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Attachment 3

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# Overview of the Children and Youth Behavioral Health Initiative

The Children and Youth Behavioral Health Initiative (CYBHI) is reimagining the way California provides behavioral health support to all children and youth ages 0-25. The initiative aims to bring together existing support systems—including health and education—to create an ecosystem that is youth-centered, addresses inequities, fosters social and emotional well-being, addresses behavioral health challenges, and provides equitable, appropriate, timely, and accessible services for emerging and existing behavioral health needs (mental health and substance use). The CYBHI seeks to strengthen the behavioral ecosystem across the continuum of care, with a particular focus on prevention and wellbeing to provide support before behavioral health issues emerge, build capacity and conditions for wellness, promote social and emotional wellbeing, and provide early intervention. CYBHI has engaged with K-12 education to learn about existing work in schools, such multi-tiered systems of support (MTSS) and the efforts of schools to provide behavioral health services and supports across the three tiers, including efforts and investments in Tier 1 for wellbeing and prevention at the school and individual level.

## Background

Youth across California, the nation and world are experiencing a mental health crisis that has been growing over the last decade and was exacerbated by the pandemic, particularly for underserved youth in marginalized communities. Mental health is now the leading cause of hospitalization for youth ages 10-18 in California. Youth suicide increased 20% between 2019-2020. Sixty-six percent of LGBTQ+ youth reported feeling so sad or hopeless that they stopped doing usual activities. In a study last year by Project CalWell, one-third of seventh and ninth graders and almost half of 11th-graders reported experiencing chronic sadness.

Recognizing the need for urgent and sustained action to address the youth mental health crisis, Governor Newsom announced his $4.7 billion Master Plan for Kids Mental Health (more information available at: <https://www.gov.ca.gov/wp-content/uploads/2022/08/KidsMentalHealthMasterPlan_8.18.22.pdf?emrc=6d3847>) in August 2022, utilizing a whole child, integrated systems, multi-year transformation approach to support the mental health of all California’s kids. The Master Plan for Kids Mental Health recognizes the importance of a holistic, cross-sector approach to improve mental health that integrates state efforts across the Children and Youth Behavioral Health Initiative, Community Schools, Medi-Cal reforms in CalAIM, and multiple investments in health and behavioral health workforce. It aims to ensure all California kids, parents and communities have increased access to mental health and substance use services.

The CYBHI is at the core of the Master Plan for Kids Mental Health. Under AB 133, passed by the Legislature and signed into law by Governor Newsom in 2021 and further augmented by AB 178 in 2022, the CYBHI is a 5-year, $4.7B initiative to reimagine the ecosystem that supports social and emotional wellbeing and behavioral health for all children and youth ages 0-25, with a strong focus on equity that recognizes that BIPOC youth, LGBTQ+ youth, low-income youth, and children and families in underserved communities are disproportionately impacted by behavioral health challenges and face greater structural and systemic barriers to wellbeing.

Seeking fundamental transformation to improve wellbeing, mental and behavioral health for children and youth, activities under the CYBHI are grounded in the following approaches:

* **Center Around Children and Youth**: Build a more-coordinated system that addresses the silos across health care, behavioral health, schools, community and home that create barriers to children and families getting services and supports when and where they need them. Across all levels of government, child- and youth-serving agencies form coordinated systems of care to deliver high-quality behavioral health programs that support wellbeing and are responsive to the needs of youth and their families.
* **Designed for and by youth**: Center the needs, experiences, strengths and voice of youth and families in our systems.
* **Advance Equity**: Recognize and systemically address the inequities in behavioral health outcomes, including providing access to linguistically, culturally, and developmentally appropriate services and supports.
* **Start Early, Start Smart**: Strengthen efforts and address gaps across the continuum of care, focusing on prevention, wellbeing, promotion of positive mental health, and early intervention with a recognition of the importance of non-clinical supports as well as clinical services, and improve access to services for youth with the most complex, intensive behavioral health needs.
* **Right Time, Right Place**: Meet kids where they are. Provide high-quality care and information when they need it — including early mornings, evenings, and weekends and where they need it — including where they live, learn, and play. In addition to home, school—including early care and learning, K-12, and higher education—is where kids spend significant time and key to increasing access to behavioral health supports and services.
* **Empower Families and Communities**: People who teach, work with or care for children and youth are equipped to recognize signs of poor mental health or substance use and know how to access supports
* **Free of Stigma**: Children, youth and their families can talk about their mental health and well-being and seek help without feeling ashamed or fearing discrimination

