures and early intervention** a core pillar of its approach to systems transformation and to ensure a continuum of care.

Of all lifetime cases of diagnosable mental illnesses, **half begin by age 14**, and **75% begin by age 24**.⁵

Early detection of mental health concerns leads to **improved academic achievement** and **reduced disruptions at school**.⁶

50% of youth in the juvenile justice system have mental health needs.⁷

Integrating **behavioral health care** with primary care leads to a significant reduction in children's behavioral problems and anxiety.⁸

Governor's Master Plan for Kids Mental Health

Governor Newsom Announced Master Plan for Kids' Mental Health August 18, 2022

- \$4.7B so every Californian aged 0-25 has increased access to mental health and substance use supports
- Whole Child, “All of the Above” Approach
- Multi-year, fundamental overhaul to invest in and build needed system infrastructure
- CYBHI at the Core

Other investments and initiatives in California being implemented in coordination and collaboration:

- \$4.1B on a community schools' strategy to connect kids and families to essential services including health screenings, meals and more, as well as expanded learning opportunities
- \$5B on a Medi-Cal CalAIM initiative to better integrate health and behavioral health services for low-income kids and improve child health outcomes, including prevention
- \$1.4B to build the healthcare workforce that expands our capacity to meet the health needs of Californians, including children and families.
- State budget investments in school-based behavioral health workforce, such as school counselors

What is the CYBHI?

The **Children and Youth Behavioral Health Initiative (CYBHI)** is a historic, five-year, \$4.4 billion initiative to reimagine and transform the way California supports children, youth and families.

The initiative focuses on:

- Promoting mental, emotional and behavioral health and well-being.
- Prevention and providing services to support children and youth well-being.
- Providing services, support and screening to ALL children and youth for emerging and existing needs connected to mental, emotional and behavioral health and substance use
- Addressing inequities for groups disproportionately impacted by mental health challenges and that face the greatest systemic barriers to wellbeing

Built on a foundation of **equity** and **accessibility**, the CYBHI is designed to **meet young people and families where they are** to create an ecosystem that can help them **when, where and in the way they need it most.**

Key Initiative-wide updates

CYBHI Initiative-Level Recent Progress Highlights

- **Advance equity:** Established Equity Working Group with 39 members; conducted first full group meeting August 17 (presentation materials); Most recent meeting October 19th
- **Center on children, youth, and families:** Completed 37+ focus groups and series of community engagement sessions across the state; Developing paper to synthesize feedback and insights from youth, families and communities
- **Health-Education Collaboration:** Ongoing collaboration of CalHHS, SBE, CDE on state level issues, including inter-related initiatives of CYBHI, community schools, ELOP and UPK, and issues such as HIPPA/FERPA; stakeholder engagement with health and education partners.
- **Reimagine the ecosystem:** Completed phase one research, including 100+ SME interviews, and developing final working paper on key functionalities of reimagined ecosystem, including connections to CYBHI and other key state initiatives
- **Improve awareness:** Published Back-to-School Mental Health Resources and September Suicide Prevention Month Resources for youth, parents, families, and educators
- **Embed accountability:** Released Request for Proposal for CYBHI Evaluation Consulting Services, with the submission deadline on September 30, 2022 and contract award announcement planned this fall

Source: California Health and Human Services Agency

Our Focus on Equity

- **Targeted universalism approach** that sets universal goals combined with distinct strategies to address the systemic issues and needs of groups disproportionately impacted.
- **Center and advance equity** to better support children, youth and families that face the greatest systemic barriers to wellness and are disproportionately impacted by behavioral health issues, including children and youth of color, LGBTQ+ youth, low-income families, and children and youth from underserved communities.
- **Extensive and meaningful community engagement** with children, youth and families across the state to guide the initiative from design to evaluation.
- **Equity Working Group**: Advising the initiative on an equity framework to ensure equity is embedded into the CYBHI's process, design, planning, and implementation of the overall approach, as well as use of data to advance equity.
- **Outcome goals and evaluation**: Children, youth and families' insights are helping define the initiative's outcome goals and will be integral to its evaluation. Outcomes goals to address disparities and evaluation, including evaluation processes, that center equity.

CYBHI outcome measures identified by CalHHS



Population outcomes

1. Increase in overall **mental well-being** for children and youth
2. Decrease in **mental health challenges**
3. Decrease in rates of **suicidal ideation** for vulnerable populations
4. Decrease in **emergency room visits and hospitalizations** for children and youth with mental health related conditions
5. Decrease in rates of **school absenteeism**
6. Decrease in **stigmatizing attitudes** toward behavioral health
7. Improvement of **experience with BH services and supports** for children, youth, and families



System performance measures

8. Increase in **knowledge of available BH supports and services**
9. Increase in children and youth who **received mental health and substance use services and supports**
10. Increase in **diversity of BH professionals**, especially in underserved communities
11. Increase in **preventive services and family supports** for children ages 0-5
12. Increase in **substance use prevention strategies** specifically for younger children and adolescents
13. Decrease in **barriers to care** for children and youth from underserved communities
14. Increase in **cross-sector collaboration** and adoption of continuous improvement approaches
15. Increase in utilization of the **school-linked statewide fee schedule**

Source: California Health and Human Services Agency

What do California's Young People Want?

Some of things of things we've heard:

- **Feel supported daily** with deeper connections in their communities.
- **Easy access to affordable** mental health support when and where they need it.
- Support from **people who look like them**, who **can understand and relate to their experiences** and **speak their language**.
- **More resources, tools and services** to proactively support their mental health and well-being before being in crisis.

