



San Mateo County Behavioral Health & Recovery Services
Mental Health Services Act (MHSA)
Prevention and Early Intervention (PEI) Taskforce



MHSA PEI Priority Issue: Responding to youth mental health emergencies

Recommendation:

Expansion of mobile mental health crisis support for youth during school hours and after school in the community and including evidence-based mental health crisis prevention efforts such as training of youth, parents and school staff on identifying signs of mental illness, reducing stigma and supporting youth mental health and knowledge of available local resources (e.g. Question Persuade Refer training). **Cost: \$600,000/year**

Outcomes:

Decreased psychiatric emergency services youth visits
Decreased hospitalization for self-inflicted injury /mental health issues
Decreased emergency calls to law enforcement for youth in crisis
Decreased juvenile detention due to mental health needs
Improved individual level outcomes (recognizing symptoms, confidence to help/refer youth, etc.)

Research/Data:

Kidsdata.org:

	Suicidal Ideation (2011-13) % of 9 and 11th graders	Self-Inflicted Injury Hospitalizations (2014) Rate per 100,000	Hospitalization for MH Issues (2015) Rate per 1,000	Depression-Related Feelings (2011-13) % of 7,9, 11th graders
San Mateo	19.9%	71.2*	6.1	30.7%
California	18.5%	43.1	5.1	30%

*SMC has the highest rate per 100,000 youth compared to neighboring counties (has been increasing each year)

San Mateo County BoS Adolescent Report (2014-15):

- 70% of school students sampled reporting being depressed, anxious, or emotionally stressed.
- 38% of females and 23% of males reported having suicidal thoughts
- Stigma - youth who have mental health problems are more likely to have felt discriminated against than youth who have no mental health problems.

From Providers:

- Suicidal thoughts, emotional health concerns are on the rise and starting at a younger age
- StarVista reported an over triple increase crisis intervention services from FY15-16 to FY 16-17 with no added resources and funding cuts to the youth-focused crisis hotline
- In 2015, estimated 743 unique youth psychiatric emergency service visits (almost 1,000 total visits)
- 13.6% of calls to SMART units were from schools

Promising practices:

- **Youth mobile crisis response services -**
 - Safe Alternatives for Treating Youth (SAFTY)¹ from Santa Barbara County provides services to youth in collaboration with Crisis and Recovery Emergency Services. SAFTY provides crisis intervention, in-home support and linkage to services. The goal is to decrease psychiatric hospitalization and use of emergency rooms, juvenile detention and law enforcement for mental health crisis.

¹ https://www.casapacific.org/programs_services/santa_barbara_county/Safe_Alternatives_for_Treating_Youth_SAFTY

- **Evidence-based Trainings for prevention and stigma reduction-**

- Applied Suicide Intervention Skills Training (ASIST)² is a 2- day training that provides families, friends, and other community members and those in formal helping roles with skills to ensure that they are prepared to provide suicide first aid to help a person at risk stay safe and seek further help.
- Youth Mental Health First Aid (YMHFA)³ is an 8-hour training designed for adults who regularly interact with youth ages 12-18 to teach them how to help an adolescent who is experiencing a mental health or addictions challenge or is in crisis.
- Question, Persuade, and Refer (QPR)⁴ is a 1-3 hour adaptable training providing innovative, practical and proven suicide prevention tools. How to recognize the warning signs of a suicide crisis and how to question, persuade, and refer someone to help.
- Evidence-based trainings in San Mateo County, FY 2016-17

	# Trainings/yr	# Individuals Trained	Audience
YMHFA	20	420	40% CBOs/Community, 33% School staff, 8% Probation/AOD, 14% Parents
ASIST	2	45	60% CBO's, 32% BHRS, 8% School staff

- Other trainings such as Suicide is Preventable, Know the Signs, etc.

	# Trainings/yr	# Individuals Trained	Audience
BHRS (Crisis Coordinator)	67	1860	51% Schools, 24% Law Enforcement, 13% Parents, 6% BHRS, 5% CBO
StarVista	76	4638 yth, 973 adults	70% Schools, 21% CBO, 5% Parents, 4% Other

- **School crisis response plans–**

- SMCOE Suicide Prevention Protocol⁵ outlines administrative procedures for intervening with suicidal and self-injurious students and guidelines to school crisis teams after a student death by suicide
- SFUSD School Crisis Response Manual⁶ - guidelines for school crisis response teams and the roles of its members; protocols for delivering crisis intervention services; and protocols for notifying team members, school staff, students, parents, and the community of information about a crisis.

² <https://www.sprc.org/resources-programs/applied-suicide-intervention-skills-training-asist>

³ <https://www.mentalhealthfirstaid.org>

⁴ <https://www.qprinstitute.com/about-qpr>

⁵ San Mateo County Office of Education (2017), San Mateo County Schools Suicide Prevention Protocol

⁶ <https://www.sccoe.org/depts/schoolhealth/PublishingImages/Pages/Student-Wellness/SFUSD%20Crisis%20Response%20Manual.pdf>