

APPENDIX 7

PEI Programs Extracted
from FY 19-20 Annual Update

Prevention/Early Intervention Programs

<p>Stigma and Discrimination Reduction</p> <ul style="list-style-type: none"> - Lesbian, Gay, Bisexual, Transgender, and Questioning (LGBTQ) Connection Project 	<p>Prevention</p> <ul style="list-style-type: none"> - American Canyon Student Assistance Program - Home Visitation Program - Kids Exposed to Domestic Violence - Native American PEI Project - Strengthening Families at Risk - Upvalley PEI Project 	<p>Early Intervention</p> <ul style="list-style-type: none"> - Court and Community Student Assistance Program (SAP) - Healthy Minds, Healthy Aging Program 	<p>Outreach for recognizing signs of Mental Illness</p> <ul style="list-style-type: none"> • System Navigator Program (CSS Component)
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*Note, the Access and Linkage to Treatment strategy within the PEI regulations is implemented throughout all PEI programs with the exception of the Stigma and Discrimination Reduction Category as the nature of the program is focused more on training and technical assistance.

PEI Evaluation Report

FY 16-17 and FY 17-18

The nine Prevention and Early Intervention (PEI) programs in Napa County have been funded to provide services since 2011. In FY 16-17 they began piloting program evaluation measures with the intent that program evaluation would continue into FY 17-18. Several things occurred that interrupted the program evaluation:

- In October 2017, Napa County experienced devastating fires. This event meant that the mental health division staff and each of the funded agencies turned their attention to disaster response for several months.
- The MHSA staff person who developed the program evaluation pilot measures and worked with the programs to plan the FY 17-18 evaluation, took a position in another division. Due to hiring freezes, the disaster and other obligations, filling this position took longer than anticipated. The program evaluation was not supported during this time.
- Many of the funded programs have had changes in staffing since FY 16-17. As staff began compiling the information for the evaluation report, the person who had submitted the data in FY 16-17 or FY 17-18 was different than the current contact for the program. In some cases, the original contact had left the program.

A review of the FY 16-17 and FY 17-18 data available for evaluation showed that programs had diligently collected and submitted the demographic and outreach data. There was significant variability in the submission of the outcome data intended for the evaluation report. The following scenarios summarize the situations encountered:

- Partial outcome data was collected and reported. For several programs, data was reported for most of the outcome measures.

- The outcome data submitted was tabulated incorrectly and the original source data was not available to verify the calculations.
- The outcome data collected for FY 17-18 did not align with the outcome data collected in FY 16-17. Due to program staffing changes, it was not clear which data should be collected and why. In FY 17-18 program staff collected and submitted data that was not relevant to the program activities funded by PEI.
- The data was not collected. In some cases, this was because program staff was confused about how to collect the information, in other instances, the surveys and/or forms needed were not developed for the programs. This was the most frequent scenario.

MHSA staff and the Acting Mental Health Director reviewed the spotty program evaluation data and decided to include only the portions that were verifiable and relevant. This resulted in very little data.

MHSA staff is working with an evaluation consultant to develop program logic models, evaluation plans and data collection tools. This will take place in May and June 2019. For some programs, the process will result in partial program evaluation data for FY 18-19. For most programs these efforts will result in program evaluation data for FY 19-20 and beyond.

Prevention Program: American Canyon Student Assistance Program

Program Description

The American Canyon Student Assistance Program was implemented in 2011 to provide accessible and coordinated prevention and early intervention mental health services for youth in American Canyon schools.

The project uses a Wellness Model to provide universal prevention (Tier 1), group support (Tier 2) for students with mild to moderate mental health needs and adds more individualized supports (Tier 3) for students with more serious mental health needs.

When the program began in 2011, MHSA PEI funds were used in all three tiers. In 2014, the Napa Valley Unified School District (NVUSD) began to support Tier 1 and to expand it to other schools in the district. In FY 16-17 and FY 17-18, MHSA PEI funds were used to identify and support students with mental health concerns and to provide Tier 2 and Tier 3 services. Funding from MHSA PEI also provided staff training to be sure the student screening is done with fidelity in each school. The Napa Valley Unified School District (NVUSD) continues to support Tier 1, the universal prevention component of the Wellness Model.

The program currently serves students in three schools in NVUSD that are in the City of American Canyon: Napa Junction Elementary School (NJES), American Canyon Middle School and American Canyon High School.

Program Funding and Cost per Individual Served

	FY 16-17	FY 17-18
Total Program Funding	\$159,807	\$159,807
Number of Individuals Served	91	305
Cost per Individual Served	\$1,756	\$523.96

NVUSD: Tier 1

Tier 1: NVUSD has implemented universal prevention messages using the Positive Behavioral Interventions and Supports (PBIS) framework. This framework and the associated training are available to all schools in the district. NVUSD schools decide whether or not to implement the framework. Once implemented, there is a school-wide coordinated effort to teach students behavioral expectations and reward students for following them. The district chose the Building Effective Schools Together (BEST) curriculum to bring this framework to the staff and students. Each of the schools in this project continue to use PBIS and BEST. Tier 1 is supported by NVUSD and is not part of the MSHA PEI evaluation.

MHSA Prevention and Early Intervention: Tier 2 and 3

Wellness Team Screenings: Every six weeks staff at Napa Junction Elementary School, American Canyon Middle School and American Canyon High School meet to review data on three indicators for all students: grades, attendance and office discipline referrals. Based on these criteria, students are identified who may need additional support. In FY

2017-2018, staff asked teachers to complete the Walker Screening Inventory (WSI) for identified students. In FY 2018-2019, staff shifted to using the Strengths and Difficulties Questionnaire (SDQ). (The findings from the SDQ will be included in the FY 18-19 to FY 20-21 evaluation report.)

Tier 2 Services: Group support is offered to students who have mild to moderate mental health needs. The interventions at this level of service are designed to teach students skills to manage common and shared mental health concerns. Students who are screened and determined to need Tier 2 mental health services also benefit from the school administrators and staff working together in Student Success Teams. This level of intervention may include referrals to mental health providers.

Tier 3 Services: Students who have serious mental health needs receive more intensive supports. These students are offered individualized interventions to address their mental health needs. These plans include referrals to mental health providers as indicated.

Program Activities

The American Canyon Student Assistance Program works to identify, screen and support students at each of the three schools. The data in this section describes the number of students who were served by these activities and the demographics of the students who received Tier 2 and Tier 3 supports.

Students are identified by Wellness Team and receive Tier 2 and Tier 3 supports

	FY 16-17		FY 17-18	
	Number of Students	Percentage of Students	Number of Students	Percentage of Students
Identify Students				
Students identified by Wellness Team	91	3%	304	10%
Total students (all schools)	3,031		3,036	
Screen Students				
Students completing a WSI screening (pre)	--	--	304	100%
Students identified by Wellness Team	91		304	
Support Students				
Students supported with Tier 2 or Tier 3 services	91	100%	262	86%
Students with Tier 3 services	19	21%	57	22%
Total students served by Wellness Team	91		305	

Demographics of Students who received Tier 2 or Tier 3 Services

Demographic Categories	FY 16-17		FY 17-18	
	Number of Students	Percentage of Students	Number of Students	Percentage of Students
Age				
0-5 years	89	98%	12	4%
6 to 15 years			254	83%
16 to 25 years	2	2%	39	13%
26 to 59 years	0	0%	0	0%
60+ years	0	0%	0	0%
Race				
Am. Indian or Alaska Native	1	1%	12	4%
Asian	1	1%	18	6%
Black or African American	14	15%	48	16%
Native Hawaiian or Pacific Islander	4	4%	46	15%
White	40	44%	168	55%
Other	1	1%	5	2%
More than one race	--	--	5	2%
Unknown/Not Collected/Declined	12	13%	3	1%
Ethnicity				
Hispanic or Latino	18	20%	146	48%
Non-Hispanic or Latino	--	--	153	50%
More than one Ethnicity	--	--	2	1%
Unknown/Not Collected/Declined	73	80%	4	1%
Primary Language				
English	52	57%	238	78%
Spanish	24	26%	46	15%
Indigenous	--	--	0	0%
Other	3	3%	18	6%
Unknown/Not Collected/Declined	12	13%	3	1%
Sexual Orientation				
Gay or Lesbian	--	--	6	2%
Heterosexual or Straight	--	--	0	0%
Bisexual	--	--	2	1%
Questioning or Unsure	--	--	8	3%
Queer	--	--	0	0%
Another Sexual Orientation	--	--	0	0%
Unknown/Not Collected/Declined	91	100%	289	95%
Disabilities				
Difficulty seeing	--	--	0	0%