“When a therapist finally shared or understood my identities, it was so much less explanation. I could be very straight to the point...about what I’m talking about without fear or judgment.” – Youth participant in a recent focus group.

What do California's Young People Want? *(cont.)*

- **Unconditional support from adults** who check in without an agenda, really listen, and act on what they hear.
- Educational tools that can **empower them to make their own informed decisions.**
- **Safe spaces** where they can **heal, find joy** and **be their authentic selves.**
- **Family support** that also addresses non-clinical issues, such as housing, basic needs and social support.
- **Access to extracurricular activities** like school clubs, community-building activities, green spaces, art, yoga, or music.

Incorporating Youth and Family Experience into CYBHI

Non-Clinical Services and Supports Identified as a Focus and Priority by Youth

- **Multiple types of non-clinical supports and services** are being studied to potentially include in a grants program to scale evidence-based and community-defined practices, with a focus on prevention and equity, as well as educational, informational and other pre-clinical supports through the virtual services platform.
- **Increased mindfulness, resilience, and wellbeing supports for students** through new near-term funding to schools.
- **Role of new Behavioral Health Coaches** includes a focus on non-clinical supports, including wellness promotion and education, and an emphasis on BH coaches with lived experience from diverse communities.
- **Exploring how Peer Supports** can be incorporated into the CYBHI with recent \$10M budget investment on youth peer training, and possible use of peers on virtual services platform.
- **Emphasis on building a more diverse workforce** with feedback from youth that seeking to talk and work with people that understand their community, lived experience, look like them and speak their language.
- **Initial and ongoing engagement** with youth and parents disproportionately impacted by behavioral health challenges to shape a BH literacy and awareness campaign.
- **Supporting teachers so they can be the caring adult students are asking for:** Developing trauma-informed training for teachers and other school staff to recognize and understand how behaviors can stem from trauma, provide skills for creating safe learning environments, and understand how caring relationships with students can help buffer toxic stress. Supporting schools statewide to strengthen social emotional learning.
- **Providing Information, Resources and Tools for Parents:** Office of the Surgeon General is re-launching its Parent Stress Toolkit, will incorporate information for parents on supporting children's wellbeing with specifics for disproportionately impacted groups in Toxic Stress and ACES Aware campaign. Investments in parent supports and new parent video resources under development.
- **Exploring increasing access to parks and the outdoors** by sharing what CYBHI has heard from youth about the importance of this issue with state level efforts to increase equitable access to state and local parks.

Workstreams

| Workforce Training and Capacity | | Behavioral Health Ecosystem Infrastructure | | Coverage Architecture | Public Awareness | |
|---|--|--|---|---|--|--|
| Behavioral Health Counselor and Coach Workforce (HCAI) | CalHOPE Student Services (DHCS) | School-Linked Partnership and Capacity Grants (DHCS) | Behavioral Health Continuum Infrastructure Program (DHCS) | Enhanced Medi-Cal Benefits – Dyadic Services (DHCS) | Public Education and Change Campaigns (CDPH) | |
| Broad Behavioral Health Workforce Capacity (HCAI) | Trauma-informed Training for Educators (OSG) | Student Behavioral Health Incentive Program (DHCS) | | | | |
| Behavioral Health Virtual Services Platform (DHCS) | | | | | | |
| Healthcare Provider Training and e-Consult (DHCS) | | | | | | |
| Scaling Evidence-Based and Community-Defined Practices (DHCS) | | | | Statewide All-Payer Fee Schedule for School-Linked Behavioral Health Services (DHCS/DMHC) | ACEs and Toxic Stress Awareness Campaign (OSG) | |

Additional resources and updates

Quarterly Public Webinar, October 20th, 2 pm – 4 pm, Recording and Slides will be Posted

Quarterly Public Quarterly Webinar on July 15, 2022:

- [presentation materials](#)
- [video recording](#)

September 2022 Stakeholder Update

August 2022 Stakeholder update

CYBHI 101 Slide Deck

1 Focused on initiative-wide topics; additional workstream-specific children, youth, and family engagement includes multiple focus groups, interviews, design sessions, and other engagement activities

Source: California Health and Human Services Agency

Department of Managed Health Care, Department of Health Care Services

Amanda Levy (DMHC)

Autumn Boylan (DHCS)

Wellness & Mindfulness grants (1/2)

Implement SEL, Mindfulness and Wellness Programming in Schools:

Support schools, districts, and COEs with the adoption of evidence-based tools, resources, and programs that support equitable access to mental health and wellness for students, families and staff. We propose to prioritize this programming support to schools with high numbers of American Indians, refugees, and English Learners.



