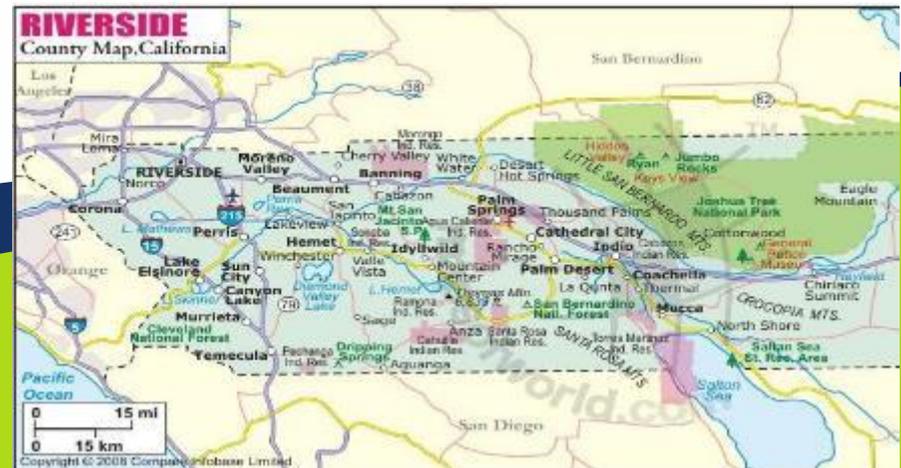


Mental Health Services Act Annual Plan Update FY 2022-23

Riverside University Health System Behavioral Health



What is MHSA?

- 2004 CA voter approved ballot proposition (Prop 63)
- 1% income tax on incomes over \$1 million
 - Volatile funding stream
- Funds are divided across counties and used to “transform” public MH services
- MHSA has rules (regulations) about the limits and possibilities of how the money can be used
- CANNOT pay for involuntary programs, supplant existing funds (November 2004), or SAPT programs (unless COD, and some prevention and early assessment)
- Essential Element: Community Collaboration

Community Collaboration: MHSA Stakeholder Process

- Community Program Planning Process
- Feedback accepted all year round
 - Participate in advisory groups and boards (Directory available!)
 - Collaboratives (PEI, TAY)
 - Directly to MHSA (phone, email, website)
- Formalized at start of calendar year
 - Presentations at our network of community groups
- Two types of MHSA plans
 - 3-Year-Plan
 - Annual Update

Stakeholder Partnership and Participation Structure

BHC and Community Advisory



Collaboratives



Forums



Posting & Public Hearing

<http://www.rcdmh.org/>



**MHSA Stakeholder Partnership and Participation Structure:
“How Can My Voice Be Heard?”**



BHC & Community Advisory	Collaboratives	Forums	Posting and Public Hearing
<p><u>Behavioral Health Commission</u></p> <p>Commission Meetings</p> <ul style="list-style-type: none"> • Central • Regional (Desert, Mid-County, Western) 	<p><u>Prevention and Early Intervention</u></p> <ul style="list-style-type: none"> • Steering Committee* • Quarterly Collaborative Meetings (Sign up at DAGutierrez@ruhealth.org) 	<p><u>Focus Groups</u></p> <p>Focus Groups are coordinated meetings designed to get specific feedback on community needs. They are sometimes used to initiate planning, sustain planning, or to concentrate feedback from a particular population or group.</p>	<p><u>Plan Draft Distribution</u></p> <ul style="list-style-type: none"> • RUHS-BH Clinics/Programs • Residential Housing • Peer Centers • Public Libraries • Requested by community organizations
<p><u>Behavioral Health Commission</u></p> <p>Standing Committees</p> <ul style="list-style-type: none"> • Adult System of Care • Children’s Committee • Criminal Justice • Housing • Legislative • Older Adult System of Care • Veteran’s Committee 	<p><u>Workforce Education and Training</u></p> <ul style="list-style-type: none"> • Steering Committee* • Workforce survey, training evaluations, and feedback forms • Academic and community pipeline committees 	<p><u>MHSA Forums</u></p> <p>MHSA Forums are held at community events or prior to an in-person public hearing. They are dedicated to education and feedback on the MHSA plan. #MHSAtalks</p> <ul style="list-style-type: none"> • May is Mental Health Month • Recovery Happens 	<p><u>Public Hearing</u></p> <p>Public Hearing provides the community to give feedback on a proposed MHSA plan</p> <ul style="list-style-type: none"> • Typically scheduled in May for annual update • Virtual and/or in-person • Sometimes scheduled at other times of the year based on plan amendments • MHSA Feedback Voicemail at 951-289-3305
<p><u>Cultural Competency Committees</u></p> <ul style="list-style-type: none"> • Reducing Disparities • African American • Asian American • Community Advisory on Gender and Sexuality Issues <p>Now Developing! - Latino; Native American; Middle Eastern/North African; Deaf and Hard of Hearing; Faith Based Communities; People with Disabilities</p>	<p><u>Central MHSA Steering</u></p> <ul style="list-style-type: none"> • Steering Committee* (Developing) • Plan related development, monitoring, and support <ol style="list-style-type: none"> TAY Collaboratives CSEC Program Meeting Help@Hand Program meeting 		<p>www.RCDMH.org</p> <p>MHSA Tab</p> <ul style="list-style-type: none"> • Most recent annual update and latest 3-Year plan • Includes electronic feedback forms • MHSA@ruhealth.org • 951-955-7198