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	FY 16-17		FY 17-18	
Demographic Categories	Number of Students	Percentage of Students	Number of Students	Percentage of Students
Difficulty hearing or having speech understood	--	--	16	5%
Mental (learning disability, developmental disability, dementia)	--	--	16	5%
Mobility/Physical Disability	--	--	2	1%
Chronic Health Condition	--	--	76	25%
Other	--	--	1	0%
Unknown/Not Collected/Declined	91	100%	--	--
Gender: Assigned at Birth				
Male	45	49%	170	56%
Female	34	37%	135	44%
Unknown/Not Collected/Declined	12	13%	--	--
Total Students Served	91		305	

Program Outcomes

The program outcomes are divided into two areas. The first area are short-term outcomes related to referrals that happen in the first months of service. The second section details the longer-term outcomes that are expected by the end of the school year.

Students are identified by Wellness Center staff

All students who were identified by the Wellness Team received services from Wellness Center staff in both fiscal years.

	FY 16-17		FY 17-18	
	Number of Students	Percentage of Students	Number of Students	Percentage of Students
Students identified/served by Wellness Team	91	100%	305	100%

Students are referred to Mental Health Services

Some students receiving Tier 2 and Tier 3 mental health supports are referred to mental health services. These services may take place on the school campus at the Wellness Center or may be in the community depending on the needs of the students and/or the families.

Number of students referred for mental health services

In FY 16-17, 12 students were given mental health treatment referrals, but the type of referral was not yet tracked. In FY 17-18, 46 students were referred. The following table shows the number of referrals given in both years.

Mental Health Referral	FY 16-17		FY 17-18	
	Number of Students	Percentage of Students	Number of Students	Percentage of Students
Aldea	--	--	11	19%
Aldea/Wolfe Center	--	--	14	25%
Kaiser	--	--	12	21%
Mentis	--	--	9	16%
Napa County Mental Health	--	--	8	14%
OLE Health	--	--	2	4%
Solano County Mental Health	--	--	1	2%
Total Mental Health Referrals	--	--	57	

Mental Health Referrals:

Information about mental health referrals was not tracked by all PEI programs in Napa County in FY 16-17 or FY 17-18. Napa County MHSA staff is working with all PEI programs to develop ways to begin to track this information in FY 19-20.

Data pending for FY 19-20

Average number of days from when need was identified by youth and/or family and participation in services--*defined as participating at least once in service.*

Students are referred to community (non-clinical) services

Students receiving Tier 2 and Tier 3 mental health supports were referred for services other than mental health treatment. In FY 16-17 the total number of referrals was tracked, but not the number of students referred. In FY 17-18, 222 referrals were given to the 305 students served at the Wellness Centers. The most common referral was for healthcare related services.

Service Referrals (not mental health treatment)	FY 16-17	FY 17-18

services)	Number of Referrals	Percentage of Referrals	Number of Referrals	Percentage of Referrals
Healthcare (physician, pediatrician)	--	--	39	18%
School/Educational Needs	--	--	23	10%
Adult/Child Protective Services	--	--	23	10%
Alcohol & Drug (non-VCBH)	--	--	22	10%
Support Program/Group	--	--	18	8%
Family Support	--	--	16	7%
Basic Needs (food)	--	--	14	6%
Basic Needs (shelter)	--	--	12	5%
Parenting	--	--	11	5%
Healthcare (insurance)	--	--	10	5%
Alcohol & Drug (VCBH)	--	--	10	5%
Domestic Violence	--	--	9	4%
Legal	--	--	7	3%
Basic Needs (clothing)	--	--	5	2%
Healthcare (dental)	--	--	2	1%
Triple P Parenting	--	--	1	0%
Total Community (non-clinical) Referrals	121		222	

Community (Non-Clinical) Referrals:

More detailed information about referrals (see below) was not tracked by PEI programs in Napa County in FY 16-17 or FY 17-18. Napa County MHSA staff is working with all PEI programs to develop ways to begin to track this information in FY 19-20.

Data pending for FY 19-20

- Number and type of services used in the Community-- *defined as participated at least once in the service*
- Average number of days from when referral was given and participation in services--*defined as participating at least once in service.*
- Description of how the program encouraged access to service and follow-through on services

Improvement in Grades, Attendance and Office Discipline Referrals

The same indicators that were used to screen students into the Wellness Center’s Tier 2 and Tier 3 services were tracked school-wide to monitor changes. All of the indicators improved at least slightly from FY 16-17 to 17-18 (*shown in green text*) with the exception of attendance at Napa Junction Elementary School (*shown in red text*).

School Wide Indicators	Percentage of All Students at School		
	2016-2017	2017-2018	Change from FY 16-17 to 17-18
Percent of Students with GPA less than 2.0			

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Napa Junction Elementary	n/a	n/a	
American Canyon Middle School	13.7%	10.2%	-3.5%
American Canyon High School	19.6%	18.2%	-1.4%
Percent of Students with at least 10% of days absent			
Napa Junction Elementary	9.9%	11.6%	1.7%
American Canyon Middle School	9.2%	8.3%	-0.9%
American Canyon High School	9.5%	7.0%	-2.5%
Percent of Students with at least 6 Office Discipline referrals			
Napa Junction Elementary	0.2%	0.0%	-0.2%
American Canyon Middle School	7.1%	5.7%	-1.4%
American Canyon High School	0.9%	0.4%	-0.5%

In FY 16-17, a sample of these indicators were reviewed for 79 students receiving Tier 2 or Tier 3 services. The percentage of these students who improved, appear to exceed the school-wide averages shown below. **Note that the measures are similar but not equivalent.**

	FY 16-17		FY 17-18	
	Number of Students	Percentage of Students	Number of Students	Percentage of Students
Maintained or improved grades	7	9%	--	--
Maintained or improved attendance	10	13%	--	--
Reduced number of office referrals	11	14%	--	--
Total Students in Sample	79		--	--

Improvement on Walker Screening Inventory (WSI)

At the end of services (or the end of the school year, whichever comes first), the students are re-screened using the Walker Screening Inventory (WSI). Teachers indicated that over half (57%) of the students identified and served by the Wellness Center staff in FY 17-18 exhibited an increase in positive behaviors.

Walker Screening Inventory (WSI) scores for students who received Tier 2 or Tier 3 Services (n=304)

	FY 16-17		FY 17-18	
	Number of Students	Percentage of Students	Number of Students	Percentage of Students
Positive Change in WSI scores (behavior improved)	--	--	173	57%
Negative Change in WSI scores (behavior declined)	--	--	60	20%
No Change in WSI Scores (same behavior)	--	--	8	3%
WSI Pre Score Only (change is unknown)	--	--	63	21%
Students completing a WSI screening (pre)	--	--	304	

Prevention Program: Native American PEI Project

Program Description

The Native American PEI Project addresses (1) the lack of information about Native history and experiences, (2) the lack of enculturation for Native people in Napa County, and (3) the need to improve access to mental health services for Native people in Napa County. Since 2011, they have been providing outreach to the community and ongoing workshops to Native American individuals who are indigenous to Napa County and surrounding areas. Community members who are interested in Native history and experiences are also welcomed.

Organizational Partnerships are a continual focus of project. Staff meet with mental health organizations, school leadership, and community agency leaders to discuss how to incorporate culturally competent practices into services that are provided to the community.

Outreach includes presentations to area schools, community groups and organizations. It also includes providing more general information by participating in health fairs and community events. Outreach is designed to address the lack of information of Native history and experiences and to inform individuals about the workshops.

