

IMPERIAL COUNTY BEHAVIORAL HEALTH SERVICES

MENTAL HEALTH SERVICES ACT

**THREE YEAR
PROGRAM AND
EXPENDITURE
PLAN
FY 2020-2021
THROUGH
FY 2022-2023**

POSTED APRIL 20, 2020





Executive Summary

Approval by California voters back on January 1, 2005 made the Mental Health Services Act (MHSA) a state law. The intention of MHSA is to expand and transform California's mental health service systems by providing funds to reduce the long-term adverse impact of untreated severe mental illness and serious emotional disturbance. The goal of MHSA programs is to continue to provide services that promote well-being, recovery, and self-help; prevent the long-term negative impact of severe mental illness; and reduce stigma. Services are culturally competent, easier to access, and more effective in preventing and treating severe mental illness.

Imperial County Behavioral Health Services (ICBHS), through a stakeholder process which includes consumers, family members, and community partners, has developed and implemented various MHSA programs to meet the specific needs of Imperial County. As a result of this community planning process, the following programs and services will be available during FY 2020-2021 through FY 2022-2023:

Community Services and Supports

Community Services and Supports programs, the largest component of MHSA, focuses on children and families, transition-age youth, adults, and older adults who suffer from severe mental illness (SMI) or serious emotional disturbance (SED). Programs provided through Community Services and Supports include:



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- *Youth and Young Adult Services Full-Service Partnership (YAYA-FSP) Program* provides services and support to SMI and SED youth and young adults, ages 12 to 25. Services available to YAYA-FSP Program consumers include a variety of services to include case management; rehabilitative services; “wrap-like” services; integrated community mental health and substance abuse treatment; crisis response; alternatives to juvenile hall; home and community re-entry from juvenile hall; youth and parent mentoring; supported



employment or education; transportation; housing assistance; benefit acquisition; and respite care. Staff within the YAYA -FSP Program are trained to implement the following treatment models: Cognitive Behavioral Therapy; Trauma-Focused Cognitive Behavioral Therapy; Functional Family Therapy; Interpersonal Psychotherapy; Moral Reconciliation Therapy; Motivational Interviewing; Portland Identification and Early Referral Model; and Aggression Replacement Training. Additionally, health and exercise groups, general education development (GED) classes, and Tai Chi classes are available to YAYA-FSP Program consumers.

In 2018, the YAYA-FSP Program expanded in the assessment tools used to measure and identify service needs for their consumers. The assessment tools adopted provide measurements in the areas of youth functioning; cognitive, emotional and behavioral problems; and self-reported symptoms and behaviors over a year period. As of September 2019, the Youth and Young Adult FSP partnership with Anxiety and Depression began providing services in the southern border of the county as they opened a clinic in the city of Calexico, CA. To address no show rates, as of January 2020, the YAYA service clinics in the El Centro area extended their hours of service to 6:00 p.m. on Tuesdays and Wednesdays in order to evaluate impact on no show rates.

For FY 2020-2021 through FY 2022-2023, the YAYA-FSP Program will work toward continuing to implement evidence-based practices that are specific to diagnosis and population; improve the monitoring and outcome reporting with the implementation of new measurement tools; incorporate group therapy as a standard psychotherapy practice; increase staffing to address service needs at current school districts; increase referrals to health and fitness programs; increase consumers' engagement with informational presentations and decrease consumers' no-show rates to scheduled appointments;

➤ *Adult and Older Adult Services - Full-Service Partnership (Adult-FSP) Program* provides services and support to SMI adults and older adults, ages 26 and older in a culturally competent environment. Services available to Adult-FSP Program consumers include medication support; case management; rehabilitative services; "wrap-like" services; integrated community mental health services; alcohol and drug services; crisis response; and peer support. The Adult-FSP Program provides consumers linkage to community a variety of community resources, which include: emergency shelter; permanent housing; emergency clothing; food assistance; SSI/SSA benefits application and/or appeals; DSS Cash Aid application; Section 8 Housing application; substance abuse treatment and/or rehabilitation referral; referrals to general physician and/or dentist; driver's license/ID application; and/or immigration paperwork. Delivery of needed support and services are also provided in the home for older adults who are homebound, do not have transportation, or are unable to access public transportation.

The Adult-FSP Program staff are trained to implement the following treatment models: Cognitive Behavioral Therapy; Cognitive Processing Therapy; Motivational Interviewing; Cognitive Behavioral Therapy-Anxiety Treatment; Cognitive Behavioral Therapy-Depression Treatment; and Moral Reconciliation Therapy.



During FY 2017-2018 through 2019-2020, the Adult MHSA-FSP Clinics addressed clinical space limitations. The Adult MHSA-FSP Clinic located in El Centro, CA completed remodeling its current location in June 2019, which allowed for more office space to serve consumers. As of May 2019, the MHSA-FSP Clinic located in Calexico, CA moved to a larger location to better serve the volume of consumers in the south end of the county. During the previous 3-year period, efforts to identify consumers meeting FSP criteria were addressed by providing more education on FSP criteria to clinical staff. With this approach, the number of MHSA-FSP consumers increased to more than 1,300. The Adult-FSP Program continues to identify and engage all adult consumers who meet the FSP criteria and are provided with specific specialty mental health services as these are assigned based on the individual's unique needs.