* Closed Meeting

Plan Development

- MHSA legislation is nearing 20 years old
 - Though each year has a plan update process, the majority of programs are rolled over into the next plan to avoid service disruption
 - Programs are sustained via stakeholder feedback and program outcome data
 - Funds are largely encumbered/budgeted
- Large plan additions would mean current programs would also need to be eliminated

MHSA Frame

- 5 Components:
 1. Community Services and Supports (CSS)
 2. Prevention and Early Intervention (PEI)
 3. Innovation (INN)
 4. Workforce Education and Training (WET)
 5. Capital Facilities and Technology (CF/TN)

CSS

- Largest Component
- Integrated mental health and support services to children/TAY and adults/older adults whose needs not met by other funds
- Full Service Partnerships (FSP) – Over 50%
- Clinic expansion – includes adding Peer Support, specialized evidence based treatments
- Also includes Housing/HHOPE, Crisis System of Care, and Collaborative Courts
- Riverside Workplans: 01-Full Service Partnership; 02-General Service Development; 03-Outreach & Engagement and Housing

PEI

- Next largest component
- Reduce stigma related to seeking services, reduce discrimination against people with a diagnosis, prevent onset of a SMI
- Early intervention for people with symptoms for one year or less or do not meet criteria for a diagnosis; low intensity, short term intervention
- Services for youth under age 25 – 51%
- Riverside Workplans: 1) MH Outreach, Awareness, & Stigma Reduction; 2) Parent Education & Support; 3) Early Intervention for Families in Schools; 4) TAY Project; 5) First Onset for Older Adults; 6) Trauma Exposed Services; 7) Underserved Cultural Populations

INN

- Funded out of CSS and PEI
- Used to create “research projects” that advance knowledge in the field; not fill service gaps
- Time limited: 3-5 years.
- Requires additional State approval to access funds
- Current Riverside Workplans: CSEC Mobile Team; Tech Suite (Help @ Hand)
- Starting process for new plan proposals

WET

- Original WET funds were 1-time funds that lasted 10 years. Expired 2018.
- Continued plans funded through a portion of CSS dollars
 - Grant: CA Dept of Health Care Access & Information (formerly OSHPD)
- Recruit, retain, and develop the public mental health workforce
- Riverside Workplans: 1) Workforce Staffing Support; 2) Training & TA; 3) Mental Health Career Pathways; 4) Residency & Internship; 5) Financial Incentives for Workforce Development

CF/TN

- The last CF/TN funds were allocated in 2013-2014, but a portion of CSS funds can be used to address new workplans
- Improve the infrastructure of public mental health services: buildings and electronic programs.
- Projects in the 3-Year Plan (FY 20/21-22/23):
 - Roy's Desert Oasis – NOW open!
 - Arlington Recovery Community – NOW open!
 - Riverside Safehaven Renovation – Starting in spring 2022!
 - MH Rehabilitation Center Expansion – 21 more beds in 2022!
 - Restorative Transformation Center – Opens summer 2022!
- Plan addition: Hemet Recovery Village

What's Next: Public Posting & Hearing

- April: 30-day posting. May: Public Hearing
- All comments are documented: Both the verbal and written comments
- Public Hearing comments are reviewed by the Behavioral Health Commission
- The original comment and the response are added to the plan

COVID-19 and Public Hearing

- Due to gathering restrictions, there was no in-person public hearing in 2020 or 2021.
- Instead, videos of the MHSA Plan Presentation were posted on all RUHS-BH social media; one in English (included ASL) and one in Spanish.
 - Also available on DVDs
 - Included a MHSA Plan Feedback voice mail number
- Same model as last 2 years - Very Successful!
 - 2020 3-Year-Plan: Seen by over 16,000 county-wide
 - 2021 Annual Update: Seen by over 12,000 county-wide
- Future Hybrids!

On-going Participation

- Attend a community advisory group or board meeting
- Make discussions about behavioral health needs and solutions an item on the group's agenda
- Engage with Department program leadership about existing services. Give support to programs you want to sustain and areas you'd like changed
- Assign group members to review sections of the MHSA plan and report back to the group
- Invite MHSA Admin to your meeting to address outstanding questions about regulation limits and possibilities
- Encourage community members to participate in advisory groups and provide feedback via the Public Hearing

RCDMH.org

The screenshot shows the website interface for Riverside County Behavioral Health. At the top, the Riverside County logo and 'Riverside University HEALTH SYSTEM Behavioral Health' are visible. A navigation bar includes links for Home, Administration, Employees, MHP, Volunteers, MyHP, Careers, Crisis Resources, and Doing Business. A secondary navigation bar includes Behavioral Health Commission, MHP, Coronavirus, Take my Hand, Peer Support Chat, and FSP. A dropdown menu is open under MHP, listing: Capital Facilities and Technological Needs, Community Services and Supports, Innovation, Prevention & Early Intervention (PEI), Workforce Education & Training, MHP Plan Update (circled in red), and MHP Issue Resolution. Below the navigation is a banner for 'OUTSTANDING EMPLOYEES' featuring Fausto Sanchez and Cynthia Rumford-Jones.