The workshops also provide information about history and experiences. They also incorporate enculturation by including the norms of indigenous cultures including ideas, concepts and values through traditional practices and crafts. Staff at Suscol Intertribal Council is able to develop trust and relationships with these individuals. This rapport helps them to encourage individuals to discuss their needs for mental health and/or community resources and allows the staff to provide screenings and referrals.

Program Funding and Cost per Individual Served

	FY 16-17	FY 17-18
Total Program Funding	\$94,878	\$94,878
Number of Individuals Served	1,115	850
Cost per Individual Served	\$85.09	\$111.62

Program Activities

This section describes the work that Suscol Council does to provide outreach and workshops for individuals in Napa County.

Outreach is provided to community groups and at health fairs to share information about Native History and Experiences in Napa County.

In FY 17-18, 37 presentations were given by Suscol Intertribal Staff to community groups and organizations in the City of Napa (90%, 34 presentations), the Town of Yountville (5%, 2 presentations), and City of St Helena (5%, 2 presentations). Additionally, staff participated in three community fairs in the City of Napa.

The presentations were most likely to take place in schools (24%, 9 presentations), at the Innovation Community Center, a peer-led center for adults with Serious Mental Illness (30%, 11 presentations), and VOICES, an agency that addresses the specific needs of youth, foster youth and youth who identify as LGBTQ (11%, four presentations).

All of the outreach was conducted in English, three of the events were also presented in Spanish. Suscol Intertribal Council staff provided handouts about the history of Native people in the Napa Valley as well as information about the ongoing workshops as indicated. Self-care packages were distributed at two healing events that were focused on recovering from Napa Complex Fires in October 2017.

Outreach Content	FY 2016-17		FY 2017-18	
	Number of Events	Percent of Events	Number of Events	Percent of Events
Reduce Stigma and Discrimination				
Prevention			40	100
Improve timely access to Services for underserved pops				

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Outreach Content	FY 2016-17		FY 2017-18	
	Number of Events	Percent of Events	Number of Events	Percent of Events
Outreach to Recognize Early Signs of MI				
Access & Linkage to Service for People with SMI				
Outreach Venue				
Community Fair			3	
Speaking Event/Presentation				
Church			2	
School			9	2
Interagency meeting			3	
Other (specify)			23	5
<i>Innovations Community Center</i>			11	2
<i>VOICES</i>			4	1
<i>Private residence</i>			2	
<i>Veterans Home</i>			2	
<i>Pizza Hut</i>			1	
<i>St. Helena Library</i>			1	
<i>Suscol Office</i>			1	
<i>Trancas Crossing Park</i>			1	
Outreach Language				
English			40	10
Spanish				
Outreach Topics				
Information about Native People in Napa County	--	--	13	3
Talking Circle	--	--	11	2
Craft and/or Music of Native People in Napa County	--	--	6	1
Healing Event: Native Healing Elements and Traditions	--	--	4	1
Health Fairs/Community Events	--	--	3	
Drum Circle	--	--	2	
Community Conversations	--	--	2	
Total Outreach Events			40	

Outreach Population	Number of Participants	Percent of Participants
Community Member	401	51%
Parent	34	4%
Clinician	20	3%
Nurse		
Educator	4	1%
Students	324	41%
Law Enforcement		
Other		
Total Participants	783	

Ongoing workshops provide information about Native History, enculturation and access to services
 Data pending for FY 19-20

- Classes share the norms of indigenous cultures including ideas, concepts and values through traditional practices and crafts with individuals in Napa County.

- Information about signs and symptoms of mental health concerns are shared with participants
- Information about community resources for mental health concerns and other needs are shared with participants

Individuals in ongoing classes are screened for mental health concerns and/or other resource needs and referred as indicated.

- In FY 16-17, 9 individuals were referred for mental health services.
- In FY 17-18, 4 individuals were referred for mental health services.

Description of Individuals who participated in workshops (demographics)

Race	FY 16-17 (duplicated) includes workshops and outreach		FY 17-18 (unduplicated)	
	Frequency	Percent	Frequency	Percent
American Indian or Alaska Native	336	30%	43	64%
More than one Race	515	46%	18	27%
White	133	12%	3	4%
Other	0	0%	4	6%
Unknown/Not Collected/Declined	131	12%	3	4%
Ethnicity				
Hispanic or Latino	105	9%	9	13%
Non-Hispanic or Latino	1,010	91%	58	87%
Primary Language				
English	1,115	100%	65	97%
Spanish			2	3%
Age				
0-5 years old	483	43%	0	0%
6-15 years old			8	12%
16-25 years old	137	12%	2	3%
26-59 years old	369	33%	27	40%
60+ years old	126	11%	22	33%
Unknown/Not Collected/Declined	0	0%	9	13%
Disabilities				
Mental (learning disability, developmental disability, dementia)	--	--	2	3%
Chronic Health Condition	--	--	2	3%
Mobility/Physical Disability	--	--	1	1%
Difficulty seeing	--	--	0	0%
Difficulty hearing or having speech understood	--	--	0	0%
Other	--	--	0	0%
Unknown/Not Collected/Declined	1,115	100%	0	0%
Underserved Populations				
Native American	336	30%	43	64%
Older Adult	126	11%	22	33%
Latino/Hispanic	105	9%	9	13%
LGBTQ	--		6	9%
Veteran	--		4	6%
Geographically Underserved	94	8%	0	0%
Sexual Orientation				
Gay or Lesbian	--	--	6	9%
Heterosexual or Straight	--	--	44	66%
Unknown/Not Collected/Declined	1,115	100%	28	42%
Gender Assigned at Birth				

Male	--	--	24	36%
Female	--	--	43	64%
Current Gender Identity				
Male	454	41%	23	34%
Female	647	58%	43	64%
Transgender	--	--	0	0%
Genderqueer	--	--	0	0%
Questioning or Unsure	--	--	0	0%
Another Gender Identity	14	1%	0	0%
Unknown/Not Collected/Declined	0	0%	1	1%
Total Participants	1,115		67	

Program Outcomes

Program outcomes are divided into short-term (changes expected after a workshop) and long term (changes expected during a fiscal year).

Individuals in workshops report improved knowledge and understanding of the norms of indigenous cultures including ideas, concepts and values.

- In FY 16-17, 541 youth reported an increase in cultural awareness.

Data pending for FY 19-20

- Short Term Outcome: Individuals in workshops report improved knowledge and understanding of the norms of indigenous cultures including ideas, concepts and values.
- Short Term Outcome: Individuals in workshops report knowledge of (1) signs and symptoms of mental health concerns, (2) mental health resources, and (3) community resources addressing basic needs.
- Short Term Outcome: Individuals in workshops are screened and referred for mental health services
- Short Term Outcome: Individuals in workshops are screened and referred for other resource needs (besides mental health).
- Long Term Outcome: Community awareness about Native History and Experiences in Napa County is improved.
- Long Term Outcome: Community Awareness about ongoing workshops available for Native individuals and allies in Napa County is improved
- Long Term Outcome: Individuals in workshops with mental health needs receive services
- Long Term Outcome: Individuals in workshops with other resource needs (besides mental health) receive services.

Prevention Program: NEWS Domestic Violence PEI Project

Program Description

The Nurturing Empowerment Worth Safety (NEWS) program has operated the Domestic Violence PEI project since 2011.

The program provides **outreach** to community groups, at community events and for health fairs and festivals in Napa County to educate the community about the effects of domestic violence on children.

Staff **identify children who have been exposed to domestic violence** and screen the children using a Universal Screening Tool to determine the impact of the trauma. Children are referred to the Domestic Violence PEI project services through the community outreach and by agency staff who refer children who participate in domestic violence services and shelters at NEWS and in Napa County.

The Domestic Violence PEI Project provides **art therapy, tutoring and a support group to children** exposed to domestic violence to **reduce their risk factors and increase their protective factors**. Children are referred to mental health and community services as indicated.

