

Children and Youth Behavioral Health Initiative

February 7, 2022

Welcome to this overview of California's Children and Youth Behavioral Health Initiative (CYBHI). We are committed to sharing information and updates on the initiative on a regular basis with our partners and stakeholders, and with anyone who has an interest in the behavioral health of California's children and youth. This overview outlines the scope of the initiative, shares highlights of current activities in the current early planning phase and includes a chart of key milestones over the five-year horizon of the CYBHI.

California's Children and Youth Behavioral Health Initiative is reimagining the way we provide behavioral health support to ALL our children and youth ages 0-25, by bringing together the existing support systems to create an ecosystem that 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 ecosystem will include the entire continuum of care and have a particular focus on prevention efforts to provide support before behavioral health issues emerge, build capacity and conditions for wellness, promote social and emotional well-being, and ensure early intervention.

Overview of the CYBHI

The goal of the **Children and Youth Behavioral Health Initiative is to address the behavioral health challenges** facing children and youth **by reimagining the systems that support behavioral health and wellness for children, youth, and their families**



The initiative will take a **whole system approach** by creating **cross-system partnerships** – involving stakeholders from the various systems that support children and youth behavioral health – to ensure that **the reimagined ecosystem is children and youth centered and equity focused**

- Up to 1 in 5 children ages 3 to 17 in the US reported behavioral health challenges¹
- The suicide rate among Black youth in California has doubled since 2014²
- During the pandemic, 70% of LGBTQ youth report having poor mental health most or all of the time³

1. U.S. Surgeon General's Advisory (2021).
2. California Department of Public Health, California Comprehensive Master Death File (CCMDF)
3. The Trevor Project. National Survey on LGBTQ Youth Mental Health 2021.

Behavioral health challenges are a leading cause of adverse health and social outcomes for children and youth, affecting their overall well-being, learning, relationships, and later life outcomes. These challenges have been on the rise and have been intensified by the stress, isolation, and hardships resulting from the pandemic, particularly for BIPOC and LGBTQ+ children and youth as well as families in socio-economically disadvantaged and underserved communities.

The State of California is already taking action and making investments to support behavioral health needs. The CYBHI is California's commitment to achieve long-term and lasting improvement in the behavioral health well-being for children and youth. *As a 16-year old student from Apple Valley said, "I just wish there was a method or a system that would work for everyone...not many people know how to reach resources...after going through what I have gone through in the past year during the pandemic, I really think that it would mean so much to me for the mental health system and treatment would be reimaged."*

Equity is a defining principle for the CYBHI in both approach and outcomes, with a particular focus on addressing the needs and systemic barriers to well-being faced by children and youth of color, LGBTQ+ youth, and low-income and underserved communities. Cross-sector collaboration and stakeholder engagement, including youth and family engagement, community partnerships, and collaboration with stakeholders on the ground and in the field as well as at the state level, are also key foundations of this effort. Health care and education—including early childhood learning, K-12, colleges, and universities—will collaborate in new ways to improve the social and emotional well-being of children and youth.

Transforming behavioral health support in California into a coordinated, prevention-focused ecosystem will take large-scale, systems-level change. It will require us to come together and collaborate to restructure systems that currently operate in silos and integrate programs and strategies across sectors, and to put children, youth, and families—their voices, strengths, needs, and experiences—at the center of our collective efforts.

Phases of the Initiative

The Children and Youth Behavioral Health Initiative will be implemented over five years, with three distinct phases:

1. Setting goals and standing up the project infrastructure;
2. Developing detailed plans and designing the future state behavioral health ecosystem for children and youth we need and want;

3. Delivering, accelerating and sustaining impact.

In the first phase, currently underway, major areas of focus include defining specific goals that support the overall CYBHI aspiration, standing up a performance infrastructure, developing a comprehensive approach for convening and engaging stakeholders, understanding the current landscape of programs and initiatives across health and education, and preparing for detailed planning and future-state ecosystem design.

The CYBHI comprises multiple workstreams led by five departments and offices of CalHHS – Department of Health Care Services, Department of Health Care Access and Information, Department of Managed Health Care, California Department of Public Health, and Office of the Surgeon General. The workstreams have their own dedicated funding and teams. While the workstreams are led by the five departments and offices, the initiative is a much broader collaboration that includes many other departments and state agencies, as well as children, youth, and families, and partners and stakeholders across sectors including education (early learning, TK-12, and colleges and universities), and others. Additionally, the Mental Health Services Oversight and Accountability Commission (MHSOAC) is the lead entity for distributing increased funding provided under the CYBHI to the existing Mental Health Student Services Act program.

Current Work and Planning Efforts

CalHHS and the five departments and offices are in the process of convening internal experts and stakeholders, conducting research to understand the current behavioral health landscape and identify needs, and beginning the detailed planning and design required for each workstream. The table below provides a brief overview of recent progress, and ongoing activities and priorities for each workstream.