For FY 2020-2021 through FY 2022-2023, the Adult-FSP Program will work toward reducing the number of Adult-FSP Program consumer crisis desk admissions and hospitalizations; reduce the incidents or risk of homelessness; increase referrals to specialized counseling programs specifically for those at risk or with a history with the criminal justice system; increase referrals to substance use treatments for consumers with co-occurring substance use disorders; improve access to hard-to-reach populations; increase the number of peer support staff and/or volunteers; and increase the number of individuals involved in the criminal justice system to access treatment for their mental health needs.

➤ *Wellness Center* is a network of consumers who are 18 years of age or older, whose mission is to implement a wellness program of supportive resource services for adults with a significant and persistent mental health diagnosis and are actively participating in services at one of the ICBHS mental health clinics. Currently, there are two Wellness Center facilities, the El Centro, CA center serves most of the southernmost region of the county whereas the Brawley, CA center serves much of the north region. The Wellness Center provides services that focus on social skills, recovery skills, encouragement, wellness, positive self-esteem, and community involvement. The Wellness Center has partnered with outside agencies to offer consumers educational and pre-employment classes, job readiness, and employment training, as well as assist them in obtaining a high school diploma, GED, or pursue a college degree. Consumers also have access to computers and the internet to aid them in completing school assignments (i.e. research, homework, and/or projects). The Wellness Center staff includes a music instructor who provides group and individual voice and instrumental music instruction. Consumers are also offered the opportunity to attend classes on English as a second language, arts and crafts, Tai Chi, photography, self-esteem, life skills, cooking, embroidery/sewing, and computers.



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During FY 2019-2020, the Wellness Centers implemented the Illness Management and Recovery (IMR) model, which covers an array of topics on recovery strategies. The modules are covered over a 10-month period. The center continued to also use the

Wellness and Recovery Action Plan (WRAP) as a tool to monitor consumers' insight towards their mental illness and gauge the level of independence and social connection. During this same FY, the Wellness Center served as a platform to engage 34 peer volunteers or extra-help/part-time employees. Peer staff are provided the opportunity to provide supportive roles such as, activity leaders, run peer groups and/or activities, or obtain part-time employment with the Wellness Center.

For FY 2020-2021 through 2022-2023 the Wellness Center will increase consumers participation in the IMR model which are educational modules that promote self-efficiency, wellbeing, and stable recovery; increase the number of referrals to educational and/or vocational programs; improve participation in physical health activities that help decrease consumers body mass index (BMI); increase the monitoring of the consumers wellness, recovery, and self-sufficiency by completing client's WRAP.

➤ *Outreach and Engagement Program* goal is to provide outreach services to unserved and underserved SED and SMI individuals in the neighborhoods where they reside, including those hard to reach populations, such as the homeless. The Outreach and Engagement Program aims to reduce the stigma associated with receiving mental health treatment and increase access to mental health services. The program also provides education to the community regarding mental illness and symptoms, early identification of mental illness, and resources to improve access to care through local outreach.



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The program assists individuals in obtaining mental health treatment services from ICBHS by providing information pertaining to programs, services, and the intake assessment process; conducting home visits; scheduling intake assessment appointments; and providing transportation to intake assessment appointments when necessary.

The Outreach and Engagement Program is also responsible for conducting outreach in order to ensure SED and SMI consumers, and their family members, could participate in the community program planning process of the MHSA plan.

For FY 2019-2020, the Outreach and Engagement Program's notable impacts during Mental Health Month in May included the Suicide Prevention Informational Fair at the Quechan Reservation in Winterhaven, CA; Outreach events at Southwest High School located in El Centro, CA; and a Mental Health Awareness event focused on Inclusion was held at Imperial Valley College.

For FY 2020-2021 through FY 2022-2023 the Outreach and Engagement Program will continue to increase outreach contacts with populations indicated in the ICBHS target



penetration rate survey. The Outreach and Engagement Program will continue to work towards reducing the stigma associated with receiving mental health treatment and increasing access to mental health services.

➤ *Transitional Engagement Supportive Services (TESS) Program* – The TESS Program conducts outreach and engagement activities to unserved and underserved SED and SMI individuals over the age of 14. The program provides individualized mental health rehabilitation/targeted case management services to youth and young adults, adults, and older adults who have experienced a personal crisis in their life requiring involuntary or voluntary mental health crisis interventions services. The objective is to provide supportive services while individuals transition to outpatient treatment; such as conservatees who have recently been discharged from LPS Conservatorship, consumers released from acute care psychiatric hospitals or ICBHS Mental Health Triage Unit (MHTU), including re-engaging those who have not attended their ICBHS appointments. The TESS Program provides aftercare and follow-up services. Referrals established through the TESS program are provided with aftercare follow-up services, with the objective to ensure service delivery to individuals obtaining mental health and substance use services.