Parents receive **parent education sessions** and information about resources. They also complete a **case plan** to continue to support their children. The education and case plan are intended to help **parents understand their child's reaction to being exposed to domestic violence** and to know where to seek support for additional services if needed.

Program Funding and Cost per Individual Served

	FY 16-17	FY 17-18
Total Program Funding	\$109,400	\$109,400
Number of Individuals Served	489	494
Cost per Individual Served	\$223.72	\$221.46

Program Activities

Provide outreach about needs and resources to partners and community organizations.

Location and Setting

Setting for Outreach	FY 2016-17		FY 2017-18	
	Frequency	Percent	Frequency	Percent
School	--	--	250	54%
Speaking Event/Presentation	--	--	210	46%
Total Outreach Contacts	440		460	

Number of outreach events and number of individuals reached at each event.

Outreach Topics	FY 2016-17		FY 2017-18	
	Number of Outreach Contacts	Percentage of Outreach Contacts	Number of Outreach Contacts	Percentage of Outreach Contacts
NVUSD Family Festival	--	--	250	54%
Sex trafficking event	--	--	60	13%
Kaiser Denim Day	--	--	60	13%
Far Niente Health Fair	--	--	60	13%
Mayacamas Apartments Parents Presentation	--	--	30	7%
Total Outreach Contacts	440		460	

Description of Individuals who participated in outreach (potential responders)

Participant Type	FY 16-17		FY 17-18	
	Frequency	Percent	Frequency	Percent
Parent	--	--	280	61%
Community Member	--	--	70	15%
Educator	--	--	50	11%
Students	--	--	40	9%
Nurse	--	--	20	4%
Total Outreach Participants (potential responders)	440		460	

Identify Children at Risk: Screen children exposed to domestic violence using an evidence-based screening tool.

Number of children screened, and tool(s) used for screening

There were 49 children and their parents who were new to the program in FY 16-17. In FY 17-18, 34 children were screened and served by the program.

Data pending for FY 19-20

- Number of children screened, and tool(s) used for screening

Support Children: Offer psycho-educational support groups to children

Number of supports offered and number of children who attend each session (art therapy, tutoring, support group).

- In FY 16-17, 52 children participated in a support group, and 46 participated in art therapy.
- In FY 17-18, 34 children were served.

Data pending for FY 19-20

- Number of children enrolled in KEDS program (unduplicated)
- Number of supports offered and number of children who attend each session (art therapy, tutoring, support group).

Support Children: Provide follow-up/referral services as needed

Number of children who are referred for services

In FY 16-17, 45 children were referred to mental health service providers.

Data pending for FY 19-20

- Number of children who are referred for services

Support Parents: Offer parent education on the effects of domestic violence on children

Number of parents served (unduplicated)

- In FY 16-17, 88 parents completed a parent survey.
- In FY 17-18, demographic information was collected for 9 adults.

Data pending for FY 19-20

- Number of parent education sessions offered and number of parents who attend each session.

Support Parents: Share resources available to parents of children exposed to domestic violence

Data pending for FY 19-20

- Number of parents who receive information about resources.

Program Outcomes

Identify Children at Risk: Number of children referred to Napa County Mental Health Access

In FY 16-17, 45 children were referred to mental health service providers

Data pending for FY 19-20

- Identify Children at Risk: Number of children referred to Napa County Mental Health Access
- Support Children: Number of children who receive services they were referred to
- Support Parents: Number of parents who complete a case plan
- Support Children: Reduction of risk factors
- Support Children: Increases in protective factors

Support Children: Increases in protective factors

92% of the children surveyed in FY 16-17 reported increased social and emotional support.

Support Parents: Parents report positive behavior changes at end of services, understanding of behaviors that may warrant additional support for their child and they know how and where to seek support at end of services

Parent Survey Results FY 16-17

Parent Survey Item	Percentage of Parents (n=88)
Increased knowledge in their child's social & emotional needs	64%
Have concrete support at time of discharge	54%
Increase in knowledge of parenting & child development	41%
Increased resilience	24%
Increased social connections.	20%

Stigma and Discrimination Reduction Program: LGBTQ Connection Project

Program Description

The LGBTQ Connection Project is operated by On The Move. Staff provide group and single agency training and technical assistance for local community providers on relevant LGBTQ issues facing youth to older adults. They do this by offering LGBTQ 101 training, Best Practices for LGBTQ TAY, and LGBTQ Older Adults training. Staff also offers training and technical assistance to local organizations looking to increase inclusivity and change organizational policies and protocols that may potentially be negatively impacting their ability to reach individuals in these communities. LGBTQ Connections is also a trusted hub for information and support in the community. There are several regulations and laws addressing critical LGBTQ-inclusion and non-discrimination that are not currently being addressed at the preventative level. Staff continues to offer training and TA and support in full implementation of laws to continue to promote inclusivity and reduce discrimination.

Program Funding and Cost per Individual Served (duplicated)

	FY 16-17	FY 17-18
Total Program Funding	\$43,500	\$43,500
Number of Individuals Served	12,189	20,217
Cost per Individual Served	\$3.57	\$2.15

Program Activities

LGBTQ Connections reaches out to the local LGBTQ community in several ways.

- **Social Media efforts:** This includes email, Facebook, Twitter and the website for the program.
- **Outreach Efforts:** These informal efforts take place in various venues throughout the community.
- **Community Events and Support Groups:** Events that are hosted by LGBTQ Connections and support groups that are conducted by staff. Support groups focus on awareness and prevention. The events and support groups are specifically designed for LGBTQ youth, young adults, seniors, transgender people, people of color, Spanish-speakers and those who live outside the City of Napa.
- **Cultural Competency Training and Technical Assistance:** These trainings are designed for organizations and individuals who work with LGBTQ people.

Outreach and Training Activities	Number of Participants (duplicated)	
	FY 16-17	FY 17-18
Social Media	44,400	18,264
Outreach Efforts	1,763	1,095
Community Events and Support Groups	643	713
Cultural Competency Trainings and Technical Assistance	783	145
	47,589	20,217

Demographics of Individuals Served

The following demographics were collected for individuals who attended a technical assistance training in FY 17-18. The numbers are duplicated as individuals may have participated more than once during the fiscal year.

Race	FY 16-17 (duplicated)		FY 17-18 (duplicated)	
	Frequency	Percent	Frequency	Percent
American Indian or Alaska Native	--	--	2	2%
More than one Race	--	--	7	5%
White	--	--	55	38%
Other	--	--	7	5%
Unknown/Not Collected/Declined	--	--	0	0%
Ethnicity				
Hispanic or Latino	--	--	58	40%
Non-Hispanic or Latino	--	--	--	--
Primary Language				
English	--	--	110	76%
Spanish	--	--	15	11%
Age				
0-5 years old	--	--	0	0%
6-15 years old	--	--	0	0%
16-25 years old	--	--	15	11%
26-59 years old	--	--	112	77%
60+ years old	--	--	18	12%
Unknown/Not Collected/Declined	--	--	0	0%
Disabilities				
Mental (learning disability, developmental disability, dementia)	--	--	0	0%
Chronic Health Condition	--	--	0	0%
Mobility/Physical Disability	--	--	17	12%
Difficulty seeing	--	--	0	0%
Difficulty hearing or having speech understood	--	--	0	0%
Other	--	--	0	0%
Unknown/Not Collected/Declined	--	--	0	0%
Underserved Populations				
Native American	--	--	2	2%
Older Adult	--	--	18	12%
Latino/Hispanic	--	--	58	40%

Race	FY 16-17 (duplicated)		FY 17-18 (duplicated)	
	Frequency	Percent	Frequency	Percent
LGBTQ	--	--	22	15%
Veteran	--	--	2	2%
Geographically Underserved	--	--	--	--
Sexual Orientation				
Gay or Lesbian	--	--	22	15%
Heterosexual or Straight	--	--	119	82%
Unknown/Not Collected/Declined	--	--	4	3%
Gender Assigned at Birth				
Male	--	--	9	6%
Female	--	--	136	94%
Current Gender Identity				
Male	--	--	11	8%
Female	--	--	132	91%
Transgender	--	--	0	0%
Genderqueer	--	--	0	0%
Questioning or Unsure	--	--	0	0%
Another Gender Identity	--	--	2	2%
Unknown/Not Collected/Declined	--	--	2	2%
Total Participants	783		145	

Program Outcomes

Advocacy:

In FY 16-17 and FY 17-18 LGBTQ Connections staff reported on the findings from their outreach and advocacy.