Ongoing Activities and Priorities by CYBHI Workstream

	CYBHI Workstreams	Progress in the last 3 months	Ongoing Activities and Priorities
DHCS	BH Services Virtual / e-Consult Platform	<ul style="list-style-type: none"> Identified and onboarded workstream lead and core workstream team members 	<ul style="list-style-type: none"> Building stakeholder engagement and expert input plan to identify features of the platform (including provider education) Conducting landscape analysis to understand potential interdependences (e.g., data sharing) and opportunities for collaboration and lessons learned (e.g., from CalHOPE)

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Workstreams	Progress in the last 3 months	Ongoing Activities and Priorities
School Behavioral Health Incentive Program (SBHIP)	<ul style="list-style-type: none">• Engaged and educated stakeholders• Developed metrics, interventions, and goals with stakeholder input• Determined payment structure for MCPs• Launched the program and received letters of intent from MCPs	<ul style="list-style-type: none">• Stakeholder engagement and education through technical assistance• MCP assessment/gap analysis with technical assistance to support engagement between Local Educational Agencies (LEAs), counties, and MCPs• MCPs design and implement interventions in coordination with counties and LEAs• MCPs receive payments biannually based on metrics achieved
School-Linked Partnership and Capacity Grants	<ul style="list-style-type: none">• Identified and onboarded workstream lead• Initiated listening sessions with education partners (in partnership with CalHHS) to begin collecting early stakeholder inputs	<ul style="list-style-type: none">• Developing a project plan for the launch of grant applications and disbursement of funds in 2022-23• Building stakeholder engagement plan to solicit input on capacity gaps and needs• Conducting landscape analysis of existing, related State efforts (e.g., school-based health incentives programs)
Enhanced Medi-Cal Benefits – Dyadic Services	<ul style="list-style-type: none">• Identified workstream lead• Developed draft dyadic services policy and provider manual updates	<ul style="list-style-type: none">• Defining modifications to Medi-Cal benefits to implement dyadic services and integrate BH screening and services into medical care
Evidence-Based and Community-Defined Best Practices	<ul style="list-style-type: none">• Identified and onboarded workstream lead	<ul style="list-style-type: none">• Developing a project plan for the launch of grant applications and disbursement of funds in 2022-23• Building engagement plan to solicit expert input on evidence-based practices for scaling and synthesize evidence of impact to inform prioritization of practices for scaling

CYBHI		
Workstreams	Progress in the last 3 months	Ongoing Activities and Priorities
Pediatric, Primary Care, and Other Healthcare Providers	<ul style="list-style-type: none"> Identified and onboarded workstream lead 	<ul style="list-style-type: none"> Defining types and scope of provider trainings, education, and support services to be provided on the BH Services Virtual Platform (part of platform feature identification)
CalHOPE Student Services	<ul style="list-style-type: none"> Utilizing the Crisis Counseling Program funding the Communities of practice met two times. In recognition of the fatigue being felt by all who work in the education system, the January meeting was substituted with tools for self-care and the Angst: Building Resilience and Trusted Space video/curriculum tools 	<ul style="list-style-type: none"> Working to put contract in place to support this work
BH Continuum Infrastructure Program	<ul style="list-style-type: none"> Published BH assessment 	<ul style="list-style-type: none"> Informing grant-making through understanding the current California BH landscape
School BH Counselor and BH Coach Workforce	<ul style="list-style-type: none"> Launched preliminary background research, including interviews with children, youth, parents, behavioral health providers, and experts from various fields 	<ul style="list-style-type: none"> Continuing preliminary background research, stakeholder engagement and synthesizing insights Launching design process and defining initial design options to be considered
Broad BH Workforce Capacity	<ul style="list-style-type: none"> Drafted preliminary timeline for grant application launches across types of grants (e.g., SUD workforce, expanded peer personnel, psychiatry / social work) Funded \$10 million for Behavioral Health Training for Primary Care Providers 	<ul style="list-style-type: none"> Developing stakeholder engagement plan to gather initial inputs from government agencies, non-government agencies, as well as youth, families, and communities Developing detailed plans for grant application launches across types of grants (e.g., SUD workforce, expanded peer personnel, psychiatry / social work)