Services available to consumers at the TESS Program include initial intake assessment; medication support; mental health services – nurse and rehabilitation technician; targeted case management; and crisis intervention. The TESS Program provides linkage to variety of community resources, including, but not limited to: emergency shelter, clothing and food baskets; permanent housing; SSI/SSA benefits or appeal; DSS/Cash Aid; substance abuse treatment and/or rehabilitation referral; general physician, dentist, and/or optometrist; and other ICBHS program and community resources. The TESS Program is also responsible for implementing Phase I and Phase II of the Portland Identification and Early Referral (PIER) Model.

For FY 2017-2018 through FY 2019-2020, one of the notable community impacts was the improvement of expedited services and care coordination with psychiatric hospital staff in order to ensure discharged consumers were linked to mental health services in their community of residence. This approach assisted in the decrease of hospital readmissions as well as improved continuity of care.

For FY 2020-2021 through FY 2022-2023, the TESS Program will work toward increasing accessibility to mental health services to specific age groups; continue with efforts to engage and link homeless individuals or those at risk of experiencing homelessness; improving successful transfers to outpatient mental health services; increasing community outreach presentations to various community agencies and organizations; improving follow-up services for individuals who are hospitalized out-of-county and are not returning to Imperial County.

➤ *Community Engagement Supportive Services (CESS) Program* – As of January 2019 the CESS Program was implemented to provide outreach and engagement to link individuals 14 years of age and older, to mental health outpatient services based on medical necessity. As TESS, CESS also serves SED and SMI consumers by providing services to special / hard to reach populations in the community including homeless shelters, emergency room departments, jails, and outlying and small communities.



For FY 2018-2019, some of the notable community impacts included disseminating informational materials at events in the cities of Niland, Westmorland, and Winterhaven which are outlying area cities within Imperial County; real-time service linkage for individuals experiencing homelessness by having a ICBHS staff at a local Womenhaven shelter; conducted collaborative efforts with El Centro Police Department to identify homeless or at risk individuals to provide linkage and education; stationing of ICBHS staff at both the El Centro Regional Center hospital emergency room and Imperial County Jail have also allowed for timely engagement and linkage to mental health services.

For FY 2020-2021 through FY 2022-2023, the CESS program will continue to increase engagement and service awareness by particular age groups, including increasing accessibility of mental health services to the homeless; improve collaboration with local homeless shelters; successfully transfer consumers to outpatient clinics within 30 days of admission; increase outreach presentations and networking opportunities to reach the unserved and underserved populations; improve mental health services at the County jail; and expedite services for those being released from jail.

➤ *Full-Service Partnership - Assisted Outpatient Treatment Program* will target individuals 18 years of age and older with SMI with the goal to interrupt the cycle of hospitalization, incarceration, and risk of homelessness. The program will promote wellness and recovery for adults who have been unable and/or unwilling to participate in mental health services on a voluntary basis. The model is pending development.

➤ *Portland Identification and Early Referral (PIER) Full-Service Partnership (FSP) Program* - As of February 1, 2019, the PIER-FSP program was implemented as Phase III of the PIER Model. This phase provides Multi-Family Groups (MFG) that provide an opportunity for family to meet with specialized staff to learn early on the benefits of focusing on recovery and resilience, shared decision making that is client centered, and the maintenance of optimistic therapeutic perspectives.

Notable community impacts as of February 1, 2019, the PIER-FSP program conducted four (4) presentations, 31 informational booths, and attended 13 sites to disseminate brochures throughout the community; based on the outreach the PIER-FSP program received 14 referrals. In December 2019, the PIER program graduated its 1st Cohort which was composed of 3 consumers and their family members and/or supporters. A significant change for FY 2020-2021 through FY 2022-2023, is that the CESS program will be responsible for implementing Phase I and Phase II of the PIER model which respectively consist of outreach and engagement and evaluation to determine admission criteria. A consolidation of the PIER model will be pursued under PIER-FSP in order to conduct more effective tracking of services.

For FY 2020-2021 through FY 2022-2023, the goals and objectives for the program include to conduct PIER education and outreach to the community and within the department in order to increase consumers referred and served; educate on prodromal or active symptoms of major psychotic disorders through outreach, trainings and presentations; collection of evaluation and demographic data to measure outcomes and performance; and enhance capacity by training additional staff in the PIER model.



Prevention and Early Intervention

The Prevention and Early Intervention programs apply a “help first” system approach. The goal is to engage individuals before the development of SMI or SED, or to alleviate the need for additional or extended mental health treatment by facilitating access to supports at the earliest signs of mental health problems. Programs provided through Prevention and Early Intervention include:

Prevention

Prevention activities also include those that are focused on providing information and education to children/youth, parents, family members, educators, administrators, and agencies or care providers of children and youth in order to identify individuals at risk of or who may be presenting early signs of mental illness or emotional disturbance in order to link them to treatment or other resources. Prevention activities are delivered to large or small groups in health fairs, career fairs, and school presentations without any prior screening of attendance for mental health treatment.