Outreach and Advocacy Outcomes	FY 16-17	FY 17-18
Service providers and resources that are culturally competent in both LGBTQ identities as well as culturally competent in serving Latino and Spanish-speaking individuals and families.	✓	✓
Increased transgender-experienced and transgender competent support (community, mental, physical health) for transgender individuals as well as information and resources for family members.	✓	✓
LGBTQ competent health care providers, visibly-LGBTQ supportive providers, and openly (out) LGBTQ health care providers.	✓	✓
Additional social and support opportunities for LGBTQ seniors, people of color and non-English speaking community members (Spanish, Tagalog).	✓	✓
LGBTQ competency training, including gender bias and transgender non-discrimination, for crisis systems and entry-points (emergency rooms, hotlines, crisis stabilization services program).		✓

Organizational Changes

In FY 17-18 LGBTQ Connections began evaluating the effectiveness of the Cultural Competency Training and Technical Assistance. Staff distributed a follow-up survey to participants three months after they had completed the training. All respondents noted they had made changes based on the training. Below are some of the changes reported, listed in order of frequency.

- Using gender neutral language
- Showing visible displays of support for LGBTQ clients
- Asking and respecting preferred names and pronouns
- Sharing LGBTQ-inclusive resources
- Attending more trainings or looking for more resources

Policy Changes

LGBTQ Connections conducts brief needs assessments for organizations as part of the ongoing technical assistance. Recommendations made during FY 16-17 and FY 17-18 are shown below:

Policy Change Outcomes	FY 16-17	FY 17-18
LGBTQ-inclusive language changes for intake forms at two organizations providing health services	✓	
The inclusion of LGBTQ Connection's logo on a city's welcome sign	✓	
Mandatory LGBTQ competency training for four organizations	✓	
Trans-inclusivity training implementation at a local police academy	✓	
Mandatory LGBTQ-competency training in English and Spanish for all current and new resource (foster) families	✓	
Development of co-location for LGBTQ Connection programming at an UpValley high school site	✓	
Placement of all-gender restroom signs at two organizations	✓	
Showing visible displays of support for LGBTQ clients (rainbow stickers, flags, etc.)		✓
Sharing LGBTQ-inclusive resources		✓
Using gender neutral language		✓
Asking and respecting preferred names & pronouns		✓
Making forms more inclusive		✓
Attending more trainings or looking for more resources		✓
Doing LGBTQ-inclusive outreach		✓
Making a change to organizational policy or practice guidelines		✓
Creating or updated a program offering to be LGBTQ specific or LGBTQ-inclusive		✓

Prevention Program: Home Visitation Program

Program Description

The Home Visitation program is operated by Cope Family Center. The program helps families develop skills to move toward self-sufficiency and provide healthy homes for their children through access to prevention and primary care services. Cope uses the Healthy Families America (HFA), evidence-based program, and maintains accreditation by proving high model fidelity. This program is offered county-wide. The goal of this program is to prevent child abuse.

HFA is theoretically rooted in the belief that early, nurturing relationships are the foundation for life-long, healthy development. HFA is designed for parents facing challenges such as single parenthood; low income; childhood history of abuse and other adverse child experiences; and current or previous issues related to substance abuse, mental health issues, and/or domestic violence. Families are enrolled prenatally or within three months of birth. Services are offered until the child's third birthday, and preferably until the child's fifth birthday.

Goals:

- Reduce child maltreatment;
- Improve parent-child interactions and children's social-emotional well-being;
- Increase school readiness;
- Promote child physical health and development;
- Promote positive parenting; Promote family self-sufficiency;
- Increase access to primary care medical services and community services; and
- Decrease child injuries and emergency department use.

Program Funding and Cost per Individual Served

	FY 16-17	FY 17-18
Total Program Funding	\$50,000	\$50,000
Number of Individuals Served	286	n/a
Cost per Individual Served	\$174.83	n/a

Program Activities

In FY 16-17, the program reported a total of 286 unduplicated individuals were served. 78% of the individuals served were Latino and 19% were Caucasian. The remaining 3% were Black/African-American, Asian, or Asian/Pacific Islander.

Program Outcomes

Track no. of referrals to Napa County Mental Health Access

In the fourth quarter of FY 17-18, four individuals were referred to mental health services. The date for the services received was known for one individual, who was seen 2 months after the referral.

Data pending for FY 19-20

- PEI regulations demographic data required
- Report on model fidelity
- % improve in Edinburgh scale (postnatal depression) and ASQ (Ages and Stages questionnaire child measure)
- No. of individuals graduating from the program successfully (out of total n leaving program)
- Track no. of referrals to Napa County Mental Health Access

Prevention Program: Strengthening Families At-Risk Program

Program Description

The Strengthening Families At-Risk Program is implemented by Cope Family Center and Mentis. The program addresses the prevention and early intervention needs of families at-risk of developing mental illness by offering parent/couple support groups and brief therapy for individuals who are identified as needing a higher level of services post support group. Support groups are offered in English/Spanish throughout the county. This program also offers emergency aid/assistance as needed.

Program Funding and Cost per Individual Served

	FY 16-17	FY 17-18
Total Program Funding	\$98,000	\$98,000
Number of Individuals Served	653	
Cost per Individual Served	\$150.08	

Program Activities

Strengthening Families Support Groups

Support groups were held in Napa, St Helena and Calistoga.

Demographics of Support Group Participants

	FY 16-17		FY 17-18	
	Frequency	Percent	Frequency	Percent
Race				
American Indian or Alaska Native	--	--	--	--
More than one Race	--	--	--	--
White	5	8%	12	17%
Other	--	--	--	--
Unknown/Not Collected/Declined	--	--	--	--
Ethnicity				
Hispanic or Latino	61	92%	57	83%
Non-Hispanic or Latino	--	--	--	--
Primary Language				
English	--	--	12	17%
Spanish	--	--	57	83%
Age				
0-5 years old	--	--	--	--
6-15 years old	--	--	--	--
16-25 years old	2	3%	--	--
26-59 years old	64	97%	69	100%
60+ years old	--	--	--	--
Unknown/Not Collected/Declined	--	--	--	--
Disabilities				
Mental (learning disability, developmental disability, dementia)	--	--	--	--
Chronic Health Condition	--	--	--	--
Mobility/Physical Disability	--	--	--	--
Difficulty seeing	--	--	--	--

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Race	FY 16-17		FY 17-18	
	Frequency	Percent	Frequency	Percent
Difficulty hearing or having speech understood	--	--	--	--
Other	--	--	--	--
Unknown/Not Collected/Declined	--	--	--	--
Underserved Populations				
Native American	--	--	--	--
Older Adult	--	--	--	--
Latino/Hispanic	61	92%	57	83%
LGBTQ	--	--	--	--
Veteran	--	--	0	0%
Geographically Underserved	22	33%	25	36%
Sexual Orientation				
Gay or Lesbian	--	--	--	--
Heterosexual or Straight	--	--	69	100%
Unknown/Not Collected/Declined	--	--	--	--
Gender Assigned at Birth				
Male	28	42%	31	45%
Female	38	58%	38	55%
Current Gender Identity				
Male	28	42%	31	45%
Female	38	58%	38	55%
Transgender	--	--	--	--
Genderqueer	--	--	--	--
Questioning or Unsure	--	--	--	--
Another Gender Identity	--	--	--	--
Unknown/Not Collected/Declined	--	--	--	--
Total Participants	66		69	

Emergency Drop-in Services

In FY 16-17, 587 families participated in emergency drop in services.

In FY 17-18, 156 families (duplicated) received emergency drop in services. The majority were seen anonymously. 21 of the families shared demographic information.

