

**LOS ANGELES COUNTY DEPARTMENT OF MENTAL HEALTH**

Community Planning Process - MHA Three-Year Plan  
PREVENTION AND EARLY INTERVENTION

**PREVENTION AND EARLY INTERVENTION (PEI)**

**CATEGORIES**

Category 1A: Populations – Early Childhood/Birth to 5
Category 1B: Populations – Underserved Communities
Category 2A: Access – School-Based: K-12 Schools, Colleges, Universities, and Trade Schools
Category 2B: Access – Community Engagement (Including TAY Advisory Group)
Category 3A: Effective Practices – Suicide Prevention
Category 3B: Effective Practices – Evidence Based Practices/Treatment

**PEI CATEGORY 2A: SCHOOL BASED (K-12, COLLEGES, UNIVERSITIES)**

**GOAL:** Increase Access for services to youth in School-Based: K-12 Schools, Colleges, Universities, and Trade Schools

**A. PROGRAM, SERVICE, AND/OR INTERVENTION RECOMMENDATIONS**

*1. Improve or Expand Existing Programs (Exists Already)*

<b>Existing Program</b>	<b>Description</b>	<b>Expand/Improve</b>	<b>CPT Recs</b>
School Based Community Access Point (SBCAP)	1. Offers programming to support youth getting connected to services. Including an annual Summit for Districts/Schools to attend. - DMH SBCAP team provides Technical Assistance (TA) to school districts. TA supports includes: 1) participating in resource campaigns/fairs and providing student and caregiver workshops to build an understanding of mental health and wellbeing. 2) Coordinated Care in bridging schools and school mental health providers. 3) Crisis Postvention supports that include debrief and planning with schools and mobilizing resources to support in the aftermath of an incident, with a focus on suicide.	Expand	1,2, 4
Partnerships/ Collaborations	2. DMH continues to collaborate with Los Angeles County Office of Education (LACOE), LAUSD and other school districts to expand school services. - Working with LACOE and Managed Care Plans (MCP) in the implementation of State-	Expand	1, 3,4,5

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	<p>wide initiatives: <a href="#">Student Behavioral Health Incentive Program</a> (SBHIP) and <a href="#">Children Youth Behavioral Health Initiative</a> (CYBHI).</p> <ul style="list-style-type: none"> <li>- DMH SBCAP Team, Directly Operated Programs, and Legal Entity Network provide EI services.</li> <li>- LA Suicide Prevention Network has a Youth Advisory Board and provides training resources/information. Also has an annual Suicid Prevention Summit.</li> <li>- Youth Summit – Public health-Office of Violence Prevention</li> <li>- Prevention Programming with other Departments and organizations that work directly with youth at schools:</li> <li>- Dept. of Arts &amp; Culture – Creative Wellbeing – artists in the community and afterschool programs/assemblies</li> <li>- Wolf Connection - Power of the Pack Program, a multi-tiered program is an immersive digital education and empowerment experience for students aged 11-18</li> <li>- Friends Of The Children (FOTC) - a program that aims at preventing foster care entry and improve family stability and wellbeing for families identified by DCFS. It provides professional 1:1 mentorship to children for 12+ years starting around 4-6 years old.</li> <li>- UCLA Center Of Excellence (COE) <a href="#">Wellbeing for LA Learning Center</a> <ul style="list-style-type: none"> <li>- delivers a personalized and accessible learning environment that is available to learners at home, at work, or in transit. Designed for the workforce across Los Angeles County that supports the mental health and wellbeing of children, families, and adults within systems of care. Trainings designed for school staff, teachers, and school mental health staff.</li> </ul> </li> </ul>		
Olweus Bully Prevention Programming (OBPP)	3. OBPP is an Evidence Based Practice (EBP) proven to prevent and reduce bullying. It is a systems-change program which intervenes at the school, classroom, individual, and	Expand	2, 3

