

# CYBHI

Children and Youth  
Behavioral Health Initiative



## Virtual Services Platforms (MTSS Tiers 1-2)

November 29, 2023  
2:00pm – 4:30pm PDT



# Today's Agenda

- Welcome to CYBHI Webinar Series!
- Context and Background on CYBHI and Alignment with MTSS Framework
- Overview of the Behavioral Health Virtual Services Platforms
- Introduction to Brightline and Kooth
- Youth Perspective
- Breakout Sessions – Q&A with Brightline and Kooth
- Plenary Activity – Driving Adoption
- Closing and Next Steps

# Today's Speakers

- Melissa Stafford Jones, CalHHS
- Virginia Joseph, Orange County Department of Education
- Autumn Boylan, Department of Health Care Services (DHCS)
- Sheela Abucay, DHCS
- Brightline: Sabrina Sandalo-Lee, Irene Biscante and Amrita Sehgal
- Kooth: Tina Sanders and Kyle White
- Ester Verdugo
- Blanca Paniaqua

# CONTEXT AND BACKGROUND



# Collective Vision and Shared Values

- Support our children and youth; we know they are struggling
- Value centering of whole child and equity
- Recognition that behavioral health and well-being affect school attendance, learning, and school success

*ALL children and youth, especially those most underserved, have the supports and services they need to learn and thrive*



# Governor's Master Plan for Kids' Mental Health

## Governor Newsom Announced Master Plan for Kids' Mental Health August 18, 2022

- \$4.7B so every Californian aged 0-25 has greater access to mental health and substance use support
- Whole Child, “All of the Above” Approach
- Multi-year, fundamental overhaul to invest in and build needed system infrastructure
- CYBHI at its core

## Other investments and initiatives in California being implemented in coordination and collaboration

- \$4.1B on a community schools' strategy to connect kids and families to essential services including health screenings, meals and more, as well as expanded learning opportunities
- \$5B on a Medi-Cal CalAIM initiative to better integrate health and behavioral health services for low-income kids and improve child health outcomes, including prevention
- \$1.4B to build the healthcare workforce that expands our capacity to meet the health needs of Californians, including children and families
- State budget investments in school-based behavioral health workforce, such as school counselors

# What is the CYBHI?

The **Children and Youth Behavioral Health Initiative (CYBHI)** is a historic, five-year, \$4.7 billion initiative to reimagine and transform the way California supports children, youth and families.

## The initiative is:

- Reimagining a more integrated, youth-centered, equitable, prevention-oriented system
- Promoting mental, emotional and behavioral health and well-being
- Supporting prevention and early intervention while addressing emerging and existing needs
- Increasing access to mental health and substance use services and supports
- Addressing inequities for groups disproportionately impacted by mental health challenges and that face the greatest systemic barriers to wellbeing

Built on a foundation of **equity** and **accessibility**, the CYBHI is designed to **meet young people and families where they are** to create an ecosystem that can help them **when, where and in the way they need it most.**

# CYBHI Workstreams

Workforce Training and Capacity		Behavioral Health Ecosystem Infrastructure		Coverage	Public Awareness
Wellness Coach Workforce (HCAI)	<a href="#">Trauma-Informed Educator Training</a> (CA-OSG)	School-Linked Partnership and Capacity Grants (DHCS)	Student Behavioral Health Incentive Program (DHCS)	Enhanced Medi-Cal Benefits – Dyadic Services (DHCS)	Public Education and Change Campaigns (CDPH)
Broad Behavioral Health Workforce Capacity (HCAI)	Youth Mental Health Academy (HCAI)	Behavioral Health Continuum Infrastructure Program (DHCS)	Youth Suicide Reporting and Crisis Response Pilots (CDPH)		ACEs and Toxic Stress Awareness Campaign (CA-OSG)
Behavioral Health Virtual Services Platform and Next Generation Digital Supports (DHCS)				Statewide All-Payer Fee Schedule for School-Linked Behavioral Health Services (DHCS/DMHC)	Targeted Youth Suicide Prevention Grants and Outreach Campaign (CDPH)
Healthcare Provider Training and e-Consult (DHCS)					Parent Support Video Series (DHCS)
Scaling Evidence-Based and Community-Defined Practices (DHCS)					
CalHOPE Student Services (DHCS)					
Mindfulness, Resilience and Well-being Grants (DHCS)					
Youth Peer-to-Peer Support Program (DHCS)					



# School-Behavioral Health Partnership to Support Student Well-Being

Schools are a critical component of the ecosystem that supports the emotional, mental and behavioral health of California's children and youth. That's why the CYBHI includes:

- **New statewide fee schedule** for school-linked behavioral health services reimbursement from Medi-Cal and commercial health plans
- **Behavioral health workforce investments** including a focus on career pipeline programs and developing a **new Wellness Coach role**, as well as investments beyond the CYBHI in school-based and overall behavioral health workforce
- **Building infrastructure** through school-linked partnership and capacity grants
- **Scaling of evidence-based and community-defined practices**, with an emphasis on racial equity, prevention, early intervention
- **Supporting partnerships** between Medi-Cal managed care plans and LEAs through SBHIP
- **CalHOPE Student Services program that provides tools and learning community opportunities** for schools for SEL
- **Supporting Wellbeing, Mindfulness, and Resilience of Students** through new grants
- **Providing training on trauma-informed care** to educators, school personnel and childcare providers.
- **Increasing access** to range of pre-clinical services and navigation to clinical services for students and families through new virtual services platform

# What is CA MTSS?

## Framework and Domains

California's Multi-Tiered System of Support (MTSS) is a comprehensive framework that aligns academic, behavioral, and social-emotional learning in a fully integrated system of support for the benefit of all students. CA MTSS offers the potential to create needed systemic change through intentional design and redesign of services and supports to quickly identify and match to the needs of all students.

The evidence-based domains and features of the California MTSS framework provide opportunities for LEAs to strengthen school, family, and community partnerships while developing the whole child in the most inclusive, equitable learning environment thus closing the equity gaps for all students.

## California MTSS FRAMEWORK

The California MTSS Framework includes 5 Domains and 11 Features. The needs of the Whole Child are successfully met when ALL Domains and Features are effectively implemented with fidelity.