## Key Components of the CYBHI

The Children and Youth Behavioral Health Initiative has fourteen workstreams across four focus areas, which address the following goals:

1. Increasing the number, diversity and capacity of the workforce.
2. Building the infrastructure needed to realize the reimagined ecosystem including building and supporting new partnerships, building a new virtual services platform, expanding bricks and mortar, and scaling practices that advance prevention and equity.
3. Creating a universal payer approach to provide increased access to services for children with both Medi-Cal and commercial health coverage.
4. Raising public awareness and addressing stigma.

CYBHI’s 14 [workstreams](https://www.chhs.ca.gov/wp-content/uploads/2022/10/CYBHI-101-Deck-September-2022.pdf#page=14) are briefly described below and grouped by focus area (<https://www.chhs.ca.gov/wp-content/uploads/2022/10/CYBHI-101-Deck-September-2022.pdf#page=13>). Each of the workstream titles contains a hyperlink to more detailed information.

### FOCUS AREA: WORKFORCE TRAINING AND CAPACITY

1. Workstream: Behavioral Health Counselor and Coach Workforce (<https://www.chhs.ca.gov/wp-content/uploads/2022/10/CYBHI-101-Deck-September-2022.pdf#page=26>)

* Managed by: Department of Health Care Access and Information (HCAI)
* Funding: $338.25 million
* Objective: Augment and increase diversity of the behavioral health workforce and increase availability of behavioral health services for youth by launching a behavioral health coach system thus increasing students access to in-person, virtual one-on-one, and/or group supports.
* **Example** **Key Milestones**
* 2022: Public release of Behavioral Health Coach model
* 2023-2024: Development and implementation of training
* 2025: Coaches anticipated in the field

1. Workstream: Broad Behavioral Health Workforce Capacity (<https://www.chhs.ca.gov/wp-content/uploads/2022/10/CYBHI-101-Deck-September-2022.pdf#page=25>)

* Managed by: Department of Health Care Access and Information (HCAI)
* Funding: $426.75 million
* Objective: Improve access to and quality of behavioral health services by building and expanding a culturally and linguistically competent workforce, education, and training.
* **Example** **Key Milestones**
* 2022: Expanding the workforce via apprenticeship models, scholarships, and loan repayment opportunities, e.g., in 2022 awarded three cohorts of behavioral health loan repayment/scholarships, awarded Health Professions Pathway Program grants, and Psychiatry Education Capacity Expansion grants

1. Workstream: CalHOPE Student Services

(<https://www.chhs.ca.gov/wp-content/uploads/2022/10/CYBHI-101-Deck-September-2022.pdf#page=27>)

* Managed by: Department of Health Care Services (DHCS)
* Funding: $45 million
* Objective: Support communities of practice in all 58 County Offices of Education to enhance Social Emotional Learning Environments by identifying and sharing best practices to support youth in transitioning between distance and in-person classes.
* **Example** **Key Milestones**
* 2022: Contract in place to support work with all 58 county offices of education to identify and share best practices. Monthly statewide community of practice meetings and youth engagement activities are underway

1. Workstream: Trauma-Informed Training for Educations(<https://www.chhs.ca.gov/wp-content/uploads/2022/10/CYBHI-101-Deck-September-2022.pdf#page=28>)

* Managed by: Office of the California Surgeon General (OSG)
* Funding: $1 million
* Objective: Provide training to childcare providers, educators, and school personnel on trauma-informed care such as recognizing the mechanisms and risks of ACEs/toxic stress and how to respond appropriately.
* **Example** **Key Milestones**
* 2022-2023: Partner under contract and development of training
* 2023: Anticipate training available in June 2023

### FOCUS AREA: BEHAVIORAL HEALTH ECOSYSTEM INFRASTRUCTURE

1. Workstream: School-Linked Partnerships and Capacity Grants(<https://www.chhs.ca.gov/wp-content/uploads/2022/10/CYBHI-101-Deck-September-2022.pdf#page=29>)

* Managed by: Department of Health Care Services (DHCS)
* Funding: $550 million
* Objective: Provide grants to support new, school-based services for individuals 25 years of age and younger and support statewide school-linked fee schedule including a behavioral health network of providers.
* **Example** **Key Milestones**
* 2022-23: Releasing first round of grant funding and open application period