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	<p>community levels to impact everyone who comes in contact with the students.</p> <ul style="list-style-type: none"> <li>- OBPP aims to restructure the elementary, middle, and high school environment to reduce opportunities and rewards for bullying. OBPP has been more thoroughly evaluated than any other bullying prevention/reduction program so far.</li> </ul>		
CALMHSA-Directing Change	4. Statewide efforts to prevent suicide, reduce stigma and discrimination related to mental illness, and to promote the mental health and wellness of students, through film. Programming implemented in school districts from middle-high school.	Expand	2
Know the Five Signs	5. Training that provides a common language to identify when someone is suffering, connecting to help, and how to stay emotionally healthy.	Expand	2
Mental Health First Aid (MHFA)	6. Course that teaches participants how to identify, understand and respond to signs of mental illnesses and substance use disorders. The training provides the skills needed to reach out and provide initial help and support to someone who may be developing a mental health or substance use problem or experiencing a crisis.	Expand	2
Psychological First Aid	7. Provides guidance on responding to disaster, terrorism, or violence events that occur at a school using the <i>Psychological First Aid for Schools</i> intervention.	Expand	2
More Than Sad: Suicide Prevention Education for Teachers and Other School Personnel	8. Is an approximately 120-minute program that teaches educators to recognize signs of mental health distress in students and refer them for help.	Expand	2
Child Adolescent Suicide Review Team (CASRT)	9. A multidisciplinary team that conducts mortality reviews of any child in L.A. County who has died by suicide. DMH, DPH, DCFS, Medical Examiner's Office, LACOE, Probation participate in a closed door review. Meeting is not open to public due to PHI/HIPAA.	Expand	5

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Community School Initiative	10. Is currently in 15 schools – embedding community within school. - The State’s <a href="#">California Community Schools Partnership Program</a> (CCSPP) is funding several of the original community schools. - DMH can expand into other school sites including some middle schools and elementary schools.	Expand	1,3
College and Universities increase to access to care	11. <u>Both Directly Operated and Legal Entity providers collaborate with Colleges and Universities to increase access to care for students. Services include linkage, case management, and therapy services.</u>	Expand	1, 2

2. Add New Programs and/or Interventions (Does Not Exist)

Program or Service Recommendation	DMH &/or Partner	CPT Recs
1. Expand service to Transitional Age Youth (TAY) who are not enrolling in colleges, universities, or trade schools. Youth struggling with transitioning into adulthood.	DMH/ Partners	
2.		

**1. ACTION RECOMMENDATIONS: POLICY, PRACTICE, AND/OR ADVOCACY**

NONE

**CPT RECOMMENDATIONS** (through 10/27)

1. Increase school-based program focused on mental health.
2. Implement mental health curriculum in educational institutions, such as:
  - a. Mental Health K-12
  - b. Mental Health colleges / universities
3. Implement a mental health strategy to break the school to jail pipeline.
4. Increase the integration of prevention and early intervention programs into schools to help children deal with their trauma, PTSD, stigma and substance abuse.
5. Strengthen DMH partnerships with schools and prevention and early intervention strategies for children in afterschool programs.

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**PEI CATEGORY 2B: COMMUNITY ENGAGEMENT**

**GOAL:** Increase Access for PEI services leveraging community platforms/partners.

**A. PROGRAM, SERVICE, AND/OR INTERVENTION RECOMMENDATIONS**

*1. Improve or Expand Existing Programs (Exists Already)*

<b>Existing Program</b>	<b>Description</b>	<b>Expand/ Improve</b>	<b>CPT Recs</b>
Community Family Resource Center (CFRC)	1. The CFRC is designed to create a coordinated, community owned and driven space where families and individuals can easily access the services they need to enhance their wellbeing. The CFRCs will create partnerships with trusted networks of care, individual community leaders, CBOs, and public and private entities to leverage the strengths and capacities of each to best respond to the needs of individuals and families in the community it serves.	Expand	7, 10,11, 12
IPrevail	2. It is accessible through any device connected to the internet. This platform offers a one-of-a-kind network of mental health support. From interactive lessons, chats with peer support coaches, to topic-based community support groups, you can see your progress being made & connect with other people going through similar life experiences all in one place.	Expand	12,22
United Mental Health Promoters Network	3. The Mental Health Promoters Network project is a community outreach effort, serving to strengthen communities and create career paths for those community members functioning under the umbrella of Mental Health Promoters.	Expand	7,12,14
Partnerships with the Library	4. <b>New Parent Engagement-Welcome to the Library and the World</b> : Public Libraries and DHS Women's Health will offer a Welcome to the Library and the World kit which will include information on the library Smart Start Early Literacy programs and services. The program will be offered at 45 locations twice a year,	Expand	1, 12, 14, 27