### Whole Child Domain



### Essential Domains and Features to Support the Whole Child



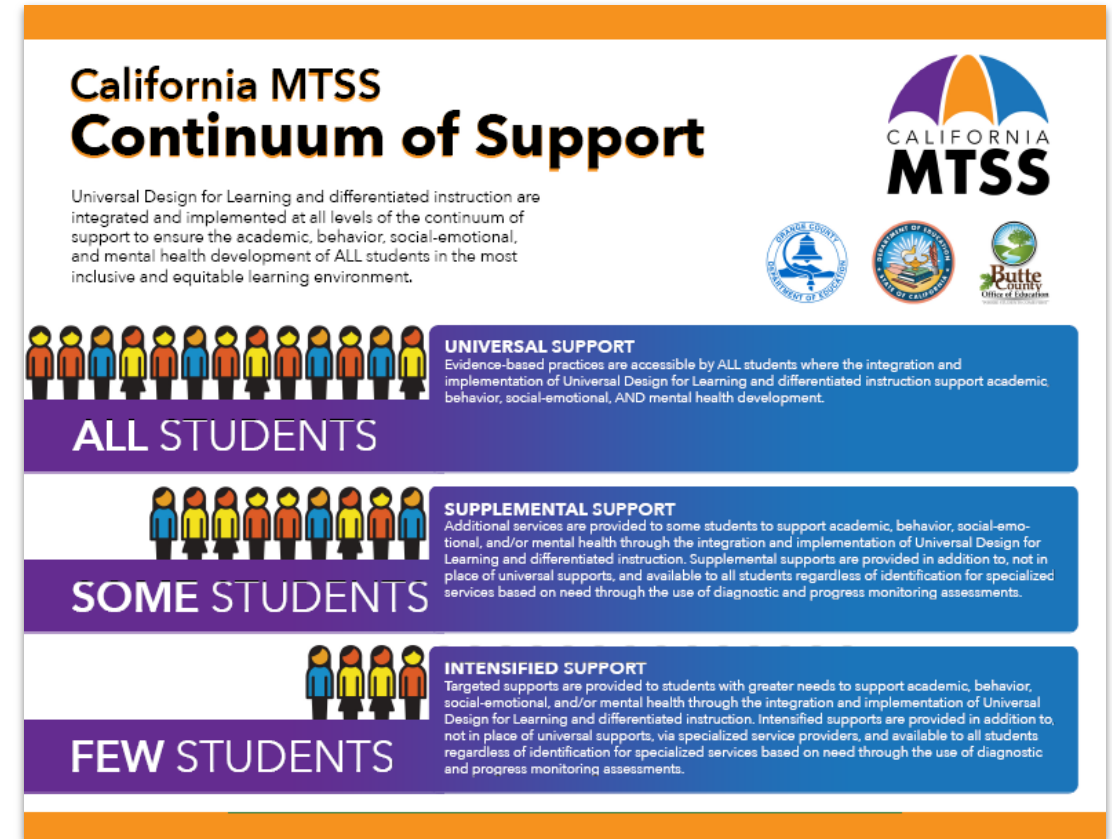
Adapted with permission from: SWIFT Education Center. (2016). Domains and Features Placemat. Lawrence, KS. swiftschools.org



# What is CA MTSS?

## Continuum of Support

Excellence and equity for all students is about creating a system where all students are fully valued, welcomed, well supported, and engaged in learning. A continuum of support must be in place to ensure all students are benefiting from and engaged in learning.



# Align New Opportunities With Existing Frameworks

- Utilize Integrated Systems Framework (ISF) /MTSS/PBIS/Community Schools as the organizing framework
- Implement CYBHI in the context of that framework
- Incorporate resources and tools of CYBHI to advance your goals

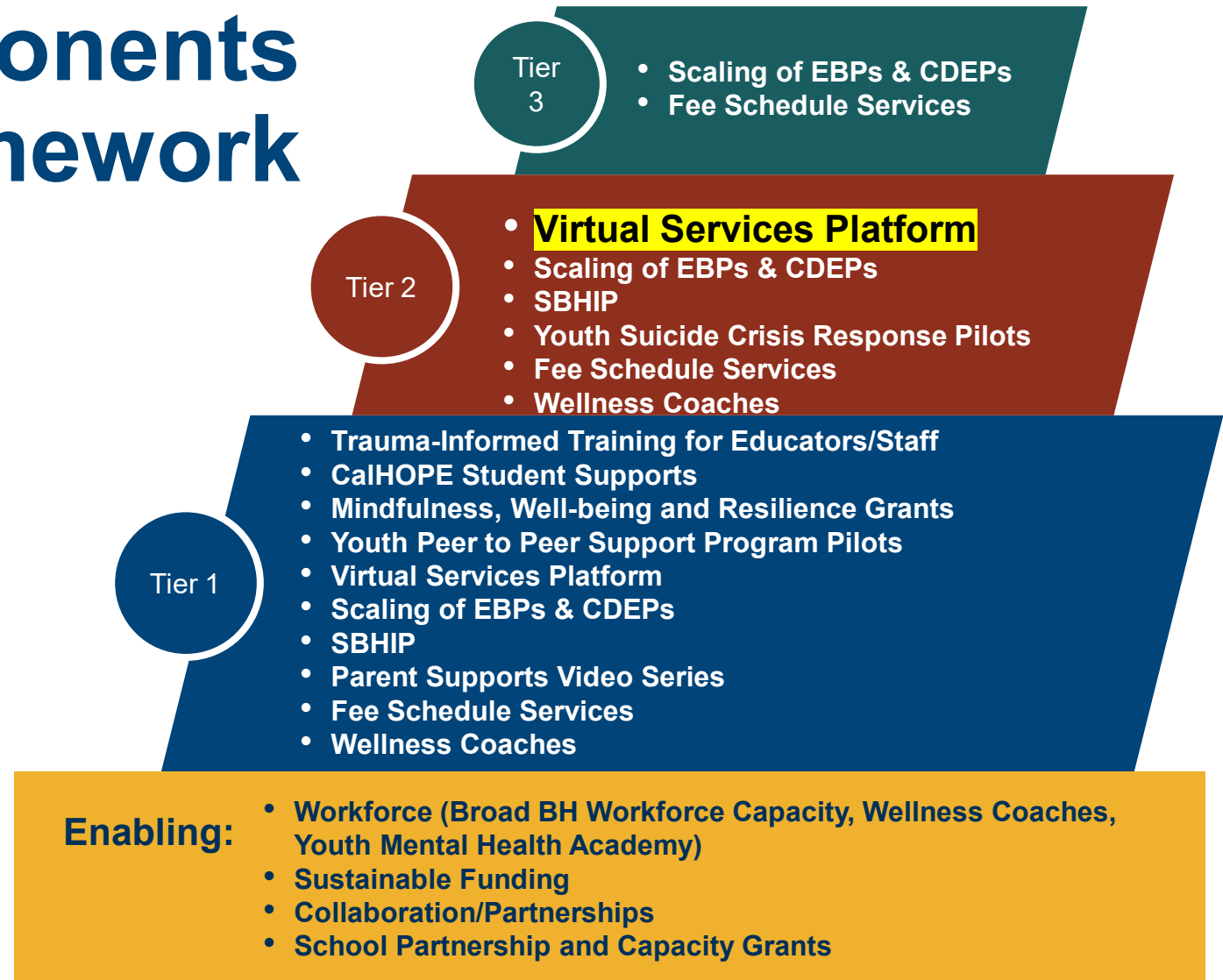
*How can CYBHI be in service and partnership with schools to support the behavioral health and social and emotional well-being of children and youth so they can learn and succeed in school?*