1. Workstream: Student Behavioral Health Incentive Program (<https://www.chhs.ca.gov/wp-content/uploads/2022/10/CYBHI-101-Deck-September-2022.pdf#page=31>)

* Managed by: Department of Health Care Services (DHCS)
* Funding: $388.99 million
* Objective: Provide incentive payments for Medi-Cal Managed Care Plans (MCPs) to build infrastructure, partnerships, and capacity statewide for school behavioral health services.
* **Example** **Key Milestones**
* 2022-2024: Implementation of interventions and incentive payments released

1. Workstream: Behavioral Health Continuum Infrastructure Program(<https://www.chhs.ca.gov/wp-content/uploads/2022/10/CYBHI-101-Deck-September-2022.pdf#page=30>)

* Managed by: Department of Health Care Services (DHCS)
* Funding: $480.5 million (specific to children and youth)
* Objective: Provide grants to build up sites where youth across California can receive mental health and substance use disorder services and care without delay and, wherever possible, without leaving their home county.
* **Example** **Key Milestones**
* 2022: RFA released in summer 2022 and applications received. Awards are forthcoming

### DUAL FOCUS AREAS: WORKFORCE TRAINING AND CAPACITY + BEHAVIORAL HEALTH ECOSYSTEM INFRASTRUCTURE

1. Workstream: Behavioral Health Virtual Services Platform (<https://www.chhs.ca.gov/wp-content/uploads/2022/10/CYBHI-101-Deck-September-2022.pdf#page=22>)

* Managed by: Department of Health Care Services (DHCS)
* Funding: $632.7 million
* Objective: Implement a virtual platform for behavioral health services that delivers educational content and be integrated with screening, clinic-based care, and app-based support services.
* **Example** **Key Milestones**
* 2024: Virtual Services Platform goes live

1. Workstream: Healthcare Provider Training and e-Consult (<https://www.chhs.ca.gov/wp-content/uploads/2022/10/CYBHI-101-Deck-September-2022.pdf#page=23>)

* Managed by: Department of Health Care Services (DHCS)
* Funding: $167 million
* Objective: Launch an e-Consult system allowing pediatricians, primary care physicians, and other providers to access consultation support from behavioral health professionals.
* **Example** **Key Milestones**
* 2024: e-Consult system will launch as part of the Virtual Services Platform

1. Workstream: Scaling Evidence-Based and Community-Defined Practices (<https://www.chhs.ca.gov/wp-content/uploads/2022/10/CYBHI-101-Deck-September-2022.pdf#page=24>)

* Managed by: Department of Health Care Services (DHCS)
* Funding: $429 million
* Objective: With input from stakeholders and educational partners, select a limited number of evidence-based practices and/or community-defined practices to scale statewide based on robust evidence of effectiveness, impact on racial equity, and sustainability.
* **Example** **Key Milestones**
* Multiple phases
* First phase: 2022- RFA released and applications received; Early 2023- Notify applicants of grant award status

### FOCUS AREA: COVERAGE ARCHITECTURE

1. Workstream: Enhanced Medi-Cal Benefits – Dyadic Services (<https://www.chhs.ca.gov/wp-content/uploads/2022/10/CYBHI-101-Deck-September-2022.pdf#page=32>)

* Managed by: Department of Health Care Services (DHCS)
* Funding: $745.08 million
* Objective: Add Dyadic Behavioral Health Visits for coverage under Medi-Cal.
* **Example** **Key Milestones**
* 2023: Effective as a Medi-Cal benefit in January 2023

1. Workstream: Statewide All-Payer Fee Schedule for School-Linked Behavioral Health Services

(<https://www.chhs.ca.gov/wp-content/uploads/2022/10/CYBHI-101-Deck-September-2022.pdf#page=33>)

* Managed by: Department of Health Care Services (DHCS); Department of Managed Health Care (DMHC) for regulatory framework for commercial plans
* Objective: Develop and maintain a school-linked statewide fee schedule for outpatient mental health and substance use disorder services, and a provider network of at-or-near school behavioral health counselors.
* **Example** **Key Milestones**
* 2024: Fee schedule will begin in January 2024

### FOCUS AREA: PUBLIC AWARENESS

1. Workstream: Public Education and Change Campaigns (<https://www.chhs.ca.gov/wp-content/uploads/2022/10/CYBHI-101-Deck-September-2022.pdf#page=34>)