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	<p>and though a a virtual program every quarter.</p> <p><b>-Triple P Parent/Caregiver Engagement</b> Triple P is an effective evidence based practice that gives parents and caregivers with simple and practical strategies to help them build strong, healthy relationships, confidently manage their children’s behavior and prevent problems developing.</p> <p><b>- School Readiness</b> An early literacy program designed for toddlers and preschoolers to help empower parents and guardians in supporting the education needs of their children. While enjoying books, songs, rhymes and fun, kids build early literacy skills, basic math skills, and social skills, and other essential school readiness competencies.</p>		
Partnerships with Parks and Recreation	<p><b>5. Our SPOT Teen Program: Social Places and Opportunities for Teens After-School Program:</b> is a comprehensive after-school teen program aimed at engaging and providing community youth with the support, life-skills and positive experiences that will empower them to create bright futures for themselves.</p> <p><b>-We Rise Parks at Sunset</b> A program which creates access to self-care programming in 58 LA County parks and is offered during mental health awareness month. It provides repeated opportunities to access resources and information on mental health support including free mental well-being workshops.</p> <p><b>- DPR Safe Passages: Community Engagement and Safe Passages for Youth and Communities:</b> utilizes trained gang interventionists and ambassadors to implement peace maintenance among gang neighborhoods to ensure safety to and from parks, and during park activities and provide crisis intervention services at the parks.</p> <p><b>-Parks after Dark Parks at Sunset</b></p>	Expand and Improve	12, 14, 27

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	Designed for families and adults to participate in workshops and classes promoting self-care and healing, three evenings a week over 8-weeks. Activities include sports, fitness, arts and culture, movies and concerts and more.		
Phone number for crisis support	<p>6. 988 Suicide &amp; Crisis Lifeline officially launched across the United States on July 16, 2022. Comprised of a national network of local crisis centers, 988 counselors provide free, confidential, 24/7 support and resources to people experiencing or affected by suicidal, mental health, and/or substance use crisis. Callers can access this lifesaving service by simply calling or texting 988, or via online chat on their website.</p> <p>The Los Angeles County Department of Mental Health (LACDMH) supports the wellbeing of our County residents and communities. LACDMH's Help Line is available 24/7 to provide mental health support, resources and referrals at (800) 854-7771.</p>	Expand	12, 32
Youth Services	<p>7. DMH is developing a Youth Advisory Group to help lift up these services. For PEI, the majority of existing services are for youth and TAY populations.</p> <p>- DMH is currently in partnership with LACOE to implement the Community School Initiative (CSI) in High Schools. With CSI, DMH is able to provide an array of services, including navigation support.</p>	Expand	7, 12, 26
Peer services, supports and training	<p>8. DMH currently has Mental Health Promoters, Parent Partner Training Academy and Peer Training Certifications that increase the use and capacity of peers within the department.</p> <p>We will increase partnership with new DMH Chief of Peers to offer more peer support and increased roles.</p>	Expand	7,12,23, 24
Senior services and centers	<p>9. DMH currently has specialized programming through Generaciones en Accion (Laugh Therapy &amp; Gratitude &amp; Older Latino Adults</p>	Expand	7, 14, 25