# How CYBHI components fit into MTSS Framework

## Values:

- Whole Child
- Integrated/Coordinated
- Youth-Centered
- Equity-Centered
- Prevention and Well-being Oriented



# CYBHI Behavioral Health Virtual Services Platforms

# Poll Questions

# Observations of behavioral health needs and challenges



**Many behavioral health challenges begin in childhood and early adulthood**



**Behavioral health needs for children and youth have been increasing prior to the pandemic**



**The pandemic has further exacerbated behavioral health needs for children and youth**



Of California residents had **4 or more adverse childhood experiences (ACEs)**, which significantly increase risk for behavioral health conditions and chronic conditions<sup>5</sup>



**Increase** in high school students reporting **persistent feelings of sadness or hopelessness** between 2009 - 2019<sup>6</sup>



Of high school students nationwide reported **worsened emotional and cognitive health** during the pandemic<sup>9</sup>



Of children ages 3 to 17 in the US **reported behavioral health challenges**<sup>2</sup>



Of admitted patients to SUD treatment facilities had substance use initiation before age 15<sup>3</sup>



**Increase in suicide deaths** among CA adolescents and young adults between 2007-2018<sup>7</sup>



Increase in overall **mental health-related emergency department visits** for those ages 5-11 nationwide during the pandemic<sup>10</sup>



Of all lifetime cases of diagnosable mental illnesses **begin by age 24**<sup>1</sup>



Of 18-25-year-olds have a substance use disorder (SUD)<sup>4</sup>



**Increase in opioid poisonings** in toddlers and preschoolers ages 1-4 between 1997 and 2012<sup>8</sup>



Increase in emergency department visits for **suicidal ideation** for youth ages 12-17 nationwide during the pandemic<sup>10</sup>

1. Kessler R, Berglund P, Demler O, Jin R. "Lifetime prevalence and age-of-onset distributions of DSM-IV disorders in the national comorbidity survey replication." *Walters E. Arch Gen Psychiatry.* 2005, 62:593-602  
 2. 2021 U.S. Surgeon General's Advisory  
 3. SAMHSA, The TEDs report  
 4. 2018 SAMHSA Survey  
 5. CA Office of the Surgeon General (OSG) ACEs Aware  
 6. CDC. Youth Risk Behavior Survey Data Summary & trends Report 2009-2019  
 7. Curtin SC. State suicide rates among adolescents and young adults aged 10-24: United States, 2000-2018. *National Vital Statistics Reports*; vol 69 no 11. Hyattsville, MD: National Center for Health Statistics. 2020  
 8. Children's Defense Fund, 2017  
 9. KFF, Mental Health and Substance Use Considerations Among Children During the COVID-19 Pandemic (2021)  
 10. 2020 Morbidity and Mortality Weekly Report (Leeb et. Al)



# Vision statement and guiding principles for BH Virtual Services and e-Consult Platforms

## Vision



**Build and drive adoption of a Behavioral Health Virtual Services and E-Consult Platform for all children, youth and families in California that supports delivery of equitable, appropriate, and timely behavioral health services from prevention to treatment to recovery**

## Guiding principles



Maximize impact on behavioral health for all children and youth in California (regardless of type of coverage) through improved access, quality, affordability and experience



Drive broad and inclusive adoption of BH Virtual Services and E-Consult Platform across California for children & youth and other relevant users (e.g., pediatricians)



Streamline access to the platform and integrate across the BH care delivery system



Destigmatize seeking help for behavioral health needs



Enable delivery of the most effective and least resource-intensive treatment pathway (e.g., for young people that may not need individual counseling)



Focus on health equity by facilitating deeper connection between children, youth and families and community-based care



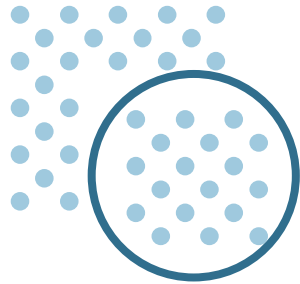
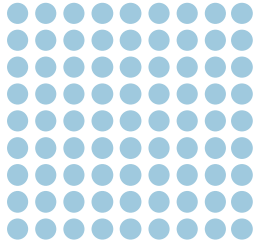
Prioritize privacy; ensure platform is compliant with all necessary privacy, security and interoperability regulations



Enable clinicians to better support their patients through E-Consults

# How did we start?

# BH virtual services platform vision and requirements were informed by multiple stakeholders



## Market Scan

**450+**

Vendors identified through market scan and invited to Request for information (RFI)

## Children & Youth Research

**300+** **28+**

Children and youth

Focus groups and 1:1 interviews

## Think Tank Workshops

**8**

Think Tank Meetings

## Vendor Engagement

**82**

Vendors submitted response to RFI

**3**




Vendors identified as partners:

Brightline (0-12 platform)  
Kooth (13-25 platform)

UCSF (e-Consult)