Contact Info

- MHSA@ruhealth.org
- MHSA Admin: 951-955-7198

- MHSA Admin: David Schoelen
 - DSchoelen@ruhealth.org
- PEI: Diana Gutierrez
 - DAGutierrez@ruhealth.org
- WET: Vacant (in recruitment)
- INN: Toni Robinson
 - TonicaRobinson@ruhealth.org

GRACIAS
ARIGATO
SHUKURIA
JUSPAXAR
TASHAKKUR ATU
SUKSAMA
EKHMET
MEHRBANI
PALDIES
GRAZIE
KOMAP-SUMNIDA
LE MAARKE
GOZAIMASHITA
EFCHARISTO
YAHANYELAY
SUKSAMA
EKHMET
BOLZIN
MERCİ
THANK
YOU
BIYAN
SHUKRIA
TINGKI



2022 MEETING SCHEDULE

BEHAVIORAL HEALTH COMMISSION & REGIONAL ADVISORY BOARD

BEHAVIORAL HEALTH COMMISSION

1st Wednesday of the month at 12:00 noon at the following location: Riverside University Health System – Behavioral Health, 2085 Rustin Avenue, Conference Room 1051, Riverside, 92507 on the following dates: *(Note: Due to COVID-19, meetings are currently held via Zoom. Please contact Liaison to receive details by email.)*

January 5, 2022	February 2, 2022	March 2, 2022	April 6, 2022
May 4, 2022	June 1, 2022	July 6, 2022	August – DARK
September 7, 2022	October 5, 2022	November 2, 2022	December - DARK

For further information, please contact Maria Roman, BHC Liaison at (951) 955-7141.

DESERT REGIONAL BOARD

2nd Tuesday of the month at 12:00 noon at the following location: Indio Mental Health Clinic, 47-825 Oasis, Indio 92201 on the following dates: *(Note: Due to COVID-19, meetings are currently held via Zoom. Please contact Secretary to receive details by email.)*

January 11, 2022	February 8, 2022	March 8, 2022	April 12, 2022
May 10, 2022	June 7, 2022	July 12, 2022	August – DARK
September 7, 2022	October 11, 2022	November 8, 2022	December - DARK

For further information, please contact Amber Jordan at (760) 863-8586.

MID-COUNTY REGIONAL BOARD

1st Thursday of the month at 3:00 p.m. at varying locations within the Mid-County Region on the following dates: *(Note: Due to COVID-19, meetings are currently held via Zoom. Please contact Secretary to receive details by email.)*

January 6, 2022	February 3, 2022	March 2, 2022	April 7, 2022
May 5, 2022	June 2, 2022	July 7, 2022	August – DARK
September 8, 2022	October 6, 2022	November 3, 2022	December – DARK

For further information and to confirm location, please contact Hilda Gallegos at (951) 943-8015 x235.

WESTERN REGIONAL BOARD

1st Wednesday of the month at 4:00 p.m. at 2085 Rustin Avenue, Riverside 92507 on the following dates: *(Note: Due to COVID-19, meetings are currently held via Zoom. Please contact Secretary to receive details by email.)*

January 5, 2022	February 2, 2022	March 2, 2022	April 6, 2022
May 4, 2022	June 1, 2022	July 6, 2022	August – DARK
September 7, 2022	October 5, 2022	November 2, 2022	December - DARK

For further information, please contact Norma MacKay at (951) 358-4523



BEHAVIORAL HEALTH COMMISSION - STANDING COMMITTEES 2022 MEETING SCHEDULE

ADULT SYSTEM OF CARE COMMITTEE	CHILDREN'S COMMITTEE	CRIMINAL JUSTICE COMMITTEE	HOUSING COMMITTEE	LEGISLATIVE COMMITTEE	OLDER ADULT SYSTEM OF CARE COMMITTEE	VETERAN'S COMMITTEE
<i>Last Thursday @ 12pm 2085 Rustin Avenue Riverside, CA 92507</i>	<i>4th Tuesday @ 12:15pm 3125 Myers Street Riverside, CA 92503</i>	<i>2nd Wednesday @ 12pm 3625 14th Street Riverside, CA 92501</i>	<i>2nd Tuesday @ 11 am 2085 Rustin Avenue Riverside, CA 92507</i>	<i>1st Wednesday @ 10:30 am 2085 Rustin Avenue Riverside, CA 92507</i>	<i>2nd Tuesday @ 12pm 2085 Rustin Avenue Riverside, CA 92507</i>	<i>1st Wednesday @ 10:30 am 2085 Rustin Avenue Riverside, CA 92507</i>
January 27, 2022	January 25, 2022	January 12, 2022	January 11, 2022	January 5, 2022	January 11, 2022	January 5, 2022
February 24, 2022	February 22, 2022	NA	February 8, 2022	February 2, 2022	February 8, 2022	February 2, 2022
March 31, 2022	March 22, 2022	March 9, 2022	March 8, 2022	March 2, 2022	March 8, 2022	March 2, 2022
April 28, 2022	April 26, 2022	NA	April 12, 2022	April 6, 2022	April 12, 2022	April 6, 2022
May 26, 2022	May 24, 2022	May 11, 2022	May 10, 2022	May 4, 2022	May 10, 2022	May 4, 2022
June 30, 2022	June 28, 2022	NA	June 14, 2022	June 1, 2022	June 14, 2022	June 1, 2022
July 28, 2022	July 26, 2022	July 26, 2022	July 12, 2022	July 6, 2022	July 12, 2022	July 6, 2022
August - DARK	August - DARK	NA	August - DARK	August - DARK	August - DARK	August - DARK
September 29, 2022	September 27, 2022	September 14, 2022	September 13, 2022	September 7, 2022	September 12, 2022	September 7, 2022
October 27, 2022	October 25, 2022	NA	October 11, 2022	October 5, 2022	October 11, 2022	October 5, 2022
November - TBD	November 22, 2022	November 9, 2022	November 8, 2022	November 2, 2022	November 8, 2022	November 2, 2022
December - DARK	December - DARK	NA	December - DARK	December - DARK	December - DARK	December - DARK
Committee Secretary Elizabeth Lagunas (951) 940-6215	Committee Secretary Saida Spencer (951) 358-7348	Committee Secretary Jared Buckley (951) 955-1530	Committee Secretary Michelle Barrera (951) 715-5049	Committee Secretary Manny Pondivida (951) 955-7198	Committee Secretary Raetheea Harris (951) 509-2422	Committee Secretary Miriam Resendiz (951) 955-7138

Meetings are subject to change. For further information, please contact the Committee Secretary.