Demographics of those who received Emergency Drop-in Services

Race	FY 16-17		FY 17-18	
	Frequency	Percent	Frequency	Percent
Black/African American	6	1%	0	0%
Native American/Alaskan Native	5	1%	0	0%
Asian	5	1%	0	0%
Latino	391	67%	0	0%
Multi-Ethnic	15	3%	2	10%
Pacific Islander/Native Hawaiian	1	0%	0	0%
White	131	22%	9	43%
Other/Unknown	33	6%	10	48%
Ethnicity				
Hispanic or Latino	391	67%	14	67%
Non-Hispanic or Latino	--	--	--	--
Primary Language				
English	210	36%	8	38%
Spanish	260	44%	7	33%
Age				
0-5 years old	--	--	0	0%
6-15 years old	--	--	0	0%
16-25 years old	--	--	2	10%
26-59 years old	--	--	19	90%
60+ years old	--	--	0	0%
Unknown/Not Collected/Declined	587	100%	0	0%
Disabilities				
Mental (learning disability, developmental disability, dementia)	--	--	0	0%
Chronic Health Condition	--	--	0	0%
Mobility/Physical Disability	--	--	0	0%
Difficulty seeing	--	--	0	0%
Difficulty hearing or having speech understood	--	--	2	10%
Other	--	--	0	0%
Unknown/Not Collected/Declined	--	--	0	0%
Underserved Populations				
Native American	--	--		
Older Adult	--	--		
Latino/Hispanic	391	67%		
LGBTQ	4	1%		
Veteran	--	--	--	--
Geographically Underserved	--	--		

Race	FY 16-17		FY 17-18	
	Frequency	Percent	Frequency	Percent
Sexual Orientation				
Gay or Lesbian	--	--	--	--
Heterosexual or Straight	--	--	--	--
Unknown/Not Collected/Declined	--	--	--	--
Gender Assigned at Birth				
Male	--	--	1	5%
Female	--	--	14	67%
Current Gender Identity				
Male	123	21%	1	5%
Female	460	78%	11	52%
Transgender	--	--	--	--
Genderqueer	--	--	--	--
Questioning or Unsure	--	--	--	--
Another Gender Identity	4	1%	--	--
Unknown/Not Collected/Declined	--	--	9	43%
Total Participants	587		21	

Program Outcomes

Strengthening Families Support Groups

In both FY 16-17 and FY 17-18, 100% of the participants showed improvement in the PHQ-9 and Emotional Rating Scale (ERS).

Data Pending for FY 19-20

- Pre/post scores on: PHQ9 (depression), GAD (anxiety) and Emotional Rating Scale (ERS)
- Demographic data per PEI regulations

Emergency Drop-in Services

In FY 16-17,

- 587 individuals received emergency drop-in services.
- 320 individuals received emergency aid.
- There were 601 referrals made to social service agencies
- There were 134 referrals for mental health services.

In FY 16-17, 87% of individuals who received emergency aid reported improvement in having their needs met. In FY 17-18, 88% reported improvement in the post assessment.

Data Pending for FY 19-20

- Total no. of calls/drop ins served
- 1-month follow-up call to see if referral was followed through
 - # of successful calls
 - # of successful referrals

Outreach

IN FY 17-18, staff attended 19 events and provided information to 3,457 individuals. 17 of the 19 events were

designed to provide connection to community resources. The other two were focused on supporting LGBTQ individuals and supporting survivors.

Staff distributed 3,057 materials during the 19 events. At 18 of the events, the materials were information on accessing services. At one event the materials were focused on mental health.

Of the 19 events, the majority addressed stigma and discrimination and prevention. Staff primarily attended community fairs and conducted speaking events/presentations. Most outreach events were conducted in Spanish and English.

Outreach Content	Number of Events	Percent of Events
Reduce Stigma and Discrimination	14	74%
Prevention	13	68%
Improve timely access to Services for underserved pops	8	42%
Outreach to Recognize Early Signs of MI	3	16%
Access & Linkage to Service for People with SMI	0	0%
Outreach Venue		
Community Fair	9	47%
Speaking Event/Presentation	6	32%
Church	3	16%
School	2	11%
Interagency meeting	1	5%
Other (specify)	1	5%
Outreach Language		
English	16	84%
Spanish	13	68%
Outreach Population		
Community Member	13	68%
Parent	8	42%
Clinician	4	21%
Nurse	3	16%
Educator	3	16%
Students	3	16%
Law Enforcement	2	11%
Other	13	68%

Prevention Program: Up Valley PEI Mentoring Project

Program Description

UpValley Family Centers provides two programs: Challenging Latinos to Access Resources and Opportunities (CLARO) and Challenging Latinas through Awareness, Resources and Action (CLARA). Both are mentoring programs for middle and high school aged youth to build positive identities in a process of self-exploration through the lens of culture. Although the focus is on serving Latinos and Latinas, these programs are offered to any student who is interested in cultural awareness and in developing an appreciation for cultural diversity and inclusion.

Topics addressed in the program include:

- Values
- Cultural Norms
- Self-worth & Self-expression
- Substance Abuse
- Domestic Violence
- Latino/a Heritage
- Health and Safety
- Masculinity/Femininity
- Drugs/Alcohol
- Problem-Solving
- Family
- Relationships

Program Funding and Cost per Individual Served

	FY 16-17	FY 17-18

Total Program Funding	\$76,150	\$76,150
Number of Individuals Served	143	147
Cost per Individual Served	\$532.52	\$518.03

Program Activities

Eight outreach events were held in FY 17-18, reaching 725 individuals.

Outreach

Outreach Content	Number of Events (n=8)	Percent of Events
Reduce Stigma and Discrimination		
Prevention	7	88%
Improve timely access to Services for underserved pops	6	75%
Outreach to Recognize Early Signs of MI		
Access & Linkage to Service for People with SMI		
Outreach Venue		
Community Fair	1	13%
Speaking Event/Presentation		
Church		
School	7	88%
Interagency meeting		
Other (specify)		
Outreach Language		
English	7	88%
Spanish	5	63%
Outreach Population		
Community Member	1	13%
Parent	1	13%
Clinician		
Nurse		
Educator	1	13%
Students	7	88%
Law Enforcement		
Other		

Demographics

Race	FY 16-17		FY 17-18	
	Frequency	Percent	Frequency	Percent
Black/African American				
Native American/Alaskan Native				
Asian				
Latino				
Multi-Ethnic			15	10%
Pacific Islander/Native Hawaiian			1	1%
White			6	4%
Other/Unknown			86	59%
Ethnicity				

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Race	FY 16-17		FY 17-18	
	Frequency	Percent	Frequency	Percent
Hispanic or Latino			104	71%
Non-Hispanic or Latino			8	5%
Primary Language				
English			64	44%
Spanish			48	33%
Age				
0-5 years old				
6-15 years old	143	100%	117	82%
16-25 years old			30	18%
26-59 years old				
60+ years old				
Unknown/Not Collected/Declined				
Disabilities				
Mental (learning disability, developmental disability, dementia)				
Chronic Health Condition				
Mobility/Physical Disability				
Difficulty seeing			2	1%
Difficulty hearing or having speech understood			1	1%
Other				
Unknown/Not Collected/Declined				
Underserved Populations				
Native American				
Older Adult				
Latino/Hispanic			104	71%
LGBTQ			6	4%
Veteran				
Geographically Underserved			147	100%
Sexual Orientation				
Gay or Lesbian or Bisexual			2	1%
Heterosexual or Straight			94	64%
Unknown/Not Collected/Declined			16	11%
Gender Assigned at Birth				
Male			66	45%
Female			46	31%
Current Gender Identity				
Male	61	43%		44%
Female	82	57%		29%
Transgender				
Genderqueer			1	1%
Questioning or Unsure				
Another Gender Identity				

Race	FY 16-17		FY 17-18	
	Frequency	Percent	Frequency	Percent
Unknown/Not Collected/Declined			3	2%
Total Participants	143		147	

Program Outcomes

In FY 16-17, participants stated they increased their knowledge and skills *because* of the CLARO/CLARA program:

- 75%-94%, pre to post surveys in students indicating, "***I can talk about my problems with a friend my age***"
- 97% reported having ***plans for the future***
- 93% reported having a better understanding of their ***cultural identity***
- 90% reported they have more skills to help them ***solve problems***
- 89% reported ***expressing themselves*** in a more positive way
- 85% reported having more ***positive family relationships***
- 84% reported they engage in ***fewer risky behaviors***
- 75% reported ***volunteering*** their time for their community

Common themes from student open-ended responses include:

<i>I feel more proud about my culture.</i>	<i>I like this group because it's a family not just a group.</i>
<i>I respect other cultures, and now I respect my own culture.</i>	<i>How to respect myself and others.</i>
<i>Confidence! Thank you! Pride in who I am. Pride in who I will become.</i>	<i>I would encourage many other students to join this program because this group helps me through all my difficulties in life.</i>
<i>To stay true to yourself.</i>	<i>I am thankful. Words cannot express how much I love this program. I love it.</i>

In FY 17-18, the program tracked mental health referrals and non-clinical referrals.