# Youth Insights: Key themes and experience drivers (1/2)



## Children and youth identified five key user experience drivers for a future-state virtual behavioral health platform

Key theme	User experience driver	Potential user experiences <sup>1</sup>
 <b>Seamless personalization</b>	<i>Understand my needs</i>	<ol style="list-style-type: none"> <li>1 "I can share information about myself to get more personalized support"</li> <li>2 "I have access to resources tailored for my age range"</li> </ol>
 <b>Supportive empowerment</b>	<i>Empower me to take control of my journey</i>	<ol style="list-style-type: none"> <li>1 "I can easily navigate through the platform on my own"</li> <li>2 "I feel that the platform focuses on my strengths"</li> <li>3 "I can preview the resources I'm interested in before using them"</li> </ol>
 <b>Genuine relationship building</b>	<i>Help me build a connection</i>	<ol style="list-style-type: none"> <li>1 "I have the option to share quick feedback"</li> <li>2 "I can share my favorite resource / the platform with my friends"</li> </ol>

1. Illustrative user experience aspiration based on user research

# Youth Insights: Key themes and experience drivers (2/2)

## Children and youth identified five key user experience drivers for a future-state virtual behavioral health platform

Key theme	User experience driver	Potential user experiences <sup>1</sup>
 <b>Transparency &amp; protection</b>	<i>Make me feel safe</i>	<ol style="list-style-type: none"> <li>1 "I feel that my data will be safe and used appropriately"</li> <li>2 "I have the option to receive support (e.g., self-service &amp; live) anonymously"</li> <li>3 "I can hide the platform from others (e.g., the app shows up as a calculator)"</li> </ol>
 <b>Inclusive and equitable</b>	<i>Be accessible to myself and other youth</i>	<ol style="list-style-type: none"> <li>1 "I feel represented and appropriately supported by platform resources"</li> <li>2 "I can engage support resources in the language of my choice"</li> <li>3 "I can connect to the platform without internet"</li> </ol>

1. Illustrative user experience aspiration based on user research

# Youth and experts informed BH Platform Capabilities

Capability	Working description
1 <b>Get on-platform BH care</b>	<b>Affordable multimodal</b> one-on-one session(s) with a BH professional providing live BH services
2 <b>Learn about BH</b>	<b>Engaging, age-tailored, searchable informational material for a range of BH and wellness needs</b> , potentially curated based on community, user input
3 <b>Assess and manage your BH</b>	Self-assessments and other activities to <b>help identify and manage BH, find resources</b> , and optionally <b>track and share BH over time</b>
4 <b>Connect with off-platform services</b>	<b>Self-service tool with live assistance option that helps connect children and youth to off-platform BH service options</b> (potentially including counties, schools, affiliated CBO network, health plan providers)
5 <b>Connect with other youth</b>	<b>Moderated forums, programs, and events</b> to connect with other youth and “tell your story”, provide encouragement, and/or get support
6 <b>eConsult</b>	<b>Tool for primary care providers to improve BH skill set through support and consultation</b> with BH specialists and resources

**Where are we going?**

# Platform Vendors Introduction

On January 1, 2024, DHCS will launch two statewide behavioral health virtual services platforms to provide free (regardless of payer), app-based behavioral health services and wellness supports for children and youth, ages 0-25, and their families.

DHCS is partnering with two vendors, Brightline (serving parents/caregivers and children ages 0-12) and Kooth (serving youth ages 13-25) to launch the digital tools.





# BrightLife Kids and Soluna - Core Services Overview

- **Coaching:** Pre-clinical and sub-clinical coaching sessions through text or video with behavioral health coaches.
- **Educational Content:** Age-tailored educational articles, videos, podcasts, and stories.
- **Assessments and Tools:** Stress-management tools and clinically validated assessments to understand and monitor behavioral health over time.
- **Off-Platform Services:** Directory and care navigation to connect users to their local behavioral health resources.
- **Community Engagement:** Moderated forums and programs to connect users with other youth or caregivers.
- **Crisis and Safety Protocols:** Crisis and emergency safety resources for platform users in crisis.

# Building a brighter future for CA families

*November 29, 2023*

**Speakers:**

Sabrina Sandalo-Lee (she/her)

Irene Biscante (she/her)



## Brightline Overview

**Founded in Palo Alto, California** by health care entrepreneurs Naomi Allen and Giovanni Colella, MD

Designed to **address the pediatric behavioral health crisis** and challenges across access, affordability, quality, and stigma

Nationwide support for children, teens, and caregivers through health plan and employer partners (**60M covered lives, 500+ employers**)

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# BrightLife Kids

A CalHOPE program by Brightline



Virtual behavioral health support for CA kids 0-12

- Disruptive behaviors
- School, work, or relationship stress
- Emotional distress (e.g., loneliness, social isolation, grief)

***and much more!***



# How BrightLife Kids fits in the care delivery model

## Diagnosis & Clinical Intervention

Includes managing higher acuity presenting concerns, symptoms, and risk (e.g. suicidal ideation)

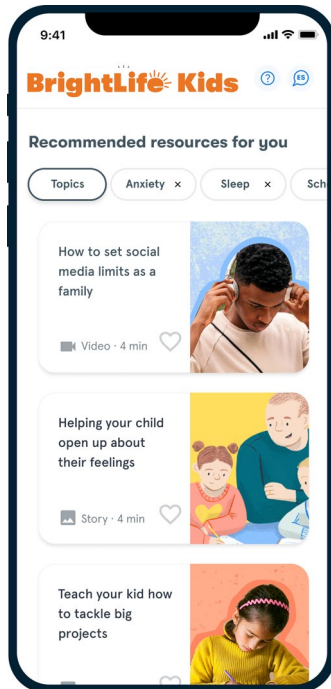
Licensed therapists,  
Physicians

## Prevention & Early Intervention

Includes building skills to manage separation anxiety, worry, sadness, loneliness, self-confidence, relationship stress and conflict, sleep concerns, tantrums, communication skills, and more