Wellness & Mindfulness grants (2/2)

1. Collect Data for Continuous Improvement
2. Increase Staff for Success and Sustainability
3. Certify and Recognize a Workforce of SEL Educators and Ambassadors
4. Launch and Sustain Specialized Communities of Practice (CoPs)
5. Synthesize Scientific Discoveries for Deep Educator Engagement and Application
6. Convene an SEL/Wellness Conference
7. Replicate and Adapt the “Schools as Centers of Wellness” Partnership Model



Behavioral Health (BH) Virtual Services and E-Consult Platform – Stakeholder engagement

AS OF 9/14/2022

| | Current Engagement | Ideation | Validation | Implementation Planning |
|---|--|--|--|---|
| Behavioral Health Virtual Services | <ul style="list-style-type: none"> • 8 Think Tanks¹ • ~250 stakeholders | <ul style="list-style-type: none"> • Parent Caregiver Workgroup² (Sept) – Gather input on how virtual services can better serve children ages 0 - 12 • Program Evaluation Workgroup² (Sept) - Gather input on data and metrics to be collected through virtual services to improve program delivery and outcomes | <ul style="list-style-type: none"> • Youth Advisory Board Working Sessions (Sept-Oct) – testing prototypes • Focus groups³ (Sept-Oct) – Solicit feedback from focus populations | <ul style="list-style-type: none"> • Think Tank 8 (Oct) – Synthesize leading implementation approaches with feedback obtained through earlier working sessions and focus groups |

Source: DHCS leadership guidance, OSP meetings in June-September, stakeholder engagements

Some stakeholder engagement meetings served multiple workstreams and therefore total stakeholders engaged are not a sum of stakeholders across workstreams

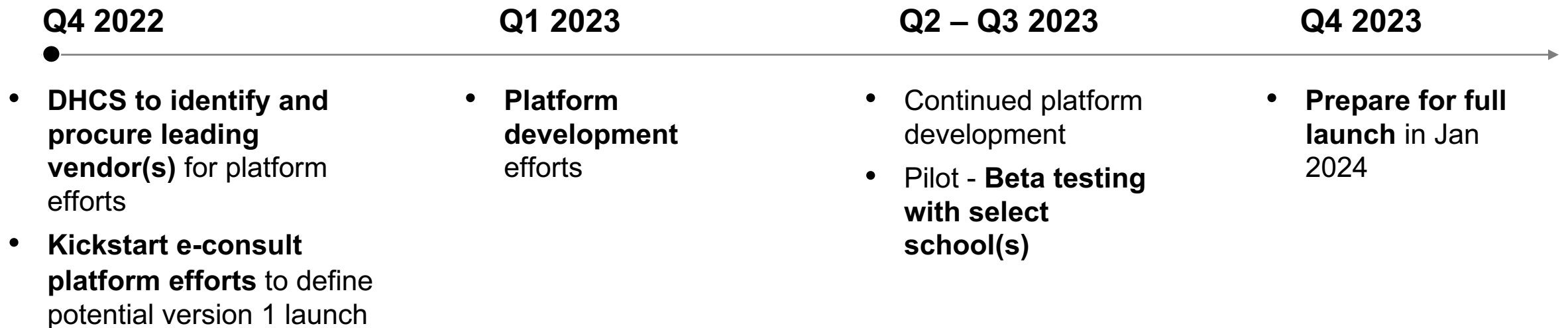
1. Think Tanks are a set of workshops with experts to co-design workstream outputs.

2. Workgroups are set of workshops with experts and public representatives to review and refine workstream outputs.

3. Focus groups are small group interviews to gather inputs from participants.

Behavioral Health (BH) Virtual Services and E-Consult Platform – Timeline updates

AS OF 10/4/2022



Source: Department of Health Care Services, OSP leadership meetings June-August, 2022

Statewide All-Payer Fee Schedule - Requirements

1. **Develop and maintain a school-linked statewide fee schedule for outpatient mental health or substance use disorder** provided to a student 25 years of age or younger at a school site
2. **Develop and maintain a school-linked statewide provider network** of school site behavioral health counselors
3. **Require each commercial health plan AND the Medi-Cal managed care plans and Medi-Cal behavioral health delivery system, as applicable, to reimburse providers** of medically necessary outpatient mental health or substance use disorder treatment provided at, or near, a school site to a student (age 25 or younger) who is an enrollee of the plan or delivery system

Providers of medically necessary school-site services will be reimbursed, at a minimum, at the fee schedule rate regardless of network provider status (e.g., commercial plan coverage)

Services provided as part of the fee schedule shall **not be subject to copayment, coinsurance, deductible, or any other form of cost sharing²**

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

2. See Health and Safety Code § 1374.722

Statewide All-Payer Fee Schedule - Workgroup

- On October 24th, DHCS/DMHC will launch a CYBHI Fee Schedule Workgroup
- The purpose of the workgroup will be to engage stakeholders and inform the development of guidance to address policy, operational and implementation considerations for the CYBHI Fee Schedule
- Workgroup members will include:
 - Education partners, including state leadership/associations and LEA representatives
 - Commercial health plans
 - Medi-Cal Managed Care Plans
 - County Behavioral Health Departments
 - Providers
 - Community Based Organizations

Department of Health Care Access and Information

Caryn Rizell (HCAI)

Broad Behavioral Health Workforce Capacity (HCAI)

As of October 20, 2022

Accomplishments since July 2022

- **Aug 2022:** Launched Social Work Education Capacity Expansion grant funding application
- **Aug – Oct 2022:** Awarded three cohorts of behavioral health loan repayments and scholarships
- **Sep 2022:** Awarded Health Professions Pathway Program grants
- **Sep 2022:** Launched Community-Based Organizations Behavioral Health Workforce grant funding application
- **Oct 2022:** Awarding Psychiatry Education Capacity Expansion grants

Ongoing and upcoming work

- **Dec 2022:** Launch first Substance Use Disorder grant funding application
- **Dec 2022:** Begin developing substance use disorder training for non-behavioral health professionals working with children and youth
- **Jan 2023:** Award fourth cohort of behavioral health loan repayments and scholarships
- **2023:** Begin social work stipends program