For FY 2020-2021 through FY 2022-2023, the prevention component of the Prevention and Early Intervention Program will continue to focus on implementing universal prevention activities, which include providing the Incredible Years Parenting Program as well as outreach and education activities targeting unserved and underserved populations, in efforts to decrease the probability of children and youth developing mental disorders.

➤ *Prevention - Trauma Focused Cognitive Behavioral Therapy (TF-CBT)* is a prevention model to address the needs of a priority population of children and adolescents, age 4 to 18, who have been exposed to traumatic experiences. The TF-CBT model is to prevent mental illness from developing in the event of a traumatic life event. The prevention services are offered out in the community in locations such as schools, homes, places of worship, etc...

For FY 2018-2019, the TF-CBT served a total of 111 children of which 44 successfully completed the TF-CBT model. The Youth Outcome Questionnaire (YOQ) / YOQ Self Reporting (YOQ-SR) and the UCLA Post Traumatic Stress Disorder Reaction Index (PTSD-RI) are the measurement tools used to monitor progress outcomes. Measurement tools applied during this time frame demonstrated that TF-CBT continues to be effective in improving their overall functioning and had a reduction in symptoms of those children/youth who experienced trauma.

Goals for FY 2020-2021 through FY 2022-2023 include increasing clinicians that can offer TF-CBT; continue collecting demographic and evaluation data for performance evaluation; continue using the described measurement tools to monitor symptoms, behaviors and evaluate outcomes; and continue to provide information of service outcomes to community stakeholders.



- *The Incredible Years* is a comprehensive evidence-based practice with a set of curricula designed to provide parents with the necessary skills to promote children's development in a positive environment, nurturing relationships, reducing harsh discipline, and fostering parents' ability to promote children's social and emotional development. The program is focused on strengthening parenting competencies and fostering positive parent-child interactions and attachments for children ages 2 through 12. Services are provided through contracts with the Child Abuse Prevention (CAP) Council and Teach, Respect, Educate, Empower Self (TREES). The curricula are



offered at no cost in English and/or Spanish at non-traditional settings, such as schools, after school programs, churches, or at resource centers. Referrals to the Incredible Years Program are made by community agencies or parents' self-referral.

For FY 2018-2019, the Incredible Years Program that was offered through the CAP Council and the TREES provided services to over 700 parents. Both contracts provided parent participants with pre and post

outcome tools to measure their parenting skills; as well as, the Parenting Practices Interview (PPI) which demonstrated areas of improvement in the participants parenting practices by the end of the curriculum.

For FY 2020-2021 through FY 2022-2023, the goals for the Incredible Years Program is to continue to conduct groups both in English and Spanish in non-traditional and safe settings; include participants from hard-to-reach populations including Native Americans in accessible community settings; evaluate the effectiveness of the program and ensure model fidelity by continued data collection; and provide outcome information to community stakeholders.

Stigma and Discrimination Reduction Program

- *Stigma and Discrimination Reduction Program* - PEI uses a universal strategy to reduce stigma and discrimination related to mental health. The program focuses on reducing negative feelings, attitudes, beliefs, perceptions, stereotypes, and/or discrimination related to being diagnosed with a mental illness, having a mental illness, or for seeking mental health services.

Stigma and discrimination reduction activities include outreach, trainings, and educational groups delivered to large and small groups to community agencies and to school staff. The weekly radio show "Let's Talk About It" and "Expresate" in Spanish are used as a platform for educational purposes on issues and topics that have significant





Behavioral Health impacts. Podcasts of the broadcast can be accessed at <http://talks.kxoradio.com>.

For FY 2018-2019 the Stigma and Discrimination Program provided a total of 447 education groups and trainings. During small education sessions, program staff provided a stigma survey, Reported and Intended Behavior Scale (RIBS), as a pre and post evaluation tool. The survey asks about the participants' experience and views in relation to people who have a mental illness. Based on the survey results it was confirmed that providing stigma and discrimination reduction activities does create a change in how people with mental illness are viewed and perceived.

For FY 2020-2021 through FY 2022-2023 the stigma and discrimination program will continue to provide its activities through trainings and education to the community at large; will collect demographic information on the populations served; as of FY 2019-2020 the program started using the Measurement, Outcomes, and Quality Assessment (MOAQ) survey during outreach activities and will continue using as its program evaluation tool; provide information outcomes to community stakeholders.

Imperial Valley ROP-Prevention Program for Students in Foster Care: Rising Stars

Imperial County Behavioral Health Services (ICBHS) will be contracting with the Imperial Valley Regional Occupational Program (IVROP) for this upcoming FY 2020-2021 through FY 2022-2023 to implement a new Prevention and Early Intervention (PEI) program targeting foster care students ages 5 to 18. IVROP will be implementing Rising Stars (RS), a prevention program that will provide services to at least 225 school-aged students (K-12) who are identified as current foster children/youth enrolled in local school districts.