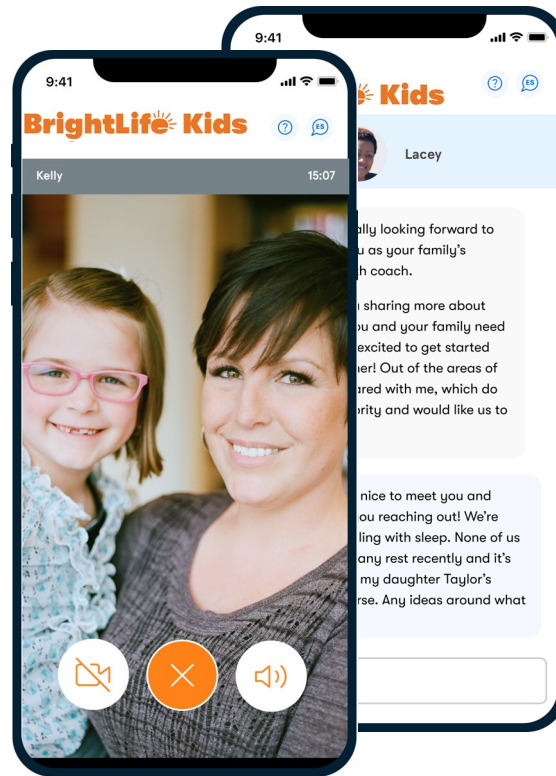
**BrightLife**  
**Kids**

## Digital Tools



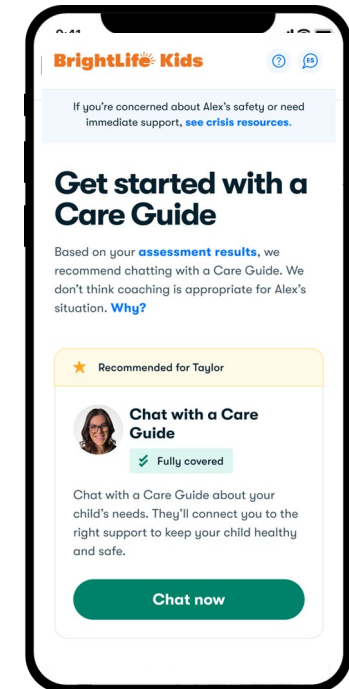
Tailored content recommendations

## Behavioral Health Coaching



Live video sessions & secure chat feature

## Care Coordination



Care Guide evaluation & support

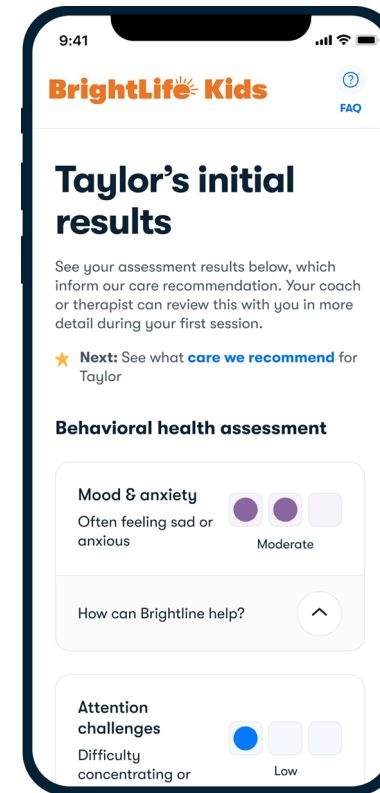
# How to get started with BrightLife Kids



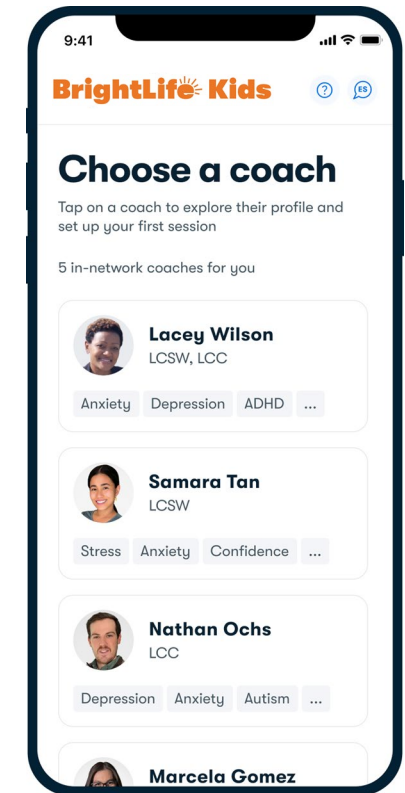
Reassurance of coverage



Upfront needs assessment



Results review & next steps



Coach selection or assignment to care guide



# How BrightLife Kids helps across ages & stages



## Parent Management Training (PMT)

*Milestones, sleep, eating, temperament, separation anxiety, etc.*

## Parent Management Training (PMT) (including ASD, IDD)

*Tantrums, social emotional learning, sleep, structure, etc.*

## Dyadic Coaching (Child + Parent)

*Stress, focus, organizational skills, sadness, worries, friends, screen time, etc.*



## Digital Tools

*BrightLife Kids also has a library of on-demand digital content. Coaches may suggest engaging with resources between sessions to support learning and behavior change.*

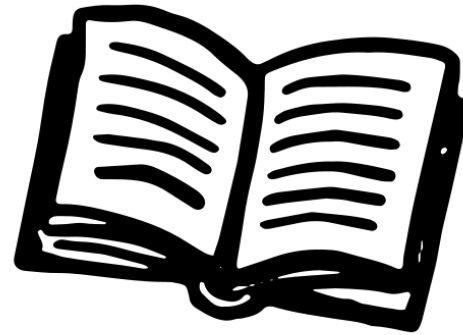




## Care coordination to connect members to other services



**Care Guides**



**Self-Service  
Repository**



**Crisis  
Resources**

# How we mitigate risk and promote safety



Holistic, proactive, and empathetic approach to identifying and addressing safety risk across the member journey, including empathetic, highly trained **coaching and care guide teams** to assess and guide members in critical safety moments, **product features** designed to surface crisis resources 24/7, **inclusive crisis resources**, and a **robust quality and safety oversight system**.