Thank you!

Regional Key Program Grid FY 2022/2023
Community Services & Supports (CSS) Full Service Partnership (FSP)

	Western Region	Mid-County Region	Desert Region
FSP Track in outpatient clinics	X	X	X
Children's FSP			
Multi Dimentinal Family Therapy	X	X	X
Wraparound	X	X	X
Youth Hospital Intervention Program (YHIP)	X	X	X
TAY (Transitional Age Youth):			
TAY FSP Program	X	X	X
Adult:			
Adult FSP Program	X	X	X
Older Adult FSP:			
SMART Program	X	X	X

Community Services & Supports (CSS): General Service Development (GSD)

General			
BH Care at Community Health Center	X	X	X
Parent Child Interaction Therapy/Preschool 0-5	X	X	X
DBT, Eating Disorder, NCI, MI, TF-CBT, other EBP	X	X	X
TAY Centers	X	X	X
Crisis System of Care:			
Mobile Crisis Teams (MCRT and MCMT)	X	X	X

Mental Health Urgent Care (MHUC)	X	X	X
Crisis Residential Treatment (CRT)	X	X	X
Adult Residential Treatment (ART)			X
Clinician/Police Partner Teams (CBAT)	X	X	X
Mental Health Court & Justice Related:			
Mental Health Court/Veterans Court	X	X	X
Homeless Court	X		X
Law Enforcement Education Collaboration (CIT)	X	X	X
Youth Treatment Education Center	X		
Juvenile Justice EBP	X	X	X
Adult Detention BH Discharge Preparedness	X	X	X

CSS: Outreach and Engagement

Lived Experience Programs:

Consumer Affairs: Peer Support

Peer Support and Resource Centers	X	X	X
Bulding Peer Leaders Classes	X	X	X
WRAP/Facing Up/WELL	X	X	X

Parent Support & Training: Parent Partners

Educate, Equip & Support	X	X	X
Triple P/Triple P Teen	X	X	X
Nurturing Parenting	X	X	X
Parent Partner Training	X	X	X

Family Advocates:

Family WRAP (English & Spanish)	X	X	X
Family to Family Classes (English & Spanish)	X	X	X

DBT for Family (English & Spanish)	X	X	X
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Housing & Housing Programs:

HHOPE Programs	X	X	X
Homeless Outreach Teams	X	X	X
SafeHaven	X		X
Permanent Supportive Housing Units	X	X	X

Prevention and Early Intervention (PEI)

Western Region

Mid-County Region

Desert Region

Mental Health Outreach, Awareness & Stigma Reduction:

Stand Against Stigma (formerly Contact for Change)	X	X	X
Promotores de Salud Mental y Bienestar	X		X
Community Mental Health Promotion Program	X	X	X
Integrated Outreach & Screening	X	X	X
Asian/PI Mental Health Resource Center	X	X	
Helpline	X	X	X

Parent Education & Support:

Triple P - Positive Parenting Program	X	X	X
Mobile MH Clinics & Preschool 0-5 Program	X	X	X
Strengthening Families	X	X	X

Early Intervention for Families in Schools:

Peace4Kids			X
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Trasistion Age Youth (TAY) Project:

Stress and Your Mood	X	X	X
TAY Peer-to-Peer Services	X	X	X
Active Minds Chapters (Send Silence Packing)	X	X	X
Outreach to Runaway Youth/Safe Places	X	X	X
Teen Suicide Awareness & Prevention Program	X	X	X
First Onset for Older Adults:			
Cognitive Behavioral Therapy for Late-Life Depression			X
Program to Encourage Active Rewarding Lives (PEARLS)	X	X	X
Care Pathways - Caregiver Support Groups	X	X	X
Mental Health Liaisons to Office on Aging	X		X
Carelink/Healthy IDEAS	X	X	X
Trauma-Exposed Services:			
Cognitive Behavioral Intervention for Trauma in Schools	X	X	X
Seeking Safety TAY	X	X	X
Seeking Safety Adult	X	X	X
Underserved Cultural Populations:			
Mamas y Bebés (Mothers & Babies)	X	X	X
Building Resilience in African American Families -Boys	X	X	X
Building Resilience in African American Families -Girls		X	X
Native American Project	X	X	X
Asian American Project/KITE	X	X	

Innovations (INN) Components

	Western Region	Mid-County Region	Desert Region
Resilient Brave Youth - CESC Project:	X	X	X

Tech-Suite (Help @ Hand) Project:

X

X

X

MHSA In Action

My son was an exceptional boy. He was very active in sports, and in school. So busy was that I hardly ever saw him. In addition, when I would see him, he was stressed. Everything changed when the pandemic started and he got sick. He got sick when he went on a trip with some friends to Mexico. He arrived emotionally unstable and different.