The Rising Stars (RS) program will collaborate with ICBHS staff, County Welfare Services (CWS) staff, staff from the local school districts and other community stakeholders to help foster care students overcome the impact of trauma. The RS program has an expected start date of July 1, 2020 and operate through June 30, 2023. The goal of this PEI program is to reduce the risk factors for mental health illness and enhance the protective factors of the participating foster students. RS staff will provide preventive services such as social emotional learning activities, leadership development, self-esteem enhancement, Developmental Assets workshops, team-building activities, mentoring, academic enhancement, enrichment activities, educational field trips, college-prep workshops, study skills workshops, and STEAM workshops. All of the strategies utilized by RS will be culturally competent and linguistically appropriate for the targeted population.

Goals for FY 2020-2021 through FY 2022-2023 for RS is to serve at least 225 school-aged students (K-12) who are identified as current foster care students residing in Imperial County; collect relevant demographic data of the participating students to meet PEI regulations; present data in the public accountability reports of this Prevention and Early Intervention (PEI) program; all RS students will be provided an ACE questionnaire for reporting purposes; RS staff will collect Pre-screening data and Post data from outcome measurement tools used in the program; improve the self-esteem, sense of hope, and resiliency of participating foster care students to avoid mental health illnesses;



enhance the social-emotional competencies, developmental assets and other protective factors to reduce negative outcomes for the participating foster care students; provide

positive guidance and mentoring services to participating foster care students; and improve the study skills, basic skills competencies and college preparation of targeted students to enhance their educational outcomes and prepare them for higher education.

Early Intervention

➤ *Early Intervention - Trauma-Focused Cognitive Behavioral Therapy (TF-CBT) Program* is an early intervention program that addresses the needs of children and youth in the community who have been exposed to trauma. The TF-CBT Program is utilized as an intervention to treat children and adolescents, ages 4 to 18, who have been exposed to a traumatic experience. By providing prevention and early intervention activities, mental health becomes part of the wellness for individuals and the community, reducing the potential for stigma and discrimination against individuals with mental illness.

The TF-CBT model is implemented as an early intervention activity aiming to prevent mental illness from becoming severe and disabling. TF-CBT is being provided to help children, youth, and their parents overcome the negative effects of traumatic life events such as child sexual or physical abuse; traumatic loss of a loved one; domestic, school, or community violence; or exposure to natural disasters (earthquakes), terrorist attacks, or war trauma. TF-CBT incorporates cognitive and behavioral interventions with traditional child abuse therapies that focus on enhancement of interpersonal trust and empowerment.

For FY 2018-2019, the TF-CBT served a total of 151 children/youth of which 28 successfully completed the TF-CBT model. The Youth Outcome Questionnaire (YOQ) / YOQ Self Reporting (YOQ-SR) and the UCLA Post Traumatic Stress Disorder Reaction Index (PTSD-RI) are the measurement tools used to monitor progress outcomes. Measurement tools applied during this time frame demonstrated that TF-CBT continues to be effective in improving mental health and overall functioning of children/youth who experienced trauma.

Goals for FY 2020-2021 through FY 2022-2023 include offering TF-CBT as an early intervention strategy to overcome functional impairments in children / youth; collect demographic and evaluation data for performance evaluation; continue using the described measurement tools to monitor symptoms and behaviors and evaluate outcomes; collect demographic information on population served; and provide information of service outcomes to community stakeholders.



➤ *The First Steps to Success (FSS) Program* was an Innovation program in Imperial County from 2014-2019 which has now transitioned, due to its success, as an Early Intervention program as of April 2019. The transition was approved by stakeholders present at the MHSA Steering Committee on March 18, 2019. The goal of the then Innovation Plan was to develop and maintain an effective interagency collaboration between ICBHS and the local education system, with a defined system to provide mental health services in the school setting to young children, ages four to six, who are experiencing behavioral and emotional problems or are at risk of serious mental illness, and are an unserved or underserved population. Through the joint implementation of the evidence based FSS, ICBHS would be able to replicate and expand collaborative efforts to school districts countywide and, in the process, develop a strong and effective collaborative relationship.

The FSS is a positive reinforcement program designed to assist children in developing pro-social skills that will assist them in being successful at school and home. The interventions were provided by Mental Health Rehabilitation Technicians (MHRTs) rather than school personnel. In the 5-year project a total of 51 teachers were trained on FSS. The FSS



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program also engaged parents/legal guardians/caregivers of kindergarten children identified. The FSS used the following model: Parents Reach Achieve and Excel Through Empowerment Strategies (PRAXES) which is an intervention supporting the development and implementation of skills learned by children. Within the PRAXES model the Parental Stress Index (PSI) is applied at the first and last session to evaluate the level of stress. The Pediatric Symptom Checklist (PSC-35), and the Youth Outcome Questionnaire (YOQ) were also monitoring tools used to evaluate participant progress.

For FY 2018-2019 the FSS program provided services to 95 children and approximately 119 parents/legal guardians/caregivers. As an early intervention program, data for FY 2018-2019 (4/1/2019 to 6/30/2019), the FSS program provided services to 56 children and approximately 70 parent/legal guardians/caregivers. The FSS program has shown to be an effective early intervention program based on the decrease in the overall total scores of the post PSC-35, YOQ, and PSI.