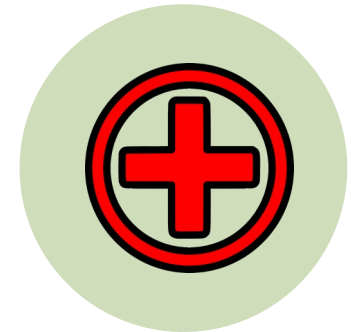
## Risk Assessments

- ✓ Onboarding questions
- ✓ Intake session interview
- ✓ Care Guides support to members and coaches
- ✓ Clear escalation protocols
- ✓ Quality oversight & consultation



## Product Support

- ✓ Natural Language Processing
- ✓ Auto message at detected risk
- ✓ Direct connection to 988 through member support line



## Crisis Resources

- ✓ 988 Suicide & Crisis Lifeline
- ✓ Trevor project
- ✓ CalHOPE warm line
- ✓ CalHOPE connect
- ✓ Mobile crisis, 911, ER

“The online coaching for my daughter has been a game changer. She’s now armed with a toolkit of emotional strategies, so instead of going nuclear, she’s got a plan.”

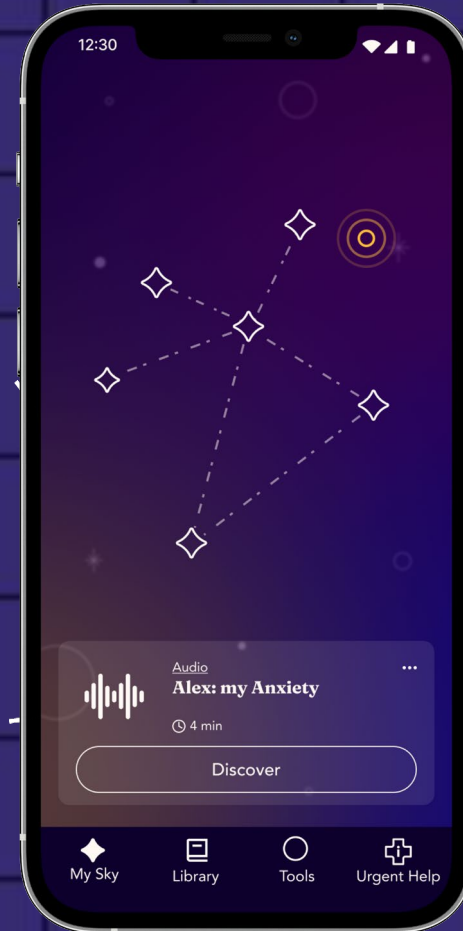
— *Brightline parent*



# Online Behavioral Health & Wellbeing Support



**Tina Sanders** (she/her)  
VP Customer Success



# 90 Second Visioning

**Imagine if the youth you serve had 24/7 access to trustworthy, free, and engaging behavioral health support on their phones or device.**

**Consider a specific student or youth you work with who you know could benefit from this type of after-hours support.**

- What would it mean for them to have 24/7 support on their phone or device?
- How would it impact their well-being, academic performance and/or overall resilience to have this support?
- Imagine if this support became a celebrated and integral aspect of your school or organization's culture. Envision the positive changes or enhancements you anticipate in the overall atmosphere for both students and staff.





a CalHOPE Program by Kooth

Youth 13-25 years

# Kooth has been transforming youth behavioral health care for over 20 years

The **gold standard** model of care for personalized, proactive and accessible digital support.

## Increased Access

No barriers  
Safe space  
Health equity

## Early Intervention & Responsive Support

User agency  
Person-centric  
Strengths-focused

## Therapeutic & Social Outcomes

Innovative  
Outcomes that youth want to achieve

## *Kooth by the numbers...*

Over 10.8 million youth (10-25) have access

>1m hours professional support

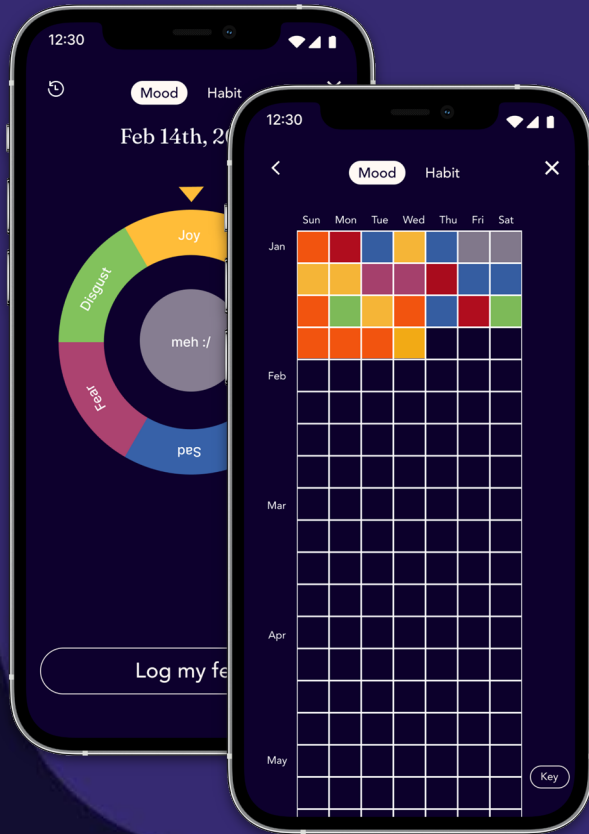
450+ employees

Onsite team in California



# Youth and adolescents self-determine the support they want and need in a safe space

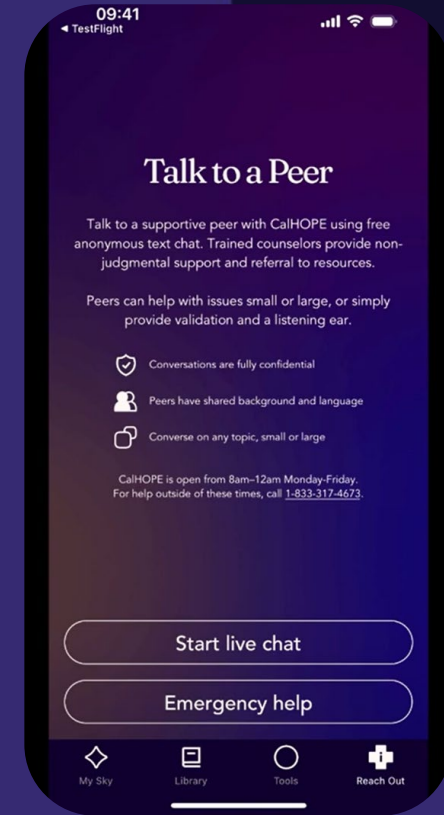
## Tier 1 - Self Help



## Tier 2 - Content and Community



## Tier 3 - Virtual Support



# Youth centered development & design

Our **youth-centered approach** ensures that our tools not only address the specific challenges faced by young individuals but also resonate authentically with their experiences, making them more relevant and effective in promoting mental well-being.