Since my son has these problems, he has been the focus of our family. This situation was traumatic for everyone. Even my oldest daughter has suffered from my son's problem. She cried because my son was not well.

The depression caused my son very bad moments in which he cried and did not sleep. He said, they held him hostage and they wanted to kill him. My son was in a state of panic he would say, ***"They are going to kill me and they are going to kill you too"***. My family and I did not know what was happening with my son, and we did not know what to do.

We took him to the hospital where they saw that he had a lot of anxiety and was very stressed. We were told he has psychosis and they will not be able to help us. Therefore, we took him to the Emergency Room for Mental Health where he thought they were laughing at him. After an hour, he came out very angry, and he tried to get out of the car when my daughter was driving on the freeway. After this incident, he felt very bad because he wanted to apologize to his sister but he felt helpless.

When they prescribed medication, they did not know if he had Schizophrenia. They had to wait to see how his illness manifested itself along with his symptoms to see what his diagnosis was.

We decided to send him to Mexico with our family. There he had a lot of peace and rest. In Mexico, my son felt safer, and he returned home well.

When he got home, shortly after he returned to see his friends with whom he had traveled. He started saying all of the sudden ***"They know I am back"*** and he started watching the yard through the window. He also said that if he spoke, they would want to kill him. He began to isolate himself because he was afraid that they were going to kill him or that they were going to hurt him too.

Shortly after, he drank half a bottle of isopropyl alcohol. He told me, ***"I want to heal my wounds inside."*** This was the first time he went to the Psychiatric Hospital for 3 or 4 days.

The second time he went to the hospital, it was for 8 days because he would isolate himself and say ***"I no longer like being stressed and depressed."***

The medication and his treatment have helped him a lot. When my son is well, he comes out of his room and speaks with me. He grooms himself and he looks good. However, when he is not well, he does not think, and he does not care about his cleanliness, he starts to sleep a lot and does not eat. Today, my son has improved. Certain days of the week, he goes to work with his father. Thank God, mentally I feel happy. One looks at the change, and it changes one's perspective. When you look at him badly, even when he has everything to be happy about, you are not happy.

My son is on the road to recovery because he loves life. He goes to his therapy, and he sees his psychiatrist. I am proud of him. I like that he wants to go see his service provider because I know he has confidence. He used to say that he did not need therapy and that it did not work. He is stable; he has not

tried to harm himself. As a family, we travel out of town and my son accompanies us. Besides, he is learning about himself and his friendships. He is a good son. In addition, he has very good feelings for people and his family.

The advice I give to families is to seek help. It is difficult to find it. One does not know where to start. I struggled a lot to reach people who advocate for family rights [RUHS-BH Family Advocate program].

Mental health is important. Due to lack of information, we do not know how to channel the problems. Little by little, we have learned to see the symptoms.

We need more support and more people who advocate for the rights of the family to expand help. It is more manageable, if the help is from the beginning.

Highlights

MHSA Annual Update FY 22-23

Community Services and Supports (CSS)

Full Service Partnership (FSP)

- **Outpatient FSP Tracks:** In addition to the already existing FSP programs in the outpatient system, FSP services have expanded county-wide to clinics across age groups. As a result, some FSP bridge programs that assisted clients with transitioning into less intensive programs were eliminated as this service was integrated into the FSP outpatient tracks.
- **First Episode Psychosis Coordinated Specialty Care FSP:** There are two programs that are currently designed to provide specialty care to youth experiencing the onset of psychosis, the regional TAY centers, and the Youth Hospital Intervention Program (YHIP). The number of youth requiring service has grown. This specialty FSP program will wraparound the youth and their families. This FSP team will have specialized training in Early Psychosis Intervention Programs. MHSA funds will initially be braided with a Mental Health Block Grant.

Crisis System of Care

- **Mobile Crisis Management Team (MCMT) Expansion:** MCMT are specialty crisis management teams that incorporate crisis, substance use, and homeless outreach expertise on one multi-disciplinary team. The number of teams has expanded from one in Lake Elsinore to additional teams in Perris, Desert Hot Springs, and Jurupa Valley
- **Community Behavioral Assessment Teams (CBAT) Expansion:** CBAT are police officer and clinical therapist partnership teams that respond to law enforcement dispatched, behavioral health calls in the community. These teams have expanded to include all the following law enforcement agencies:
 - Riverside
 - Menifee PD
 - Corona PD
 - Beaumont PD sharing with Cabazon Sheriff
 - Cathedral City PD
 - Palm Desert Sheriff
 - Hemet Sheriff
 - Jurupa Sheriff
 - Perris Sheriff
 - Thermal Sheriff
 - Lake Elsinore

- **Adult Residential Treatment (ART):** A new ART opened in Indio, January 2021. ART is a Social Rehabilitation Program with an average length of stay between 4-12 months with a goal to enhance independence and decision-making skills.

Outreach and Engagement: Peer Services

- **New Peer Support Oversight Administrator (PSOA):** A PSOA with lived experience as a consumer, a family member, and as a parent of child who carries a diagnosis has been hired to oversee all 3 of our lived experience practitioner programs: Consumer Affairs; Family Advocate; Parent Support and Training. The managerial positions that lead each of these programs remain and they report directly to the PSOA.
- **Peer Support and Resource Centers** Developments:
 - Four locations for the Peer Support & Resource Centers have been determined
 - Riverside** (Now Open!)
2085 Rustin Avenue, Riverside
 - Temecula** (Now Open!)
40925 County Center Drive, Suite 120, Temecula,
 - Perris**
450 E. San Jacinto Blvd., Building 2, Perris,
 - Indio**
44199 Monroe Street, Indio, CA
 - Recovery-oriented Class Schedule finalized for both Riverside and Temecula locations to commence February 4, 2022
 - Staffing recruitment under way for all locations
- **Building Peer Leaders Classes** (Formerly Peer Employment Training)
 - Peer Support Specialist Certification Training proposal plan was completed, and was approved by the State of California, now authorizing Riverside Peer Programming to certify Peer Support Specialists (PSS).
 - “Building Peer Leaders” was revitalized and re-developed to meet all domains of learning as defined under California regulations for the certification of PSS.