The goals and objectives for FY 2020-2021 through FY 2022-2023 for the FSS as an early intervention program will be to maintain collaborative relationships between mental health and education; expand services to additional elementary schools to cover more areas of Imperial County; provide training to additional teachers and MHRTs; increase parents' and teachers' awareness; conduct data collection for evaluation purposes; provide information on outcomes to community stakeholders.



Innovation

Innovation programs provide opportunities to learn something new that has the potential to transform the mental health system. Innovation programs are novel, creative, and ingenious mental health approaches that promote recovery and resilience and lead to learning that advances mental health. Programs provided through Innovation include:

- *Positive Engagement Team (PET)* - Imperial County Behavioral Health Services (ICBHS) experiences difficulties in engaging hard to reach populations in need of mental health services. ICBHS has utilized several strategies in efforts to increase access to services to unserved and underserved populations.

ICBHS conducted an extensive Community Program Planning Process (CPPP) in efforts to include community members and stakeholders by providing feedback on the community needs, and through their participation in the decision-making around the designing and implementation of the Innovation Plan. As a result of the CPPP process, during FY 2018-2019, a new MHA Innovative Project: Positive Engagement Team (PET) was developed.

The innovative component of the PET project is to utilize dogs, not for therapy, but as a tool to engage consumers into mental health treatment. Utilizing dogs in a mental health setting is not innovative; however Imperial County's Innovation Project plans to 1) integrate dogs at outpatient clinics to provide an inviting and friendly clinic environment to engage consumers in treatment; and 2) integrate dogs in outreach activities as a way to gain individual's interest and take the opportunity to provide education on mental illness and services to increase *access to services*. This strategy will lead to the reduction of stigma related to mental health and increase motivation to participate in treatment and keep appointments. The PET Project will have client engagement and community outreach as its main component,



**Bo is Ready to Say
Hi!**

To implement the PET program and have trained dogs for the engagement and outreach strategies, ICBHS developed a contract with the local Humane Society of Imperial County (HSOIC). The HSOIC will provide dogs trained in obedience; trained dog handlers; training program for dogs, handler and ICBHS staff; health care, grooming, and feeding of dogs; and transportation for the daily delivery of dogs to designated clinics or locations where services and outreach activities are provided.



The Imperial County Board of Supervisors on November 20, 2018 and was submitted to the Mental Health Oversight and Accountability Commission (MHSOAC) on January 8, 2019. On February 28, 2019, Imperial County presented the PET Project to the MHOAC in Sacramento and was approved on March 29, 2019 for \$2,165,138 for 3 years. Once approved by the MHSOAC, ICBHS developed a contract with the Humane Society of Imperial County (HSOIC). ICBHS also developed a contract with Todd Sosna, Ph.D. Management Consulting (TSMC) to evaluate and analyze the PET project.

The goals for FY 2020-2021 through 2022-2023 are to fully execute contracts with the HSOIC and TSMC; provide surveys to individuals during their initial appointments and during outreach events and provide data to TSMC for evaluation purposes; obtain service-level data; obtain survey data from consumers/legal guardians/caregivers about their experience related to the presence of dogs; obtain survey data from community members during outreach events; disseminate information on the progress of the PET Innovation Project to community stakeholders.

Capital Facilities and Technological Needs

A. Consumer and Family Empowerment

a. Consumer Portal Kiosks

The implementation of MyHealthPointe in 2016, the Consumer Portal has been available for clients to enroll and to take advantage of the benefits of using the portal. Some of the benefits of using the portal include appointment reminders via secured texts, current and past medication lists, viewing lab results, and links to other sites related to support for mental health treatment. ICBHS is planning to install additional kiosks at several clinics throughout the county. The goal for this upcoming fiscal year is to complete the installation and setup of the remaining locations. ICBHS Information Systems is already in possession of the remaining Chromebooks and is coordinating to obtain the needed equipment to create kiosks at the pending locations.

b. Wellness Center Computers Upgrade

For FY 2020-2021 through FY 2022-2023, ICBHS plans to upgrade computers to provide consumers with more current technology. In considering the best technology to provide this platform, Imperial County IT department recommended the use of Chromebooks that are less expensive, easier to configure, less vulnerable to tampering and provide the needed access to the internet through Google Chrome. ICBHS seeks to establish a working lab with Chromebooks or an alternate hosted option to meet the consumer's needs.

B. Consultant– Meaningful Use, Staff Training, and EHR

a. XPIO Contracted Services

ICBHS contracted with XPIO Health, a consultant who has the skills to support the Department's efforts with meeting Meaningful Use Objectives and are currently going into phase 3 which covers adherence to HIPAA Security rules and requirements as well as the Annual



Security Risk Assessment. XPIO also offer services that deliver completed trainings that are available in the ICBHS e-learning platform to provide training to all ICBHS staff in the areas of HIPPA security, privacy and compliance. Goals for the upcoming years include a) Working with XPIO for the annual preparation of the three trainings mentioned above as well as the Cultural Competency Annual Training. b) Working with XPIO to prepare MyAvatar to report on Meaningful Use Stage 3 for the eligible professionals that qualify for the program and c) Working with XPIO to complete the Annual Security Risk Assessment and continue to test the systems contingency plan.