Behavioral Health Coach Workforce (HCAI)

As of October 20, 2022

Accomplishments since July 2022

- **Aug 2022:** Conducted final round of workgroup sessions to refine BH Coach model
- **Sep 2022:** Public release of BH Coach model (posted on [HCAI.ca.gov](https://hcai.ca.gov))
- **Sep 2022:** Published first BH Coach newsletter

Ongoing and upcoming work

- **Continuing** engagement with youth/families for feedback on proposed titles
- **Continuing** work with potential development partners for BH Coach training programs
- **Continuing** discussions on ensuring sustainable funding for the BH Coach

Upcoming engagement opportunities

- **Oct 25:** First quarterly BH Coach informational webinar
- **Monthly:** BH Coach newsletter
- If you would like to be included in these engagements, please email CYBHI@hcai.ca.gov

Stakeholder Feedback Implementation (HCAI)

Stakeholder Engagement Summary

BH Coaches:

- 50+ interviews with state government partners, industry leaders, and existing BH programs nationwide
- Refined role design through three rounds of stakeholder workshop sessions
- Ongoing: Monthly BH Coach newsletters and quarterly BH Coach informational webinars

Broad BH Workforce:

- Ongoing interviews and collaborative working sessions with SMEs in the Justice, Foster, and Unhoused systems and within the area of Substance Use Disorder

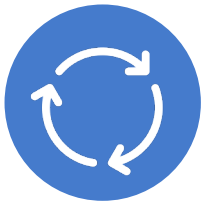
Feedback Implementation Examples

- Developed initial BH Coach model with the input of stakeholder workshops and interviews including healthcare workforce, training providers, education workforce, and parents/youth
- Designed BH Coach role to respond to youth and family feedback that there is a need for holistic wellness supports
- Refined BH Coach educational and on-site training requirements based on stakeholder input
- Refined BH Coach scope of services to address feedback from clinicians, educators, youth and families
- Official BH Coach role title is being chosen by youth and family feedback
- Feedback informs effective program design for a variety of workstreams such as Social Work, Substance Use Disorder, and Justice and System Involved Youth

HCAI Program Highlight: Health Professions Pathways Program



- **Purpose: to recruit and support students from underrepresented regions and backgrounds to pursue health careers**
- HPPP awards help organizations build and expand:
 - Pipeline programs
 - Summer internships
 - Post undergraduate fellowships

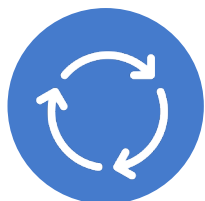


- **Cycle 1 (awarded Sep 2022):** 20 awards, all with efforts to support behavioral health, totaling \$40.8M
- **Cycle 2:** scheduled to open in Spring 2023

HCAI Program Highlight: Behavioral Health Loan Repayments and Scholarships



- **Purpose: to increase the number of behavioral health professionals providing direct care in California's health profession shortage areas**
- Program is open through end of October



- **Cohort 1 (awarded Aug 2022):** 168 awards totaling \$4.5M
- **Cohort 2 (awarded Sep 2022):** 115 awards totaling \$3.25M
- **Cohort 3 (awarded Oct 2022):** 85 awards totaling \$2.5M
- **Cohort 4 (to be awarded in Jan 2023)**

California Department of Public Health

Ana Bolaños (CDPH)

CDPH CYBHI Overview

Comprehensive Culturally and Linguistically appropriate Public Education and Change Campaigns co-designed for and by youth to raise behavioral health literacy for youth, caregivers, and their communities in California.

Five Priority Populations:

- Asian and Pacific Islander
 - Black and African American
 - Native American,
 - Latinx,
 - LGBTQIA+
- With special considerations made to **transition-age youth, persons with disabilities, justice and foster care involved youth** and those living in **rural areas**.



CDPH CYBHI Goals – Promote Awareness

- Create General Public Education and Change Campaign(s) that promotes awareness without stigma towards topics related to behavioral health (including mental health, substance use prevention and wellness) and guide individuals in need towards support services

CDPH CYBHI Goals – Stakeholder Engagement

- Partner with community-based organizations (CBOs) and youth to co-create culturally, linguistically, and age-appropriate specific campaigns aimed at reducing stigma and discrimination around topics around behavioral health, mental health, and wellness.

CDPH CYBHI Goals - Co-Design with Youth

- Partner with youth to co-design culturally, linguistically, and age-appropriate specific awareness campaign(s)

How we are going to meet our goals

Request for Proposal (RFP)

- To produce and deliver a statewide education campaign

Request for Application (RFA)

- To contract with CBOs to implement the campaigns through outreach and engagement

Activities

Landscape Analysis

Completed: Internal and External landscape analyses on BH best practices of successful public education campaigns co-designed with youth



Pre-RFP Stakeholder Engagement

Completed: Outreach to **39** Community Based Organizations (CBOs) **7** Listening Sessions and **5** Introductory Meetings