**In development, we engaged with over 300 youth across California, ages 13-25**

- >70% BiPOC
- Diverse backgrounds

**User feedback and insight drives our decision making**

- Color palette
- Navigation
- Type of tools offered etc.
- Choice in pathways and tools



## Amrit, 24 years old



*Amrit's shared how the app felt comforting and responsive. His feedback matched that from other users.*

*"I watched 'We asked you about...pressure' and I like how it was an actual real life person talking. I thought it was more comforting"*

**93%**

of male app users found something useful or helpful while using the app

**96%**

of app users from lower income households found something useful or helpful while using the app

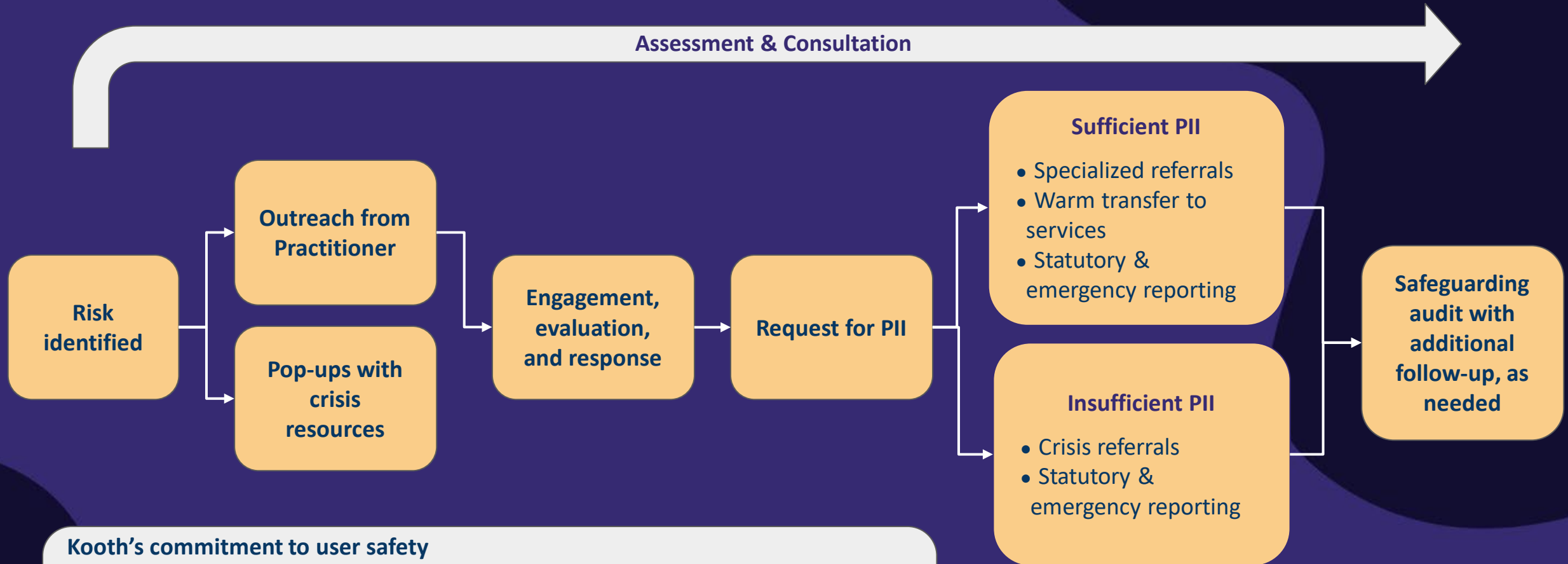
**92%**

would be disappointed if they couldn't use the Kooth app again

**94%**

would recommend the Kooth app to a friend

# Safety is front and center in all we do



## Kooth's commitment to user safety

- Federal and state obligations clinical model
- Ensuring all safeguarding risk is identified
- Timely and appropriate action is taken
- Staying within a sub-clinical model
- Mitigating any adverse impacts



“Just right” support,  
right on time

# 📖 90 Second Journal Reflection

Reflect on a time when a student you know has had difficulty regulating emotions in a the classroom.

- What was the situation?
- How did teachers handle it?
- What was the result for the student? For the rest of the class?
- How did the situation make you feel?



# Atlas' experience

**Background:** Atlas has a goal to make positive choices for handling strong emotions. At times, Atlas can get so worked up about something that they end up taking their frustrations out physically or verbally in inappropriate ways. Atlas' intervention plan includes an emotional-regulation goal.

**Situation:** Atlas enters the classroom deeply upset about something that happened at lunch. Atlas is clearly in a heightened emotional state and they are not able to focus on learning. When the teacher attempts to interact with them, they are not receptive and lash out at the teacher verbally.