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	and Caregivers)		
Support Group Referrals	<p>10. Strengthen the referral support for groups suffering from: trauma, lived experiences, family members and children</p> <p>Current: Seeking Safety, Survivors of Suicide Loss for adults/youth, Triple P, IY, MAP, CBT, IPT, Clinician and LE specific programming.</p>	Improve	14, 16
Domestic violence support	<p>11. DMH has funded wellbeing services with community providers in the past but does not have specific programs currently. Directly operated and Legal Entities provide mental health services in the service areas.</p> <p>-The Department is actively exploring how we can expand these services through partnerships with CBOs.</p>	Expand & Improve	13
Partnerships with faith-based organizations	<p>12. DMH has expanded partnership with faith-based organizations, provided trainings to clergy, leaders, and staff.</p> <p>-DMH currently has the Health Neighborhood Liaison, Faith Based Meetings. Faith based centers request and receive training and identify resources needed in the communities represented/served.</p> <p>-DMH's Faith Based Advisory Council (FBAC) can help coordinate and expand this work.</p> <p>-DMH will engage with the FBAC to engage in activities around capacity building.</p>	Expand	4, 8, 9

*2. Add New Programs and/or Interventions (Does Not Exist)*

<b>Program or Service Recommendation</b>	<b>DMH &amp;/or Partner</b>	<b>CPT Recs</b>
1. Strengthen the referral support for groups suffering from: trauma, lived experiences, family members and children	DMH	12



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2. Increase programming for older adults.	DMH and Partners	
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**B. ACTION RECOMMENDATIONS: POLICY, PRACTICE, AND/OR ADVOCACY**

1. Increase DMH efforts to decriminalize mental illness, especially for those with mental illness in public spaces.
2. Reduce the silos and barriers that keep CBOs and systems from working together to engage in cross-sector collaborations/solutions. (29)
3. Increase legal support for community organizations to apply for master agreement. Streamline the RFP process for community organizations.
4. Increase Stakeholder Participation in meetings and planning workgroups.
5. Increase marketing/publicity of existing resources that address social determinates of health online (website and social media).
6. Increase support for navigating services to address the technological divide.
7. Increase investment in service promotion, such as updated booklets, resource guides and leverage technology to promote services.
8. Increase the level of cultural humility within the department.
9. Strengthen DMHs linguistic competency.
10. Increase the amount of Peer and Family/Caregiver support for groups and classes.

**CPT RECOMMENDATIONS** (through 10/27)

1. Implement literacy program that helps develop intellect to become productive members of the community
2. Increase use of NAMI prevention services/resources, such as: mental health coloring book, presentations for middle and high school students, back to school resources, mental health college guide, free online card game (Call it Out Loud). (Represented in Category 2A: School Based).
3. Implement resources for children (similar to those of NAMI) with middle and high schools students to address challenges in relationships, life and mental health. (Represented in Category 2A: School Based).
4. Increase amount of mental health education at faith centers
5. Increase partnership with faith-based organizations (houses of worship) to provide services at the local level.
6. More effective engagement with mental health clients
7. Many issues in the PEI group to focus on, as it pertains to children, youth, families in regard to mental health.
8. Increase access to more resources by clients and their family.

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9. Increase support for domestic violence.
10. Support the outreach engagement process so people in need can be effectively serviced
11. Increase DMH efforts to decriminalize mental illness, especially for those with mental illness in public spaces.
12. Strengthen the referral support for groups suffering from: trauma, lived experiences, family members and children (clubs).
13. Increase the amount of Peer and Family/Caregiver support for groups and classes.
14. Strengthen DMHs linguistic competency.
15. Increase the level of cultural humility within the department.
16. Increase investment in service promotion, such as updated booklets, resource guides and leverage technology to promote services.
17. Increase support for navigating services to address the technological divide.
18. Increase marketing/publicity of existing resources that address social determinates of health online (website and social media).
19. Increase the use of peer services, peer support and training for peers.
20. Increase the use of peers to do early intervention work on the streets and in schools.
21. Increase the amount of senior services and centers.
22. Increase the amount of youth services.
23. Increase the number of resources in community-based settings (e.g., every park, recreation, community space).
24. Increase amount of investment in programming in all SPAs (including 6).
25. Increase stakeholder participation across all SALTs.
26. Inform the department and providers on the support needed for sex workers.
27. Increase legal support for community organizations to apply for master agreement. Streamline the RFP process for community organizations.
28. Create a centralized phone number for crisis support without having to contact law enforcement, provide care on the streets, and provide funds for experts.
29. Reduce the silos and barriers that keep CBOs and systems from working together to engage in cross-sector collaborations/solutions.