Prevention and Early Intervention (PEI):

- PEI is largely outreach based. Programs and providers are typically in the community at natural gathering spaces. The impacts of COVID severely limited access to community locations and schools for nearly all of the fiscal year.
- Outcome data demonstrates positive impacts in the lives of participants, however, there was a sharp decline in the numbers served due to limited access related to COVID.

PEI Workplan 1: Outreach, Awareness, and Stigma Reduction

- Cultural Outreach Expanded and new Cultural Liaisons were contracted to help bridge disparities. Populations include: Latino/Latina; African American; Asian/PI; Native American; LGBTQ+; Deaf/Hard of Hearing; Middle Eastern/North African (MENA); Spirituality and Faith Based Communities; US Military Veterans; and People with Disabilities.
 - Each Liaison will co-chair a community advisory committee for their cultural group.
 - The Cultural Liaisons provide outreach activities to educate their respective cultural community about behavioral health, reduce stigma related to behavioral health, and increase help seeking for behavioral health services.
 - In addition, the Liaisons will educate our own service system to improve cultural responsiveness.
 - 2 Senior-level Peer positions have been added to the Cultural Competency Unit to ensure the peer perspective in our Cultural Competency planning and activities.

- May is Mental Health Month and Suicide Prevention Awareness Month offered a calendar of virtual activities. Also, new this year, on our Up2Riverside.org webpage, we offered mental wellness kits to the first 250 Riverside County residents who visit the site and filled out the request form. These kits were met with enthusiasm and “sold out” by the second week of May. The Up2Riverside webpage saw 30,647 website visits and had 27,954 unique visitors in May 2021. For FY20/21, the Up2Riverside webpage saw 178,686 website visits and had 156,158 unique visitors.

- PEI Administration developed virtual trainings in response to COVID available to the general community focusing on mental health awareness, self-care and wellness, trauma and resiliency, and suicide prevention. Trainings were free and available every month. Over 3,000 participants attended the 96 virtual trainings that were offered.

- In June 2020, PEI released the Riverside County Suicide Prevention Strategic Plan: Building Hope and Resiliency. The Riverside County Suicide Prevention Coalition – a county and community partnership -- was kicked off on October 29, 2020. The Coalition is made up of 6 sub-committees. The inaugural year includes many accomplishments.
 - **Effective Messaging & Communications** developed social media images supporting suicide effective messaging. Hosted a webinar during suicide prevention week to provide tips and tools for working with the news media.
 - **Measuring and Sharing Outcomes** developed data briefs and a data dashboard to effectively share information on the status of suicide and attempts utilizing multiple sources.
 - **Upstream** addressed isolation which is a big risk factor for suicide. The sub-committee curated a series of short video clips provided by local youth that include messages of hope and encouragement targeting older adults.
 - **Prevention** developed trainings focused on strategic outreach to encourage more Riverside County residents to become trained helpers in suicide prevention. School engagement included standardizing policies across school districts to create collaboration and consistency, as well as, to transform schools into resources for the community to foster social-emotional growth and connection.

- **Intervention** worked to improve care transitions for individuals being discharged from inpatient hospitalization following a suicide attempt to encourage follow-up with outpatient services, and educate their support system.
- **Postvention** partnered with the Trauma Intervention Program (TIP) of Riverside County to develop LOSS kits for survivors, and enhance TIP's current volunteer training with specific suicide postvention curriculum.

Work plan 3: Early Intervention for Families in Schools

- PEACE4Kids Program: Due to COVID, RUHS-BH staff access to students in virtual schools was extremely challenging. The PEACE4Kids staff were re-directed to support larger community need in the outpatient clinics while schools adjusted to meeting student needs during the pandemic. This provided the opportunity to re-evaluate this project. The PEACE4Kids program will no longer be provided by RUHS-BH staff, and instead the program will go out to competitive bid specifically for school districts. The goal is to have PEACE4Kids programs in at least one school district per region.

Work plan 4: Transition Age Youth

- The Teen Suicide Awareness and Prevention Program (TSAPP) includes three components: Student Component; Staff Development; and, Parent/Community Education. Ninety-two percent of participating students reported they were able to use the information they learned to help a friend or peer in need. In FY20/21, TSAPP established Suicide Prevention Outreach groups at 65 school sites throughout Riverside County, conducted 61 Teen Suicide Prevention trainings to over 1,581 high/middle school students, conducted 31 suicide intervention trainings to 1,650 community and school personnel, and reached approximately 582 parents. TSAPP distributed a total of 11,436 resources and incentives, and coordinated 130 Suicide Prevention campaigns involving 103,611 students across Riverside County.