* Managed by: California Department of Public Health (CDPH)
* Funding: $100 million
* Objective: Raise the behavioral health literacy of all Californians to normalize and support the prevention and early intervention of mental health and substance use challenges.
* **Example** **Key Milestones**
* 2023: Anticipate RFP release in the spring

1. Workstream: Adverse Childhood Experiences (ACEs) and Toxic Stress Awareness Campaign

(<https://www.chhs.ca.gov/wp-content/uploads/2022/10/CYBHI-101-Deck-September-2022.pdf#page=35>)

* Managed by: Office of the California Surgeon General (OSG)
* Funding: $24 million
* Objective: Increase the awareness of ACEs and toxic stress while also sharing practical strategies for how parents and caregivers can support children who are experiencing stress and adversity.
* **Example** **Key Milestones**
* Early 2023: Contract will be awarded

The CYBHI is being implemented in three general phases:

* an initial phase of listening, learning and research, which has been completed across most workstreams;
* design and development, which is the current phase of most CYBHI workstreams; and
* the third phase of implementation, ongoing learning and evaluation.

Additionally, the CYBHI provides regular written stakeholder updates and quarterly public webinar updates. The most recent updates on specific activities for each CYBHI workstream is available from our October 20th update webinar. The slides and recording will be made available at: <https://www.chhs.ca.gov/home/children-and-youth-behavioral-health-initiative/>.

## CYBHI and Community Schools Shared Framework

CYBHI and CDE staff have been working to strengthen the foundation for collaboration across behavioral health and K-12 education so that our collective efforts can provide a more coordinated, whole child systems approach to supporting social and emotional wellbeing and behavioral health of children and youth. We have been meeting to learn in greater depth about each agency’s respective key initiatives. CalHHS also contracted with WestEd to provide a series of learning sessions for the CYBHI team about core aspects of the K-12 education system and to provide policy and technical information to CYBHI about the education system. CYBHI and CDE also have held several joint meetings to identify areas for collaboration and coordination, with planning of additional meetings underway to delve into key topics such as workforce and sustainable funding. CDE staff are also serving as members of the CYBHI Equity Working Group to advise the initiative in our efforts to embed and advance equity.

To support interagency collaboration, the CYBHI developed an internal landscape analysis of key state initiatives that impact child and youth behavioral health across multiple departments, agencies and sectors. We are using the analysis to build shared understanding of the landscape of efforts underway and identify opportunities for collaboration and coordination. For example, CalHHS and CDE are having ongoing dialogue about potential ways to work across Community Schools, Expanded Learning Opportunities Program, Universal Pre-Kindergarten and CYBHI to support student social and emotional wellbeing and behavioral health. We are also developing written profiles of key state initiatives across sectors to share publicly in order to increase the capacity of partners at the state and local level to collaborate and explore systems-level changes to integrate behavioral health services and supports for youth and families.

The CYBHI and Community Schools in particular share key framework components, including a whole child approach, engagement of youth, families and community in the development and ongoing work of the initiatives and centering their needs and experiences, focus on advancing equity, and rootedness in partnership, collaboration and integration of services and systems.

Schools are a critical component of the ecosystem that supports the emotional, mental and behavioral health of California’s children and youth. The CYBHI includes several components that address and support the collaboration and integration of behavioral health and education systems to improve social and emotional wellbeing of children and youth.

* **New statewide fee schedule** for school-linked behavioral health services that will provide schools the opportunity to receive reimbursement from Medi-Cal and commercial health plans, creating an ongoing funding source for designated services.
* **Behavioral health workforce investments** including:
  + Developing a new behavioral health coach to supplement behavioral health supports for children and youth in school and community settings.
  + Providing scholarships, loan repayment and other supports for licensed behavioral health providers and increasing the substance use disorder workforce. In addition to the CYBHI, recent state budget investments in both education and health also support building the health and behavioral health workforce and providing scholarships for school-based PPS professionals.
  + Investments in behavioral health career pipeline programs, including partnerships with schools.
* **Building infrastructure of schools** to serve as sites for wellbeing and behavioral health services and supportsthrough school-linked partnership and capacity grants.
* **Scaling of evidence-based and community-defined practices**, including potentially in school settings, with an emphasis on equity, prevention and early intervention.
* **Supporting partnerships** between Medi-Cal managed care plans and LEAs.
* **CalHOPE Student Services program that provides tools and learning community opportunities** for schools for social emotional learning.
* **Supporting Wellbeing, Mindfulness, and Resilience of Students** through new grants included in the 2022-23 state budget.
* **Providing training on trauma-informed care** to educators, school personnel and childcare providers.