- For the 10 students referred to clinical services, there was an average wait of 28.6 days before they were seen with a range from 8 to 72 days.
- Nineteen students were referred for non-clinical services, and staff reported an average wait of 2.1 days with a range of 0 to 7 days.

Data Pending for FY 19-20

- No. of returning students out of total eligible (account for graduation)
- Pre/Post evaluation numbers focused on the questions listed above (will include total n):
- PEI regulations required demographic information as well as referrals for SED.

Early Intervention Program: Court and Community Schools PEI Project

Program Description

The Napa County Office of Education provides the Court and Community Schools Student Assistance Program. The program offers mental health services and counseling, as needed, along with a wide range of services including academic assistance in order to support students, reduce suspension rates, and increase school attendance. Students are referred to the Court and Community Schools for reasons of truancy, disciplinary issues or expulsion. Most students are performing well below grade level and all come from a history of neglect, abuse, trauma, substance abuse, and/or diagnosed or undiagnosed mental health conditions.

All staff has been trained in behavioral modification techniques including Positive Behavioral Intervention and Support (PBIS), Building Effective Schools Together (BEST), and Restorative Justice. In addition, staff is trained to offer mindfulness activities and yoga/meditation. The SAP multidisciplinary team meets weekly to discuss and organize services to all students participating in therapy.

Program Funding and Cost per Individual Served

	FY 16-17	FY 17-18
Total Program Funding	\$81,600	\$81,600
Number of Individuals Served	139	136
Cost per Individual Served	\$587.05	\$600.00

Program Activities

	FY 16-17		FY 17-18	
	Frequency	Percent	Frequency	Percent
Race				
Black/African American	4	3%	2	1%
Native American/Alaskan Native			6	4%
Asian	0		0	
Latino	107	77%	95	70%
Multi-Ethnic	3	2%	22	16%
Pacific Islander/Native Hawaiian	4	3%	3	2%
White	20	14%	26	19%
Other/Unknown	1	1%	76	56%
Ethnicity				
Hispanic or Latino	107	77%	95	70%
Non-Hispanic or Latino			28	21%
Primary Language				
English	56	40%	84	62%
Spanish	81	58%	52	38%
Age				
0-5 years old				
6-15 years old	55	40%	59	43%
16-25 years old	84	60%	77	57%
26-59 years old				
60+ years old				
Unknown/Not Collected/Declined				
Disabilities				
Mental (learning disability, developmental disability,			18	13%

Race	FY 16-17		FY 17-18	
	Frequency	Percent	Frequency	Percent
dementia)				
Chronic Health Condition			1	1%
Mobility/Physical Disability				
Difficulty seeing				
Difficulty hearing or having speech understood				
Other				
Unknown/Not Collected/Declined				
Underserved Populations				
Native American			6	4%
Older Adult				
Latino/Hispanic			95	70%
LGBTQ			12	9%
Veteran				
Geographically Underserved				
Sexual Orientation				
Gay or Lesbian or Bisexual			12	9%
Heterosexual or Straight			122	90%
Unknown/Not Collected/Declined			2	1%
Gender Assigned at Birth				
Male	98	71%	92	68%
Female	41	29%	44	32%
Current Gender Identity				
Male			92	68%
Female			44	32%
Transgender				
Genderqueer				
Questioning or Unsure				
Another Gender Identity				
Unknown/Not Collected/Declined				
Total Participants	139		136	

Program Outcomes

In FY 16-17, 137 unduplicated students received SAP services. Of these students, 42% behavioral showed improvement in pre/post measures.

Total number of parents served

Staff reported a total of 2,150 parent phone calls and 583 meetings with parents in FY 17-18

Number of students who graduate

Five of the SAP students graduated in FY 17-18.

Data Pending for FY 19-20

- Total number of students eligible to graduate

Number of refocus visits compared to overall suspension rate

- There were 642 refocus visits and 66 suspensions in FY 17-18. This is an average of 9.7 refocus visits for each suspension.
- There were 448 refocus visits and 46 suspensions in FY 17-18. This is an average of 9.7 refocus visits for each suspension.

Attendance rate for SAP students compared to overall student body

- The attendance rate was 86% for SAP students for FY 16-17
- The attendance rate was 87% SAP students for FY 17-18

Data Pending for FY 19-20

- Attendance rate for overall student body (non-SAP students)

Percent of conflict resolution interventions that end successfully

- In FY 17-18, 70 students were offered restorative justice. None refused, and 65 students (93%) indicated the issue was resolved.

Referrals for Mental Health Services

- 17 students were referred for mental health services at Mentis or through Access. Of these, staff reported that students were seen in an average of 2.7 days.

Referrals for Non-Clinical Services

- 13 referrals were offered for non-clinical needs. Staff reported that students received services in an average of 13.6 days.
- Referrals included: substance use services (n=5), food (n=3), ParentsCAN (n=3), health insurance (n=1), and parenting (n=1)

Percent of students who improve on ERS (Emotional Rating Scale) in individual and support group (implemented at the beginning and end of solution-focused therapy).

- In FY 17-18, the staff reported the results of the PHQ-9 Screening Tool. 91 students were screened, and 48% reported improvement by the end of therapy.

Early Intervention Program: Healthy Minds Healthy Aging

Program Description

The goal of the Healthy Minds-Healthy Aging Program is to (1) reduce depression and improve quality of life for older adults and caregivers with depression and other mental/cognitive health concerns; (2) increase early identification of emerging and/or serious mental health and cognitive impairment issues among older adults and their caregivers; (3) improve access to and utilization of services for mental and/or cognitive health concerns among older adults and caregivers by increasing services and coordination among providers.

HMHA provides a continuum of community-based, culturally and linguistically competent behavioral and cognitive health education, early intervention and brief treatment services for older adults 60 years of age and older in Napa County. The program design uses an evidence-based, multidisciplinary, collaborative approach to coordinate among, link across, and build upon (not duplicate) community-based systems of care. Collaborative partners include Family Service of Napa Valley (FSNV), Area Agency on Aging (AAA), Hospice and Adult Day Services (NVHADS), Queen of the Valley Community Outreach, and Comprehensive Services for Older Adults. HMHAP focuses on key strategies for early identification, increasing access to behavioral and cognitive health services as well as safety net support for low-income older adults with depression and/or cognitive health concerns. Each collaborative partner plays a key role. A FSNV MSW social worker case manager, AAA community navigator and health educator and an FSNV clinical case manager/ therapist as well as social work staff at NVADS provide program services.

Program Funding and Cost per Individual Served

	FY 16-17	FY 17-18
Total Program Funding	\$91,350	\$91,350
Number of Individuals Served	101	168
Cost per Individual Served	\$904.46	\$543.75

Program Activities

Outreach

Two key strategies are focused on community education and outreach: Gatekeeper Training and Professional Continuing Education. *Gatekeeper training* is conducted on two levels: one targeting community members and front-line staff who are likely to come in contact with older adults and the second focusing on providers and professionals working with older adults. *Professional continuing education* is offered to build capacity of providers to identify and provide early intervention for vulnerable older adults with mental or cognitive health concerns.