Work plan 7: Underserved Cultural Populations

- This year, the Building Resilience in African American Families (BRAAF) for girls' pilot program was expanded after a competitive bid process. The BRAAF project, which long included a boys' program, now includes a girls' program in both the Desert and Mid-County regions. We anticipate expanding the girls' program into the Western region soon.
- The long anticipated Native American Project: Strengthening the Circle has begun implementation after a competitive bid process. The project included a culturally tailored family program called Wellbriety Celebrating Families, a large community gathering called GONA (Gathering of Native Americans) that reflects cultural values, traditions, and spiritual practices, as well as the offering of cognitive-behavioral based therapy.
- The Mamás y Bebés program has expanded to the Desert region, making this program now available to pregnant and newly parenting Latina and African American women countywide. The program is a mood management perinatal group intervention for women at risk of post-partum depression.
- FY20/21 demonstrated continued success for KITE (Keeping Intergenerational Ties in Immigrant Families). KITE is a research-supported, 10-week parenting class for Asian/Pacific Islander (A/PI) families

with children ages 6-17. Nine KITE parenting program series were offered (6 in Chinese, 1 in Korean, and 2 in a combination of Tagalog/English). Due to COVID-19 restrictions, all KITE parenting classes were completed 100% virtually. Seventy-three parent participants successfully completed the program, which is an 86% completion rate of all who enrolled. There was a total of 33 KITE workshops offered with a total of 380 attendees, as well as a total of 179 KITE outreach activities that reached a total of 36,239 people.

Innovation (INN)

- **Resilient Brave Youth** (formerly known as CSEC): Resilient Brave Youth provided mobile trauma-informed services targeting youth who have been or are currently commercially, sexually exploited. This 5-year plan expires at the end of FY 21-22. Results developing from the end of this learning project have led to this specialty being fully integrated into the greater Children's System of Care instead of remaining as a stand-alone program. This will create more access points and support, as well as, an opportunity for more employees to be trained in working with this particular population.
- **Help@Hand** (formerly known as the Tech Suite):
 - The TakemyHand™ Live Peer Chat was a recipient of the California State Association of Counties Challenge Award.
 - Kiosks have been installed in waiting areas throughout the department to engage the community, introduce the technology, serve as an access point, and collect surveys. MHSA education and stakeholder participation has a featured link.
 - App for Independence (A4i) is a smart phone application that serves as digital support for the emotional wellness of people who experience psychosis. A pilot program using this app is currently underway. App tools include helping the user discern between auditory hallucinations and environmental sounds.
- New Innovation Plan proposals are being developed in concert with community stakeholders in order to secure State approvals for new plans by the end of 2022.

Workforce Education and Training (WET)

- **California Department of Health Care Access and Information (HCAI) Grant:** Riverside collaborated with the Southern Counties Regional Partnership (a collaborative of county WET Coordinators) to secure and define the use of a multi-million-dollar grant for the region. This grant allowed for the return and revitalization of some popular State administered recruitment and retention programs that ended due to the termination of WET funds in 2018. Some financial incentive programs and advanced training have already been implemented and include:
 - Graduate Student Stipends: Students who choose Riverside County behavioral health programs for their graduate level internships are eligible for a stipend.
 - Loan Repayment Awards: Current Department employees in hard to retain positions can apply for loan repayment awards in exchange for remaining in Riverside's behavioral health system for 1 year.
 - Advanced Training: Workforce training in evidenced-based practices for trauma and suicide intervention have already been provided.

Capital Facilities and Technology (CFTN)

- **The Place Safehaven Renovation**

“The Place” is a 25-bed permanent supportive housing property for chronically homeless consumers with 24/7 onsite supportive services in Riverside. Major renovation of this property is planned for spring 2022, with anticipated completion in late 2022. Renovation will increase bed capacity from 25 beds in shared rooms to 33 beds in single rooms, increase group space and common areas, and provide much needed upgrades to building infrastructure and living spaces.

- **Hemet Recovery Village (planning stages)**

A community of care that will include supportive housing, residential services, and outpatient services all on one campus.

- **MH Rehabilitation Center (MHRC) Expansion – 21 more beds!**

The Riverside County Telecare MHRC went from a 38 to a 59-bed sub-acute residential program located in Riverside. The program provides longer-term mental health recovery services within a supportive, structured, and secure inpatient environment designed to help clients prepare to move into the community and/or into lower levels of care.

- **Restorative Transformation Center – Opens summer 2022!**

This is a residential facility for social rehabilitation that will serve justice-involved consumers who require long-term psychiatric stabilization and are awaiting completion of a Restoration Diversion Program, as well as, adult consumers who are challenged to live independently due to their mental illness but can be cared for in a home-like social rehabilitation program.

Prevention and Early Intervention Quarterly Collaborative Lunch Meeting

Riverside University Health System – Behavioral Health, Prevention and Early Intervention (PEI) invites you to join us in our quarterly collaborative meetings. Building upon our community planning process we will have meetings throughout the year to keep you informed about PEI programming and services, build partnerships and collaborate, and work together to meet the prevention and early intervention needs for the individuals, children, families, and communities of Riverside County.

This meeting is open for anyone who works with those who are impacted by PEI programming, agencies and organizations seeking to partner with PEI programs and providers, anyone interested in learning more about PEI services and their impact on the community, as well as anyone interested in having a voice regarding PEI programs.

2022 Schedule

All meetings take place at the Rustin Conference Center located at;
2085 Rustin Ave. Riverside, CA 92507 Rm. # 1055

In the event that the meetings are not permitted to be held in-person, they will be held via Zoom.

Wednesday, March 30, 2022 12PM-2PM

Wednesday, June 29, 2022 12PM-2PM

Wednesday, September 28, 2022 12PM-2PM

December (Dark)

In-Person meetings, lunch will be served! Please RSVP to ensure we have enough food for all.