HCAI

CYBHI Workstreams		
	Progress in the last 3 months	Ongoing Activities and Priorities
DMHC	Commercial Health Plans Coverage for School-Linked BH Services <ul style="list-style-type: none"> Identified and onboarded workstream lead and core workstream team members Identified stakeholders from commercial plans, the California Association of Health Plans (CAHP), the Association of California Life and Health Insurance Companies (ACLHIC), and the California Department of Insurance (CDI) 	<ul style="list-style-type: none"> Convening meetings to gather initial inputs from commercial plans, the California Association of Health Plans (CAHP), the Association of California Life and Health Insurance Companies (ACLHIC), and the California Department of Insurance (CDI) Developing a comprehensive list of questions and areas of concerns for plans to be addressed in guidance from DMHC and CDI Coordinating with DHCS on the services to be provided at schools, including the reimbursement amount and any guidance that is needed by commercial health plans
CDPH	Public Education and Change Campaign <ul style="list-style-type: none"> Identified and onboarded workstream lead Prepared and shared with CalHHS a consolidated list of stakeholders engaged in CDPH efforts focused on behavioral health (not limited to CYBHI) 	<ul style="list-style-type: none"> Identifying internal SMEs, including experts from the Center for Family Health and the Center for Health Communities, and engaging internal experts to define goals and operating principles for the CYBHI public education campaign Gathering and synthesizing relevant observations and lessons learned from prior CDPH and state efforts to inform the design of the CYBHI public education campaign
OSG	ACEs Awareness Campaign <ul style="list-style-type: none"> Promoted the CYBHI via multiple media outlets, podcasts, and presentations to stakeholder groups 	<ul style="list-style-type: none"> Continuing promotion of the CYBHI via media interviews, presentations to stakeholder groups, and social media platforms Defining collaboration model with CDPH, DHCS, and HCAI to support public and provider education efforts
	Trauma-Informed Training for Educators <ul style="list-style-type: none"> Developed and syndicated SOW to create trauma-informed training for educators 	<ul style="list-style-type: none"> Completing and expanding trauma-informed training for educators; further developing toolkit and resources for school staff

CYBHI		
Workstreams	Progress in the last 3 months	Ongoing Activities and Priorities
CalHHS	<p>Coordination, subject matter expertise, integration, and evaluation</p> <ul style="list-style-type: none"> • Confirmed appointment of and onboarded CYBHI Director and CYBHI Assistant Secretary • Drafted initial CYBHI governance model • Drafted initial landscape analysis focused on state children and youth behavioral health efforts • Launched initial input gathering across several types of stakeholders, including education partners (ongoing listening sessions) and youth (digital diaries, engagement in selected working sessions, youth engagement expert interviews) • Released CYBHI program brief; drafted additional standard communications materials • Shared CYBHI priorities and 5-year milestones with the BHTF • Drafted SOWs and explored procurement of external subject matter expertise for strategic communications, marketing and landscape analysis. 	<ul style="list-style-type: none"> • Facilitating CYBHI goal setting with the department teams and other stakeholders • Operationalizing and refining CYBHI governance • Developing and releasing next version of the landscape analysis to inform cross-department and cross-sector collaboration for CYBHI • Confirming and activating stakeholder engagement plan, including initiative-level activities related to youth and family engagement as well as coordination of stakeholder engagement across the initiative • Establishing regular CYBHI progress reporting • Defining approach to CYBHI evaluation • Understanding capability building needs for CYBHI teams; defining tools, approaches, and CalHHS role related to capability building (e.g., focused on systems change, youth engagement, equity) • Establishing standard CYBHI communications toolkit and communications plan; engaging communications partner

Source: California Health and Human Services Agency; DHCS; HCAI; DMHC; CDPH; OSG

Also, the MHSOAC is working to allocate the additional MHSSA funds provided under the CYBHI for partnership efforts between county behavioral health departments and Local Education Agencies/County Offices of Education in counties that previously received MHSSA funding to expand the work, in counties that had applied but have not yet received funding, and to provide opportunities for MHSSA grants to counties that have not yet applied for one.

The State of California also recently collaborated with the Child Mind Institute on the [California Healthy Minds, Thriving Kids Project](#). The project’s central component is a series of free, evidence-based video and print resources that caregivers and educators can use to teach their kids critical mental health and coping skills. The videos teach parents and educators the importance of self-care and signs that kids may need extra help, are available in English and Spanish, and are tailored for elementary, middle, and high school students. The project seeks to normalize conversations about mental wellbeing and teach children and youth basic skills that can be used for the rest of their lives.

Five-Year Milestones

The CYBHI is a five-year transformation initiative. The table below provides an overview of the workstreams and five-year milestones for planning, designing, and implementing the initiative’s many components.