In FY 16-17:

- 362 gatekeepers or professionals trained in mental health and cognitive issues
- 688 older adults educated
- 62% of those participating in outreach identified as White, and 37% identified as Hispanic.

In FY 17-18, data was available for the fourth quarter only.

- 79 individuals participated in outreach. They were 82% female and 18% male. 47% identified as Hispanic, 51% identified as White and 3% identified as Asian.

Outreach Event Description

Outreach Content	FY 16-17		FY 17-18 (Q4 only)	
			Number of Events (n=10)	Percent of Events
Reduce Stigma and Discrimination				
Prevention				
Improve timely access to Services for underserved pops				

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Outreach to Recognize Early Signs of MI			10	100%
Access & Linkage to Service for People with SMI				
Outreach Venue				
Community Fair				
Speaking Event/Presentation				
Church				
School				
Interagency meeting				
Other (specify)				
Outreach Language				
English			4	40%
Spanish			6	60%
Outreach Population				
Community Member			7	
Parent				
Clinician				
Nurse				
Educator				
Students				
Law Enforcement				
Other			2	
Total Outreach Events			10	

Screening, Assessments and Case Management

Staff utilizes evidence-based tools – the PHQ9 and AD8 to screen referrals for depression and/or cognitive concerns. A comprehensive assessment conducted in clients’ homes screens for additional quality of life and basic needs concerns. Each client works with staff to set goals and is provided a care plan that addresses these concerns as well as mental or cognitive health problems. To address issues, Healthy Minds, Healthy Aging staff refers clients to and works in partnership with a host of community resources. For referred older adults that do not enter the program or do not qualify for services, information and assistance referrals to community resources are offered as well.

In FY 16-17:

- 74 care plans/assessments completed
- 210 supportive referrals were made for clients served during the year.

Race	FY 16-17		FY 17-18	
	Frequency	Percent	Frequency	Percent
Black/African American	2	2%	6	3%
Native American/Alaskan Native			0	
Asian	1	1%	7	4%
Latino	26	26%	50	30%
Multi-Ethnic			1	0.5%
Pacific Islander/Native Hawaiian	1	1%		
White	77	76%	104	62%
Other/Unknown				
Ethnicity				
Hispanic or Latino	26	26%	50	30%
Non-Hispanic or Latino				
Primary Language				

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Race	FY 16-17		FY 17-18	
	Frequency	Percent	Frequency	Percent
English				
Spanish				
Age				
0-5 years old				
6-15 years old				
16-25 years old				
26-59 years old				
60+ years old	101	100%	168	100%
Unknown/Not Collected/Declined				
Disabilities				
Mental (learning disability, developmental disability, dementia)			8	5%
Chronic Health Condition			42	25%
Mobility/Physical Disability			20	11%
Difficulty seeing			14	8%
Difficulty hearing or having speech understood				
Other				
Unknown/Not Collected/Declined				
Underserved Populations				
Native American				
Older Adult			168	100%
Latino/Hispanic			50	30%
LGBTQ			4	2%
Veteran			1	0.5%
Geographically Underserved				
Sexual Orientation				
Gay or Lesbian or Bisexual	2	2%	5	3%
Heterosexual or Straight			163	97%
Unknown/Not Collected/Declined				
Gender Assigned at Birth				
Male	20	20%	23	14%
Female	81	80%	145	86%
Current Gender Identity				
Male	20	20%	23	14%
Female	81	80%	145	86%
Transgender				
Genderqueer				
Questioning or Unsure				
Another Gender Identity				
Unknown/Not Collected/Declined				
Total Participants	101		168	

Therapeutic Intervention

Clients with signs of cognitive issues are referred to Adult Day Services for family consultations. Program staff provide appropriate brief therapeutic interventions in clients' homes or accessible community sites as well as family consultations and referrals for older adults identified with cognitive health issues

In FY 16-17, 75 individuals received therapy in 788 sessions (an average of 10.5 sessions per client). Nine families were referred for family consultations and six were served.

Program Outcomes

Outreach

In FY 16-17, 62 referrals were received from providers and 28 individuals referred themselves.

Screening, Assessments and Case Management

In FY 16-17, 79% of clients discharged had completed care plans at end of period (several clients died or moved during period)

Therapeutic Intervention

In FY 16-17, 77% of 57 discharged clients demonstrated improved PHQ9 scores for depression.

Napa County Mental Health Service Act FY 18-19 Annual Update to Three Year Plan

**FY 2019/20 Mental Health Services Act Annual Update
Funding Summary**

County: Napa

Date: 5/29/19

	MHSA Funding					
	A	B	C	D	E	F
	Community Services and Supports	Prevention and Early Intervention	Innovation	Workforce Education and Training	Capital Facilities and Technological Needs	Prudent Reserve
A. Estimated FY 2019/20 Funding						
1. Estimated Unspent Funds from Prior Fiscal Years	2,368,353	553,886	1,119,636	54,204	94,836	
2. Estimated Prior Year Reversion			(844,141)	(95,619)	(145,770)	
3. Estimated New FY 2019/20 Funding*	4,900,368	1,070,875	290,401	660	2,187	
4. Transfer in FY 2019/20 ^{a/}	0			0	0	0
5. Access Local Prudent Reserve in FY 2019/20	0	0				0
6. Re-distributed Reversion Funds			844,141	95,619	145,770	
7. Estimated Available Funding for FY 2019/20	7,268,721	1,624,761	1,410,037	54,864	97,023	
B. Estimated FY 2019/20 MHSA Expenditures	4,459,912	1,038,827	694,088	54,864	97,023	
G. Estimated FY 2019/20 Unspent Fund Balance	2,808,809	585,934	715,949	(0)	(0)	

*Includes the planned No Place Like Home Initiative reduction estimate of \$313,672 for CSS and \$137,847 for PEI

H. Estimated Local Prudent Reserve Balance	
1. Estimated Local Prudent Reserve Balance on June 30, 2019	914,402
2. Contributions to the Local Prudent Reserve in FY 2019/20	0
3. Distributions from the Local Prudent Reserve in FY 2019/20	0
4. Estimated Local Prudent Reserve Balance on June 30, 2020	914,402

a/ Pursuant to Welfare and Institutions Code Section 5892(b), Counties may use a portion of their CSS funds for WET, CFTN, and the Local Prudent Reserve. The total amount of CSS funding used for this purpose shall not exceed 20% of the total average amount of funds allocated to that County for the previous five years.

Mental Health Services Act (MHSA) Three Year Plan

Prevention and Early Intervention (PEI) Funding

Napa County Mental Health Service Act FY 18-19 Annual Update to Three Year Plan 6/30/2019

Initial Date: 7

Revision

Date: 5/29/19

County

: Napa

	Fiscal Year 2019-20					
	A	B	C	D	E	F
	Estimated Total Mental Health Expenditures	Estimated PEI Funding	Estimated Medi-Cal FFP	Estimated 1991 Realignment	Estimated Behavioral Health Subaccount	Estimated Other Funding
PEI Programs - Prevention						
1. LGBTQ PEI Project	43,500	43,500				
2. Native American PEI Project Upvalley Mentoring Program	94,878	94,878				
3. PEI Project American Canyon SAP PEI	76,150	76,150				
4. Project Domestic Violence PEI	159,807	159,807				
5. Project	109,400	109,400				
6. Home Visitation PEI Project Strengthening Families PEI	50,000	50,000				
7. Project	98,000	98,000				
8.	0					
9.	0					
10.	0					
PEI Programs - Early Intervention						
11. Court and Community Schools SAP PEI Project Mentis Healthy Minds	81,600	81,600				
12. Healthy Aging	91,350	91,350				
13.	0					
14.	0					
15.	0					
16.	0					
17.	0					
18.	0					
19.	0					
20.	0					
PEI Administration	195,942	179,942				16,000
PEI Assigned Funds - CalMHSA	54,200	54,200				
Total PEI Program Estimated Expenditures	1,054,827	1,038,827	0	0	0	16,000