## Initiative-Wide Approach and Activities

CYBHI is also undertaking multiple activities initiative-wide to reimagine and build a more coordinated, youth-centered, equitable, prevention and wellbeing-oriented ecosystem of behavioral health services and supports for children and youth. These include several collaboration efforts with the education system at both the state and field levels.

### Stakeholder Engagement

CBYHI is conducting robust partner and stakeholder engagement with individuals and organizations with professional and lived experience at all levels. This includes over 35 focus groups with youth and parents conducted by trusted on-the-ground partners, a series of community engagement sessions across the state, feedback sessions with health and education coalitions, committees, and task forces, listening sessions, key informant interviews with a range of experts, think tanks and public working groups for specific workstreams, and regular public update webinars and written updates.

Several themes are emerging from ongoing dialogue and sessions with youth and families about what they want and need from the behavioral health ecosystem.

* 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.
* 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. At the community level, communities want to be directly involved with improving the behavioral health ecosystem.
* Safe spaces—both indoors and in outside green space--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.
* Acknowledgment that existing systems have caused harm and recognition that unacknowledged harm gets in the way of hope and healing. Effort to include addressing racism and systemic inequalities in order to support and allow for healing and improved mental health and wellbeing.

### Ecosystem Working Paper

Based on discussion with stakeholders, CYBHI is developing a working paper to articulate the approaches, capabilities and capacities a reimagined ecosystem would need to embrace and embed to achieve greater coordination, youth-centeredness, equity, and a prevention and wellbeing focus. CalHHS commissioned Breaking Barriers California, a whole child education systems transformation organization, to engage with experts in the fields of education and health, as well as people with lived experience, to develop findings and recommendations for the paper, which is expected to be released in late 2022 or early 2023. The State Board of Education President and staff members, California Department of Education staff, education field leaders, key associations, and academic experts have been consulted through interviews and group advisory sessions.

Key initial findings from the paper note the importance of collective impact approach that includes:

* Youth, families and community as central to setting the vision, goals and as part of decision-making,
* The use of a cross-sector collaborative body at the state and local level to advance integration and set shared goals,
* Sharing data and coordinating funding to support integrated approaches, break down silos, and achieve shared goals across systems,
* Intentional focus on addressing root causes of inequity,
* Development of a culturally congruent workforce,
* Making it easier for families to navigate and access services across multiple systems, and
* Providing integrated technical assistance and capacity building to support collective impact capabilities to integrate multiple existing initiatives, such as Community Schools, ELOP, UPK and CYBHI.

### 5-Year Outcomes Goals and Evaluation

CYBHI is developing 5-year outcomes goals, with a focus on addressing disparities, and is engaging an evaluation vendor to conduct systems, policy, and programmatic level evaluation that will inform the ongoing work of the initiative. CalHHS has engaged multiple partners and stakeholders, including K-12 education, in the development of outcomes goals. The aim is to include at least 1-2 measures in the CYBHI outcomes goals that align with current K-12 goals in which behavioral health is a factor, such as chronic absenteeism. Other draft outcomes measures under consideration include both population and system performance measures, such as:

* Increase in overall mental wellbeing of children and youth
* Decrease in mental health challenges
* Decrease in rates of suicidal ideation for vulnerable populations
* Decrease in emergency room visits and hospitalizations for children and youth with mental health- related conditions
* Decrease in rates of school absenteeism
* Decrease in stigmatizing attitudes toward behavioral health
* Improvement of experience with behavioral services and supports for children, youth and families
* Increase in knowledge of available behavioral health services and supports
* Increase in children and youth who received needed mental health and substance use services and supports
* Increase in diversity of behavioral health professionals, especially in underserved communities
* Increase in preventive services and family supports for children ages 0-5
* Increase in substance use prevention strategies specifically for younger children and adolescents
* Decrease in barriers to care for children and youth from underserved communities
* Increase in cross-sector collaboration and adoption of continuous improvement approaches
* Increase in utilization of the statewide fee scheduled for school-linked behavioral health services

California Department of Education, October 2022