*How many of you have ever seen a similar situation?*

*How do you think this played out for Atlas?*

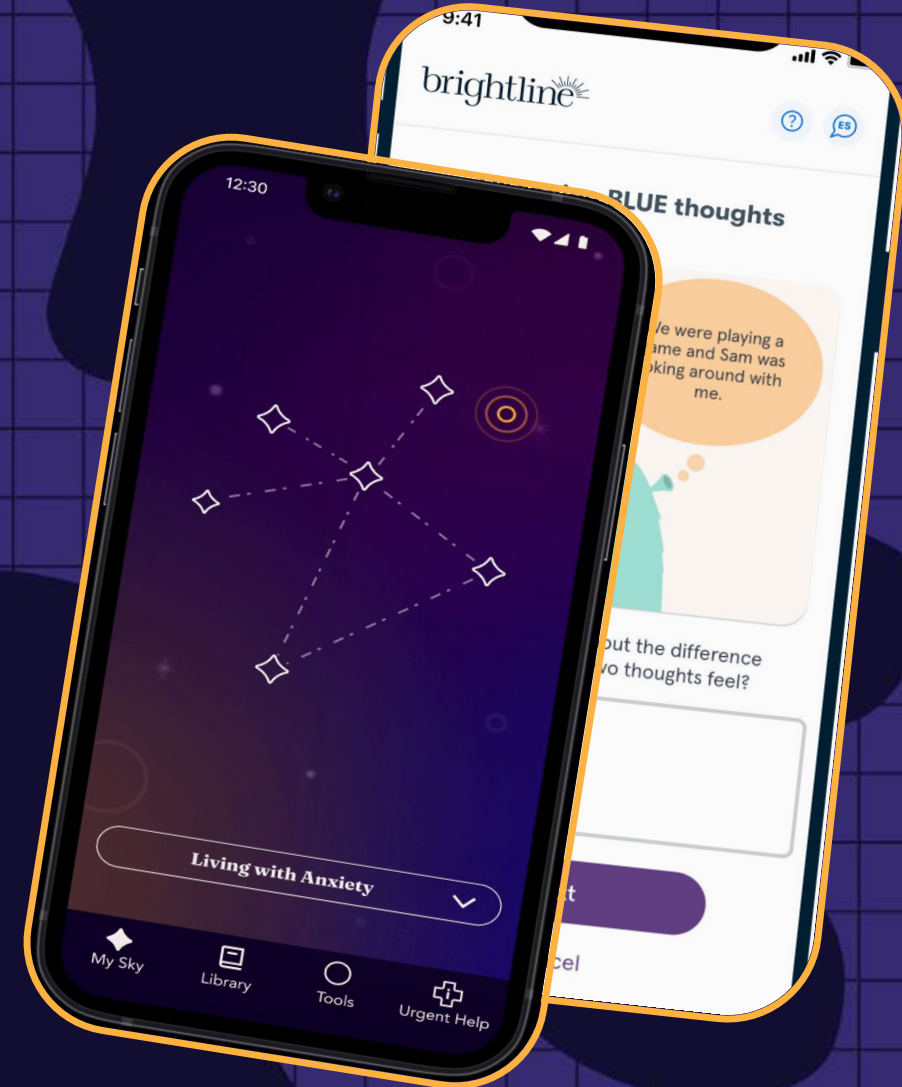


# Atlas & Soluna

## Resolution:

*The teacher gently reminds Atlas of their goal and reminded them of the breathing exercises they find helpful on Soluna. Atlas was provided time to utilize the resource while the teacher continued with planned instruction with the rest of the class until Atlas felt comfortable returning to learning.*

- *The teacher is relieved that Atlas was able to self-regulate.*
- *Atlas feels more successful and accepted by peers and teachers.*
- *Learning was not disrupted for the rest of the class and Atlas' ability to de-escalate prevented a discipline referral.*





# Noor & Soluna

**Background:** Noor is a high achieving student but doesn't have strong peer relationships or a strong support system at home. There are times when Noor becomes overwhelmed and experiences heightened anxiety. Her teachers are unaware of this because Noor is doing well in her classes.

**Situation:** It's Sunday night, and Noor is at home, feeling deeply anxious about the upcoming school week. In this heightened emotional state, Noor recalls the recent assembly at school where Soluna was introduced.

**Resolution:** Noor opens the app and navigates to the "How to Stop Anxiety or Overwhelm" tool from her personalized constellation on the Soluna app.

She follows the guided exercises and strategies provided in the tool, finding solace and relief as she actively engages with the app's resources to manage and alleviate her anxiety about school.

In addition to the personalized tools, Noor connects with peers in the community portion of the app, realizing she is not alone in her feelings. This sense of community provides comfort and reassurance, reinforcing the importance of accessible and reliable tools like Soluna for emotional well-being.





Supporting  
Your Organizations

# Support that's "just right", right when you need it

K-12  
Schools



Higher Education &  
Workforce  
Development  
Programs



Community Based  
Organizations &  
Healthcare



## For Youth

**Tier 1:** Proactive support for the behavioral health of ALL students and youth

**Tier 2:** Personalized assistance for the youth, chosen by the youth

**Tier 3:** Compassionate coaches to connecting youth to the help they need & want beyond the platform

## For You

**"Tier 1":** Effortless promotion through turnkey resources provided by Soluna

**"Tier 2":** Youth and staff engagement events organized and facilitate by Soluna's on the ground teams

**"Tier 3":** Guidance and support in seamlessly integrating Soluna into your youth-focused initiatives

# Embedded in communities: Working together to provide comprehensive care

**soluna**  
a CalHOPE Program by Kooth



Integration  
Kooth integrates with local services & supports, acting as a central hub to triage and treat users (sub-clinical) as well as improving access to the State's behavioral health ecosystem.

# Next Steps



# What does this mean for you?

## Educators and CBOs

- **Promote our offering** to youth and families by leveraging our digital toolkits
- **Work with our community leads** in your area to plan events that drive awareness and enrollment

## Mental Health Providers

- Consider joining our **Affiliate Network**, so we can refer youth to you based on your availability and eligibility criteria
- **Promote our offering** especially for youth in your network with pre/sub-clinical needs

## Health Plans

- Expect members that were directed to connect with you for **care coordination** support for more acute needs
- **Promote our offering** especially for youth that are struggling to get access to mental health care providers

## Other

- **Promote our offering** to youth and families
- **Introduce us to organizations** who work with youth and families who may benefit from our mental health services

# How we can partner



## Community Lead Presence

*Attend organized events & partnership training*



## Promotional Materials

*Digital Plug & Play Toolkit & Posters/Flyers*



## Webinars & Resources for Parents

*Access to evergreen and seasonal resources*

Fall

# Request Resources



0-12  
years



13-25  
years



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# Youth Perspective

**Esther Verdugo  
Blanca Paniagua**

# Breakout Groups

# Plenary Activity– Driving Adoption

## Ideaz Board Activity: Driving Adoption

What strategies should be deployed to drive adoptions to the Platform? Are there specific strategies for health plans, LEAs, CBOs, Parents/Caregivers, Students/Youth that you recommend to help drive adoption?

What resources, information, or reassurances do you need to help promote these platforms with youth and families?

# Next Steps



# Request Resources



0-12  
years



13-25  
years



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# Thank You!

Questions? Email: [CYBHI@dhcs.ca.gov](mailto:CYBHI@dhcs.ca.gov)