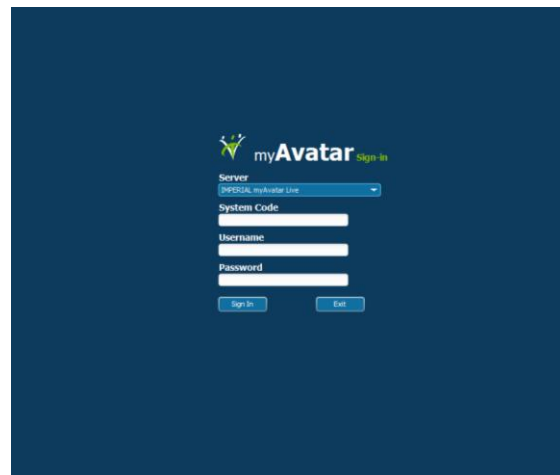
b. Staff Training

Technology changes are rapidly increasing, and Information Systems staff need to stay current on the upcoming changes of the electronic health record, MyAvatar. The vendor of the application, NetSmart, provides the opportunity for structured module trainings, an annual national conference and annual regional conference. The goals and objectives for FY 2020-2021 through FY 2022-2023 is to purchase trainings for two new Information Systems staff and to attend the annual conference offered by NetSmart.

C. Telecommunications Mobile Solutions

ICBHS is in the final stages of going fully electronic on all health records through all the clinics. The current pandemic situation (COVID-19) has identified areas of opportunity for the clinics and our mobile solutions. ICBHS needs to have information and equipment more readily available in order to provide continued services. The electronic health record vendor NetSmart has a solution in place that it's currently being utilized to deploy mobile electronic devices. The name of the tool is Clinician which enables a user to access and update client plans, progress notes, service entries, client demographics and other forms in MyAvatar.

This tool allows staff to go out in the field without the need of internet connection, provide services from home and document services provided. The solution allows the view of stored data and the creation of new data within the mobile device during the offline session and once the staff comes back to the office and connects the device to the system it synchronizes the data to the electronic health record. ICBHS would like to purchase additional equipment for the use of this tool in order to fully exploit and take advantage of technology to facilitate the transition to a full electronic health record so that information is still available to staff even when out of the office and/or during emergency situations. The Clinician platform, which is currently being tested out on the field supports ICBHS effort to maintain continuation of services. The tablets have a touchscreen that allow for signature collection without the need for a separate signature pad.





The goal for FY 2020-2021 through FY 2022-2023 is to provide each program with a minimum of two (2) devices that staff would be able to check out when working out in the field. It is estimated that about 50 Dell Windows Tablets are needed for clinics, and 100 webcams that will be needed for staff telecommunication deployment.

Workforce Education and Training

The Workforce Education and Training (WET) component provides education and training for all individuals who provide direct or support services in the Public Mental Health System. The mission of WET is to develop and maintain a sufficient workforce capable of providing consumer and family-driven, culturally competent services that promote wellness, recovery, and resiliency, and lead to evidence-based, value-driven outcomes.

For FY 2020-2021 through FY 2022-2023 the ICBHS will focus in the area of Training and Technical Assistance by hosting a **Mental Health Interpreter Training** for ICBHS staff. The



Mental Health Interpreter Training for Interpreters is designed to immerse bilingual staff, who currently serve as interpreters in a mental health setting, in the principles and practices of interpreter communication skills. Topics for the training included a discussion on federal and state regulations, communication in high and low context cultures verbal and non-verbal communication, the interpreting process, roles of the interpreter, interpreter techniques, and mental health terminology.

In addition, ICBHS will implement the **Assertive Community Treatment (ACT)** model via training, as this is an extensively researched evidence-based practice that consists of a transdisciplinary team who provide intensive services to people with SMI and co-occurring substance use challenges to maximize their recovery outcomes. ACT has been shown to be effective in a variety of measures including reduction in hospital days and housing stability. The training will also review the fidelity measure and its application for Full-Service Partnership teams, including those serving individuals within the criminal justice system.