	CYBHI Workstreams	Workstream Descriptions	Initial 5-Year Milestones – to be further defined and developed
DHCS	BH Services Virtual / e-Consult Platform	Implement behavioral health service virtual platform to be integrated with screening, clinic-based care and app-based support services	January 2024 – Platform launch January 2024 – Statewide BH network and fee structure for school-based services
	School Behavioral Health Incentive Program (SBHIP)	Incentive payments for Medi-Cal Managed Care Plans (MCPs) to build infrastructure, partnerships, and capacity, statewide for school behavioral health services	January 2022 – Program implementation October 2022- December 2024 – Implementation of interventions and incentive payments released
	School-Linked Partnership and Capacity Grants	Build infrastructure, partnerships, and capacity to increase the number of students receiving preventive and early intervention behavioral health services	September – December 2022 – Release grant funding opportunity and open application period
	Enhanced Medi-Cal Benefits – Dyadic Services	Implement dyadic services in Medi-Cal, based on the HealthySteps model of care	January 2023 – Dyadic services benefit in Medi-Cal
	Evidence-Based and Community-Defined Best Practices	Support statewide scale and spread of evidence-based interventions proven to improve outcomes for children and youth with or at high risk for mental health conditions	September –December 2022 – Release grant funding opportunity and open application period

CYBHI Workstreams	Workstream Descriptions	Initial 5-Year Milestones – <i>to be further defined and developed</i>
Pediatric, Primary Care, and Other Healthcare Providers	Provide opportunities for primary care and other health care providers to access culturally proficient education and training on behavioral health and suicide prevention	June 2023 – Provider education campaign launch
CalHOPE Student Services	Support communities of practice in all 58 County Offices of Education to enhance Social Emotional Learning Environments. Engage youth as partners in contributing to positive, supportive learning environment	January-June 2022- Contract in place with Sacramento County Office of Education and contracts with 58 County Offices of Education and youth partner organization. Promotion of Angst: Building Resilience and Trusted Space video/co-curricular tools for schools July 2022-June 2024 CalHOPE Student support in full motion with monthly statewide community of practice meetings and youth engagement activities.
BH Continuum Infrastructure Program	Support youth living in every part of California to access the care they need without delay and, wherever possible, without having to leave their home county	January 2022 – BH assessment report released August 2022 – RFA release (children and youth)
School BH Counselor and BH Coach Workforce	Develop a multi-year plan to launch and implement a behavioral health coach or counselor system by which students can receive in-person and/or virtual one-on-one and group supports	Mid-2022 - Release career ladder and framework for BH coaches and counselors 2023 – Administer first award cycle for BH coach training curriculum development; (annual award cycle after 2023)

HCAI

	CYBHI Workstreams	Workstream Descriptions	Initial 5-Year Milestones – to be further defined and developed
DMHC	Broad BH Workforce Capacity	Build and expand workforce, education, and training programs to support a workforce that is culturally and linguistically proficient and capable of providing age-appropriate services	Mid-2022 – Release expanded peer personnel and psychiatry education capacity application cycle Late 2022 – Administer first earn/learn award cycles (annual award cycles after 2022) 2023 – Administer first SUD award cycle and launch SUD program awareness campaign; administer first social work award cycle (annual award cycles after 2023)
	Commercial Health Plans Coverage for School-Linked BH Services	Implement fee schedule for commercial health plan reimbursement	December 2023 - Issue initial guidance for commercial plans via an All-Plan Letter 2024 – Implement BH network and fee structure; begin enforcement of guidance for commercial plans
CDPH	Public Education and Change Campaign	Raise the behavioral health literacy of all Californians to normalize and support the prevention and early intervention of mental health and substance use challenges	Spring 2022 create an internal CDPH SMEs workgroup to develop a stakeholder engagement plan. Fall 2022 engage with stakeholders and community partners Spring 2023 release of RFP for a comprehensive culturally linguistic public education and change campaign Fall 2023 award and launch Public Education and Change Campaign

OSG	CYBHI Workstreams	Workstream Descriptions	Initial 5-Year Milestones – to be further defined and developed
	ACEs Awareness Campaign	Raise awareness of Adverse Childhood Experiences (ACEs) and toxic stress	Ongoing - Provide ongoing training to clinicians on Adverse Childhood Experiences (ACEs). Promote the training to clinicians via social media, speaking presentations and media interviews. 2022 – Launch a public awareness campaign to help ensure that alongside clinicians, the public knows how to recognize and interrupt the effects of ACEs and toxic stress. RFP is under final review with the RFP release planned for spring 2022. Summer 2022, award and launch the ACEs and Toxic Stress Public Awareness Campaign.
Trauma-Informed Training for Educators	Provide training to educators on trauma-informed care	Second half of 2022 – Complete trauma-informed training for educators and conduct an evaluation to determine efficacy	

Source: [California Health and Human Services Agency; DHCS Major Program Initiatives](#) – Go-Live Dates, as of 1/10/2022; HCAI; DMHC; CDPH; OSG

Also, as part of the CYBHI, MHSOAC is administering additional funds provided to the Mental Health Student Services Act (MHSSA) Grant Program which supports partnerships between county behavioral health departments and educational entities.

We welcome input on the Children and Youth Behavioral Health Initiative. If you would like to provide thoughts or comments or sign up to receive regular updates on the CYBHI, please email CYBHI@chhs.ca.gov.

In Partnership,

Melissa Stafford Jones

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