Ongoing National Expert Consultation

8 Brain Trust Members
9 Meetings Since July 2022

CDPH CYBHI Stakeholder Engagement Summary

12+

Stakeholders engaged
through Introductory
Meetings

40+

Stakeholders will be engaged
through Focus Groups

16+

Stakeholders engaged
through Listening Sessions

6+

Stakeholder Interviews

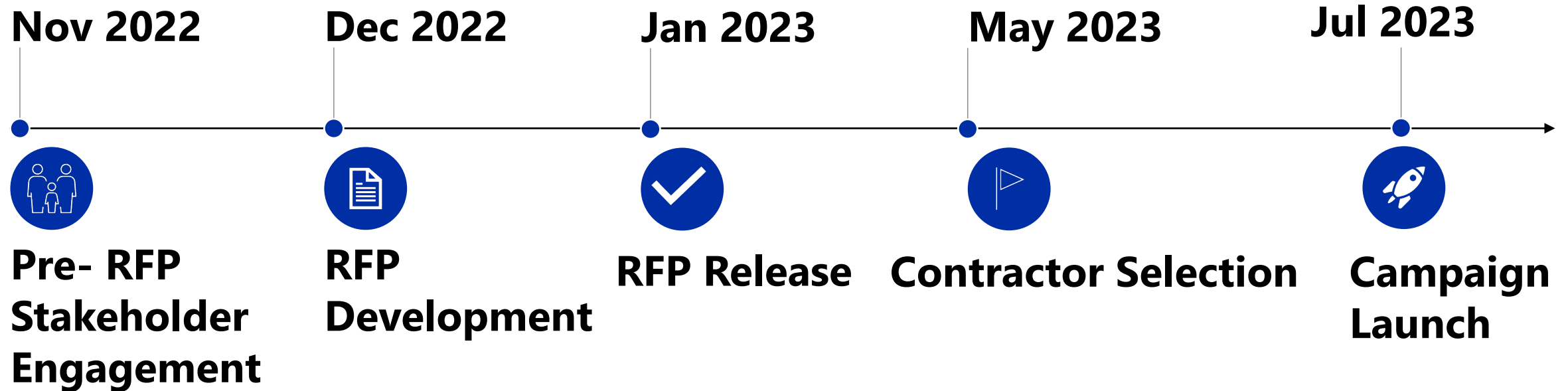
Stakeholder Engagement Insights: Initial Key Themes

| Key theme | User experience driver | Potential user experiences ¹ |
|--|--|--|
| Authentically engaging with youth | <i>Having youth lead their own processes and centering youth voices</i> | <ol style="list-style-type: none">1. "They are experts in their own experience"2. "Be able to have a voice, and express your own feelings about mental health"3. "Should be a reiterative process" |
| Community-Led and Community-Engaged | <i>Communities themselves can be identify what is working and what is not</i> | <ol style="list-style-type: none">1. "We need to be on the back end and the front end of the campaign"2. "We know when a message is for us"3. "We grow our own" |

What's Next?

- Post Listening Sessions
- CDPH CYBHI Webpage
- Role of the Brain Trust
- RFP
- RFA
- RFA Champion

Timeline



Office of the California Surgeon General

Janne Olsen-Morgan

Kristen Kainer

Julie Rooney

ACEs and Toxic Stress Awareness Campaign

Raise awareness of Adverse Childhood Experiences (ACEs) and toxic stress.

CYBHI Focus Area: Public Awareness

Managed by: Office of the California Surgeon General (OSG)

Goals:

- Increase awareness of ACEs and toxic stress, emphasizing that toxic stress is a treatable health condition and there are resources available for screening, treatment and prevention.
- Share practical strategies for how parents and caregivers can support children who are experiencing stress and adversity — by helping them cope in ways that can turn off their stress response systems.
- Primarily target economically disadvantaged, LGBTQ+ and rural communities, communities of color, immigrants, refugee and justice- and welfare-involved youth. Secondary targets include the health care community, educators, legislators and other decision-makers.

Funding: \$24 million

Timeline: Budget year 2022 – 2023 +

Activities (as of 10/4/2022):

- Collaborated with First 5 to ensure alignment across campaigns. (ongoing)
- Joined First 5 focus group message-testing efforts throughout March.

Milestones:

- Late October-early November 2022: Releasing competitive RFP
- January 2023: Solicitation awarded

Stakeholder Engagement:

- Form subject-matter expert workgroup to inform campaign development.
- Engage with partners and clinicians to build awareness of the upcoming ACEs campaign.

Deep dive on Evidence Based and Community-Defined Practices (EBP/CDEP)

Autumn Boylan (DHCS)

EBP/CDEP Stakeholder Engagement To-Date

10 Think Tank and Workgroup sessions hosted between April and October

100+ EBPs and CDEPs generated through stakeholder input

~65 Empaneled Think Tank and Workgroup members

100+ Unique members of the public engaged

Key themes that emerged from stakeholder conversations include...

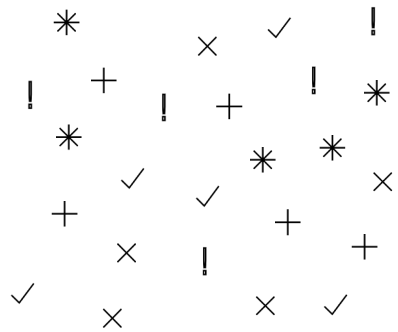
The importance of equity and the need to focus on reducing health disparities through the grant process

An emphasis on the upstream continuum of care including early childhood and prevention and promotion practices

The need for a balanced and holistic approach to grant development, ensuring the portfolio addresses the broad needs of children and youth