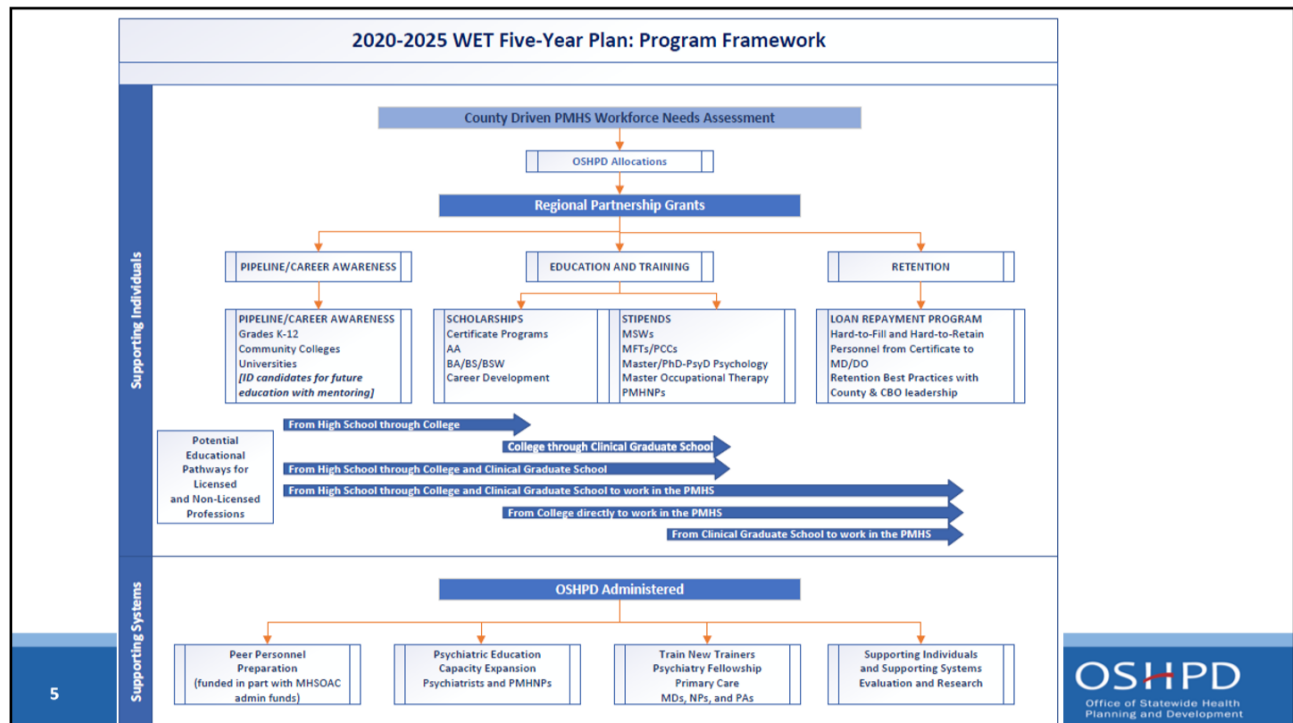
ICBHS is also planning to contract with Portland Dialectical Behavior Therapy (DBT) Institute for a system wide DBT training and implementation of this across all ICBHS programs. The **Dialectical Behavior Therapy Comprehensive Implementation & Training Initiative (DBT CITI)** is an innovative two-part 10-day immersive experience in DBT – where the primary goal is to build a strong and adherent DBT program, outstanding DBT clinical competence, and a highly effective DBT consultation team. The immersive approach applies the best of training and implementation processes and methods developed by Drs. Marsha Linehan, Kelly Koerner, Linda Dimeff and their colleagues at the University of Washington, BTECH, & BTECH Research over the past two decades. The training prepares trainees and programs for Linhan's *DBT Accreditation and Certification*.



As part of the five year **Statewide WET Plan** (2020-2025), ICBHS will be contributing its match-funding portion during FY 2020-2021 through FY 2022-2023. The purpose of the Statewide WET Plan is to guide efforts to improve and expand the PMHS workforce. The goals and objectives of WET will provide a framework for strategies that state, local government, community partners, educational institutions, and other stakeholders can enact to remedy the shortage of qualified individuals to provide services to those who are risk of a severe mental illness.

During FY 2020-2021 through FY 2022-2023, ICBHS will be participating in the proposed WET Five-Year Plan Framework. Based on the overall analysis conducted by the Office of Statewide Health Planning and Development (OSHPD) and California Behavioral Health Planning Council (CBHPC), the WET Plan framework proposes two categories 1) Supporting Individuals, 2) Supporting Systems. In order to implement the proposed strategy, OSHPD will contract with Regional Partnerships to carry out the proposed activities under Supporting Individuals. OSHPD will directly administer the activities under Supporting Systems.

ICBHS as part of the Southern Regional Partnership Grant Program will focus on three (3) areas of focus 1) Pipeline/Career Awareness, 2) Education and Training, and 3) Retention.



At this time, ICBHS continues to collaborate with the Regional Partnership Grants process with a proposed timeline from April 2020 through August 2020.



Imperial County Behavioral Health Services
Mental Health Services Act
Three Year Program and Expenditure Plan
FY 2020-2021 through FY 2022-2023

As the department continues to focus on enhancing its workforce, during FY 2020-2021 through FY 2022-2023 the ICBHS will implement an **ICBHS Stipend Program**:

Master of Social Work Students: ICBHS will support individuals interested in entering the public mental health field by funding stipends to Masters of Social Worker (MSW) students at the San Diego State University (SDSU) Imperial Valley, located in Calexico Campus, in exchange of a commitment to practice in Imperial County Behavioral Health Services (ICBHS) for one year for each year a stipend was awarded.

Physician: Imperial County Behavioral Health Services will support individuals interested in entering the public mental health field by funding a stipend for one (1) medical student during their residency to expand the diversity and cultural competence of our workforce in exchange for a commitment to practice in Imperial County Behavioral Health Services (ICBHS) for a minimum of three (3) years.