For more information or to RSVP,

please email: PEI@ruhealth.org or call 951-955-3448

This information is available in alternative formats upon request. If you are in need of a reasonable accommodation, please contact PEI at 951-955-3448.



THE ARENA

TAY RESOURCE & SUPPORT CENTER

Mid-County Collaborative 2022 Meeting Schedule

Takes place every **4th Wednesday** of each month via **Microsoft Teams**

From 3pm-4:30pm

The Arena is located at:

2560 N. Perris Blvd. Ste. N – 1 Perris, CA 92571

(951) 940-6755

The TAY Collaborative is a meeting comprised of community partners, Transitional Age Youth, and Riverside County departments and programs to discuss the needs of TAY in Mid-County. Networking, collaboration, and discussion all take place at this monthly meeting. We look forward to seeing you there.

Next meeting will be December 22!

2022 dates below:

January 22th	July 27th
February 26th	August 24th
March 23rd	September 28th
April 27th	October 26th
May 25th	November 23rd
June 22nd	December 28



TAY FLOW

TAY RESOURCE & SUPPORT CENTER

TAY DESERT FLOW Collaborative 2022 Meeting

Takes place every **1st Wednesday** of each month via **Zoom**

From 3pm-4:30pm

Schedule

TAY FLOW is located at:

78140 CALLE TAMPICO

La Quinta, CA 92253

(760)863-7970

The TAY Collaborative is a meeting comprised of community partners, Transitional Age Youth, and Riverside County departments and programs to discuss the needs of TAY in Mid-County. Networking, collaboration, and discussion all take place at this monthly meeting. We look forward to seeing you there.

January 5th	July 6th
February 2nd	August 3rd
March 2nd	September 7th
April 6th	October 5th
May 4th	November 2nd
June 1st	December 7th



STEPPING STONES TAY Resource & Support Center

Western Region Collaborative 2022 Meeting Schedule

Takes place every **2nd Wednesday** of each month via **Microsoft Teams**

From 2pm-3:30pm

Stepping Stones is located at:

1820 N. University Ave., Ste. 102 – Riverside, CA 92507

(951) 955-9800

The TAY Collaborative is a meeting comprised of community partners, Transitional Age Youth, and Riverside County departments and programs to discuss the needs of TAY in the Western Region. Networking, collaboration, and discussion all take place at this monthly meeting. We look forward to seeing you there.

Due to COVID restrictions, we are hosting these meetings virtually. Anyone interested in participating may email Maria Arnold at MArnold@ruhealth.org

Next meeting will be February 9th, 2022

January 12th	July 13th
February 9th	August 10th
March 9th	September 14th
April 13th	October 12th
May 11th	November 9th
June 8th	December 14th

COMMUNITY, PROVIDERS & STAFF
WORKING TOGETHER TO REDUCE
MENTAL ILLNESS STIGMA

CCRD

9am-11am

January 12
February 9
March 9
April 13
May 11
June 8
July 13
August 10
September 14
October 12
November 9

CAGSI

2:30pm-4pm

January 18
February 15
March 15
April 19
May 17
June 21
July 19
August 16
September 20
October 18
November 15

AAFWAG

10am-12pm

January 19
February 16
March 16
April 20
May 18
June 15
July 20
August 17
September 21
October 19
November 16

AATF

3:30pm-5pm

January 11
March 8
May 10
July 12
September 13
November 8

FOR MORE INFORMATION

CONTACT:

SECONTRERAS@RUHEALTH.ORG

OPEN TO ALL!

**CULTURAL COMPETENCY
PROGRAM**

**COMMITTEE MEETING SCHEDULE
2022**

 **Riverside
University
HEALTH SYSTEM**
Behavioral Health

Please Tell Us About Yourself

The information you provide will remain confidential and anonymous.

What is the Primary Language you speak at home?

- English
- Spanish
- Other? _____

Age Group:

- Under 18
- 18 – 25
- 26 – 59
- 60 or Older

Gender:

- Male
- Female
- Transgender/Other : _____

What is your Race/Ethnicity?

- Asian/Pacific Islander
- Black/African American
- Latino/Hispanic
- Tribal/Native/American Indian
(Tribe: _____)
- White/Caucasian
- Mixed Race: _____
- Other: _____

Do You identify as: Lesbian Gay Bisexual

Are you a Veteran? Yes No

Do you have a disability ? Blind Deaf Other

Write-in Other

Which of the following groups/categories apply to you?

- Mental Health Client/Consumer
- Family Member of a Mental Health Consumer
- County Mental Health Department Staff
- Substance Abuse Service Provider
- Community-Based/Non-Profit Mental Health Service Provider
- Community-Based Organization (**not** Mental Health Service Provider)
- Children and Family Services Organization
- K-12 Education Provider
- Law Enforcement
- Veteran Services
- Senior Services
- Hospital/Health Care Provider
- Advocate
- Other County Agency
- Tribal Agency: _____
- Other: _____

If you represent an agency or organization, please tell us which one and provide your role or position:

Agency: _____ Role/Position: _____

Please indicate the Region of the County in which you are most involved:

- Mid-County Region** (Hemet, San Jacinto, Perris, Lake Elsinore, Temecula, etc.)
- Western Region** (Riverside, Norco, Corona, Moreno Valley, etc.)
- Desert Region** (Banning, Blythe, Indio, Cathedral City, etc.)
- Other** (specify): _____