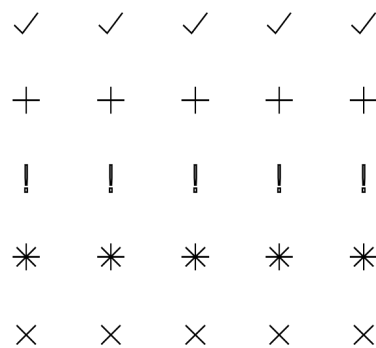
Selection Process for Stakeholder-Suggested EBPs to be Refined into Themed Grant Rounds

Collated



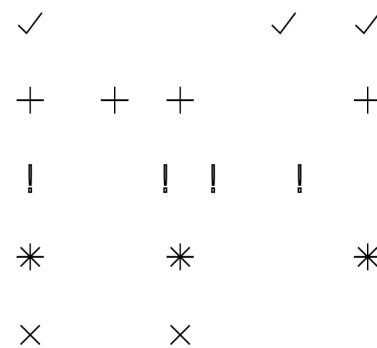
Collated a list of 100+ Workgroup and Think Tank-generated EBPs for potential inclusion

Categorized



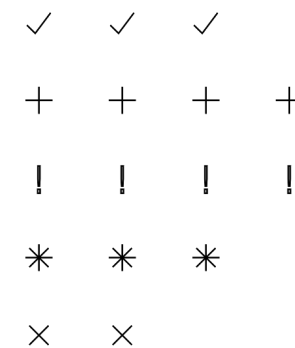
Categorized the EBPs after which Workgroup and Think Tank prioritized key focus areas

Calculated



Calculated scores for each EBP in focus areas based on selection criteria developed by Workgroup and Think Tank

Coalesced



Coalesced EBPs into five themed grant rounds following a holistic review of the portfolio

Covered



Coverage by Medi-Cal and commercial insurance will inform the short list of final EBPs

Stakeholder-informed holistic criteria was used to review the portfolio to ensure the practices addressed the broad needs of children and youth

A holistic portfolio of practices and programs includes the following elements¹...

1. Elements of holistic review not presented in a particular order

Serve a wide age range of children and youth, from 0 - 25

Reflect practices and programs that **address the diverse needs of communities** across CA and aim to reduce BH disparities

Make practices and **programs accessible to caregivers, parents, youth, and children** across various settings

Include infrastructure and approach to equitably scale CDEPs for the populations of focus

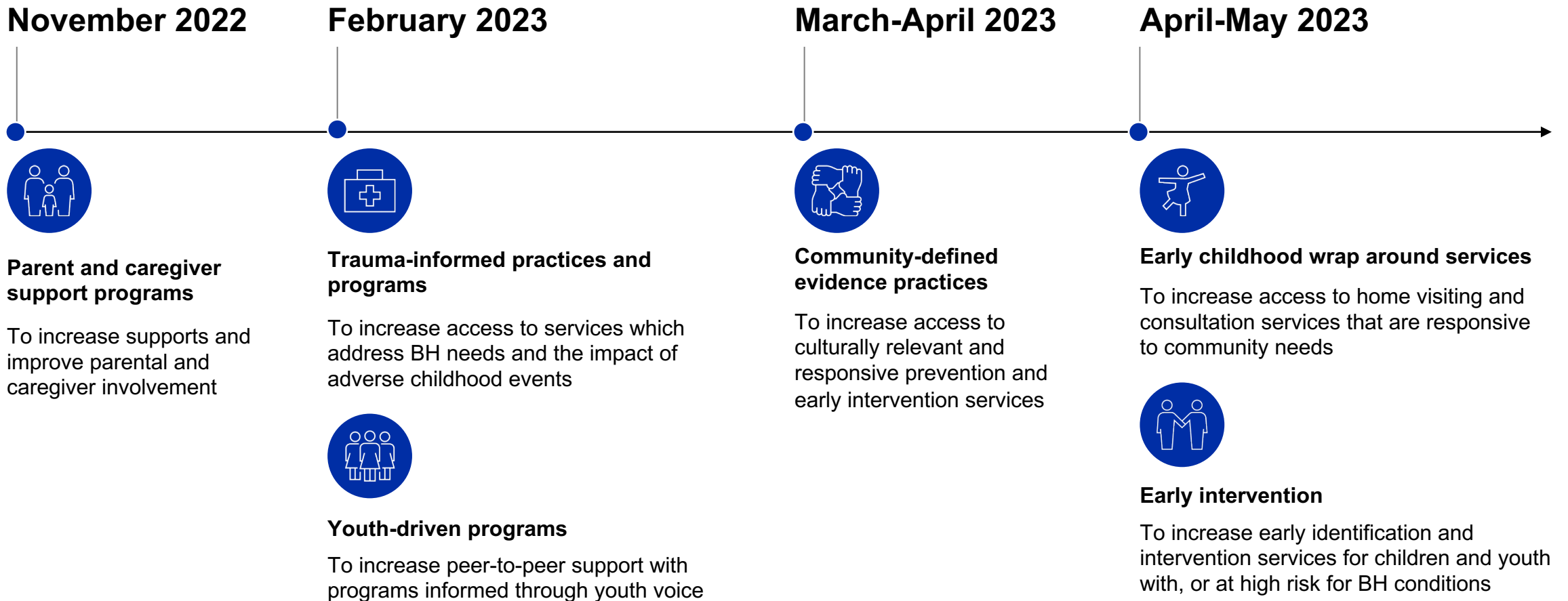
Incorporate practices and programs that **drive near-term outcomes** and those that **drive systemwide change**

Include **innovative practices and programs** and those with a **demonstrated success** for populations of focus

Include practices and programs that **address the areas of greatest need** and with the greatest variability in quality and outcomes

Acknowledge finite, one-time nature of funding in selecting a limited number of practices for scaling

Potential focuses of EBP/CDEP grant funding rounds and grant announcement timing



Round 1: Parent and Caregiver Support and Training

Certain **parenting behaviors can impact child development** and behavioral health¹

20 - 40% Of caregivers in CA report engaging in some type of **parenting behavior that may contribute to adverse outcomes**²

37% Of caregivers reported feeling confident in their **ability to control important things during the pandemic**²

Parent training and support programs are associated with reduction in child hyperactivity, aggression, disruptive behavior, and **improvements in positive parenting practices**, caregiver-child relationship, and caregiver related stress^{3,4}

Given this rationale, the parent and caregiver support grant round is designed to⁵

- **Strengthen positive parenting practices**
- **Promote parent and caregiver wellbeing**
- **Improve emotional and behavioral challenges** commonly experienced in childhood
- **Promote parent and caregiver understanding** of child development
- **Improve caregiver involvement and relationships** with children
- **Increase support for individuals** that may be experiencing **heightened levels of caregiver related stress**

1. California State University 2. Kids Data – Ineffective parenting reports 3. Parenting for Brain 4. The California Evidence-Based Clearing House 5. Input from DHCS OSP leadership, and Think Tank and Workgroup session discussions and follow-up activities

Round 1: Eligible Grant Recipients

Organizations eligible for grant funding include but are not limited to:

- Community-based organizations who provide services to children, youth, and/or families
- Community mental health or behavioral health provider clinics
- Primary care practices and hospitals
- County governments (County BH, public health) and local agencies (e.g., First 5 associations)
- Early learning and care organizations (including childcare and preschool)
- Regional centers (i.e., California centers which provide services to people with developmental disabilities)
- Schools, LEAs, institutions of higher education
- Tribal entities
- Faith-based organizations
- Family resource centers

Round 1: Grant Tracks

| | Description | Illustrative Example |
|----------------|---|--|
| Training | Track 1: This track is designed for <i>individuals</i> seeking access to manualized training and/or certification in a shortlisted EBP/CDEP (or related adaptation). | A school psychologist wants to become certified to provide Cognitive Behavioral Intervention for Trauma in Schools to their students |
| Implementation | Track 2a, Operational Expansion: This track is designed for <i>organizations</i> looking to: <ul style="list-style-type: none">• Expand provision of short-listed EBP/CDEP (or related adaptation) that they currently provide• Scale delivery of a short-listed EBP/CDEP (or adaptation) by training or credentialing more providers | A regional center wants to meet increased demand for parent training services by training more staff in Parent and Child Interaction Therapy for specialized populations (e.g., intellectual development disabilities) |
| | Track 2b, Start-up: This track is designed for <i>organizations</i> that are seeking start-up funds to implement an EBP/CDEP (or related adaptation) that is new to the organization. | A Tribal Nation wants to create a youth drop-in center to better serve 16–25 year-olds who live on the reservation |

Round 1: Example Application Components

Overview

- Description of organization
- Selected track
- Total funding amount requested

Populations of Focus

- Description of the populations of focus served by organization
- Description of the BH challenges faced by populations of focus in area

Proposed Approach

- Goals and measurable objectives for the proposed project
- Implementation approach

Staff and Organizational Experience

- Organizational experience with similar projects
- Partners (if applicable)
- Organizational capabilities

Data Collection & Performance Management

- Organizational experience with data collection
- Examples of reports developed to showcase outcomes

Budget

- Detailed, line-item budget with how grant funds will be used

Round 1: Upcoming Application Milestones

- **Late October / Early November:** Applications open online
- **November:** DHCS hosting a public webinar/office hours to answer application questions
- **Late November / Early December:** Deadline to ask for RFA-related questions/clarifications
- **Mid-December:** Applications due
- **January / February:** DHCS to notify applicants about grant award status

Deep dive on Trauma-Informed Training for Educators

Janne Olsen-Morgan

Kristen Kainer

Julie Rooney

Trauma-Informed Training for Educators

Provide ongoing training to childcare providers, educators and school personnel on trauma-informed care.

CYBHI Focus Area: Workforce Training and Capacity

Managed by: Office of the California Surgeon General (OSG)

Goals:

- Enable early childcare providers, educators, and school personnel to:
 - Recognize & respond to Adverse Childhood Experiences & toxic stress.
 - Respond appropriately. Intervene early.
 - Create safe and supportive learning environments for everyone

Parameters: Funding: \$1 million

- As of August 31 have spent \$159,000

Timeline: Budget year 2022 - 2024

Parameters:

- Voluntary, online training
- Three 2-hr modules for adults serving: 0-5, 5-11, 12-18
- English & Spanish

Activities (as of 10/4/22):

- June 2022: Contract signed w/ WestED
- Aug 2022: First meeting of Expert Review Panel (ERP)
- September 2022: Finalized learning objectives

Forthcoming Milestones:

- November 2022: Second ERP meeting
- Fall-Winter 2022: Design and production begin
- Spring 2023: User testing & technical review
- Summer 2023: Training available!
- Summer 2023-Summer 2024: Evaluation

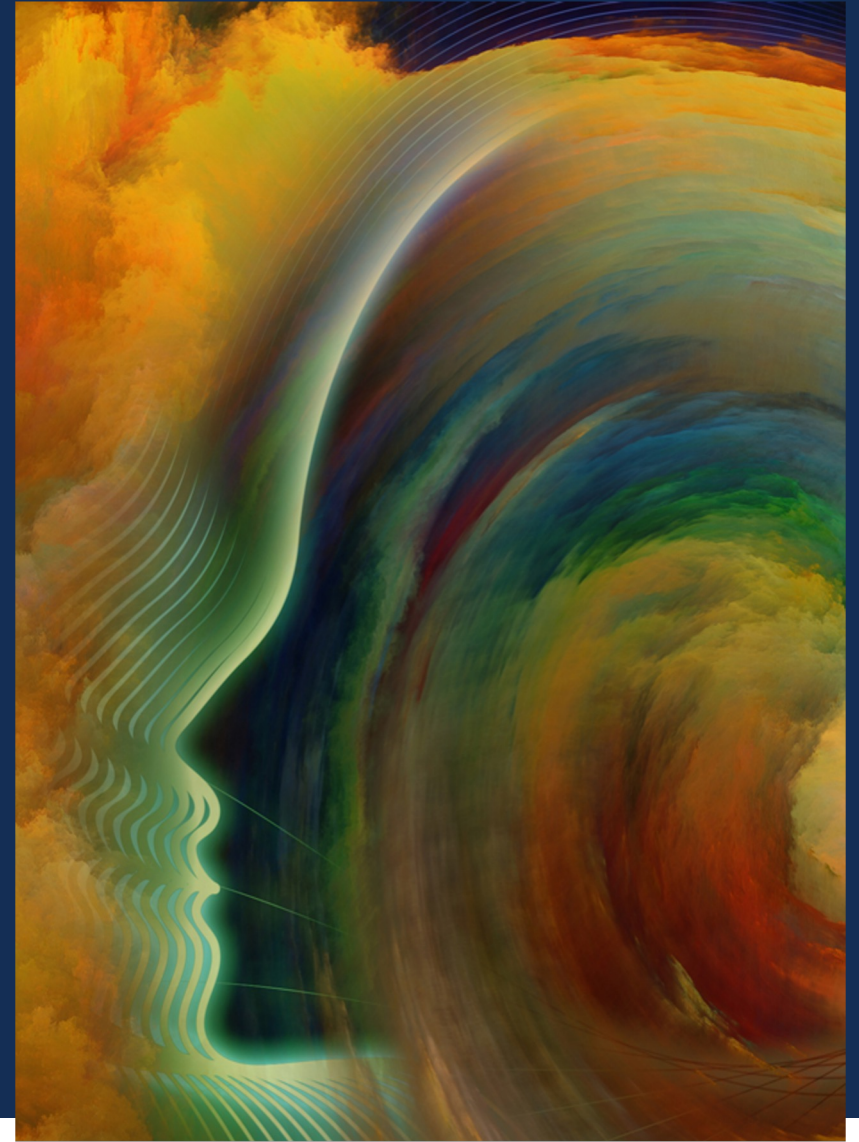
About the Modules

Three online modules of 2 hours each for:

- Early learning and care providers serving **ages 0-5**
- Educators and school personnel serving **ages 5-11**
- Educators and school personnel serving **ages 12-18**

Modules will:

- Be written in easy-to-understand language in both English and Spanish.
- Cover similar concepts with examples, strategies, and practices that vary according to development stage served (0-5, 5-11, and 12-18).
- Include strategies for supporting the well-being of adult care providers, educators and personnel.
- Be free for participants.
- Be self-paced and computer, smartphone, and tablet compatible.



About the Modules

Through participating in the online trauma-informed training module learners will be able to:

- describe foundational concepts related to trauma-informed practice, healing, and resilience;
- develop awareness of the brain's response to stress, its impact on behavior, one's ability to heal and integrate experiences, and the influence of lived experiences and protective factors on mental and physical health and well-being;
- describe the essential role of relationships in social, emotional, and mental well-being; and
- understand the importance of disrupting practices that cause harm and recognize developmentally appropriate and culturally responsive trauma-informed and healing-centered supports and strategies.



About the Modules

As of mid-October, these are our draft lessons

- **Introduction**
- **Lesson 1:** Understanding Your Role in Promoting Resilience and Healing
- **Lesson 2:** Understanding the Individual Experience of Stress and Trauma
- **Lesson 3:** Understanding the Conditions for Health and Well-Being: Relationships, Environments, and Community
- **Lesson 4:** Understanding the Role of Systems in Supporting Well-Being



PARTNERS

The CA-OSG is partnering with other California agencies and organizations as well as an Expert Review Panel to ensure that the training leverages and builds upon existing trainings and best practices in the field and is easily accessible to early learning and care providers, educators and school personnel.

Partners include:

State
agencies

An expert
review panel

WestEd
content
developers
and evaluators

Curriculum
testers and
evaluation
participants



QUESTIONS

For more information, please visit
<https://osg.ca.gov/mentalhealth/>

For questions or to become a
dissemination partner, please contact
OSGInfo@osg.ca.gov
or
OSGTIP@wested.org



Q&A

CYBHI Contacts and Resources

We welcome input on the Children and Youth Behavioral Health Initiative. To provide thoughts or comments or to sign up to receive regular updates, 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 and Youth Behavioral Health Initiative webpage](#)
 - [Student Behavioral Health Incentive Program \(SHIP\) 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