INN01 – Community Employment Services Project

Individuals struggling with severe and persistent mental illness are not prepared for the demands of supported employment programs and would benefit from a “stepping stone” to the currently existing supported employment programs.

Proposal:
Provide a paid, supported employment program for individuals with severe mental health conditions. Participants will work alongside peer support specialists for on-site job training and coaching.

Innovative Component:
• Stepping stone for individuals with SPMI not ready for currently existing employment programs
• Paid, supported employment program for individuals with severe mental health conditions

Primary Purpose:
• Increase the quality of services, including better outcomes

Learning Objective:
• Makes a change to an existing mental health approach

Target Population:
• Adults 18 and older with SPMI who are currently receiving mental health treatment and are unemployed

Goals:
• Empower participants to reach vocational goals
• Support participants to overcome barriers and reach personal independence

Description/Services:
• 6 – 12 month paid training program
• Participants will work 3 hour shifts, 5 days a week
• Peer support specialist will be available on-site 100% of the time for job coaching and training, case management services (e.g., mobility training, transportation assistance, accompany participant to afternoon groups/trainings/events)

Proposed 3-yr Budget:
• $1,798,796

Proposed Annual Budget:
• $599,598

Proposed Number Served:
• Year 1: 60
• Year 2: 60
• Year 3: 60
(total = 180; cost per client = $9,993)
Historically, veteran/military children and families have been underserved and may become isolated in their communities. The socio-emotional and mental challenges brought by the pre-, mid-, and post-deployment often affect the children and family as much as it does the veteran/service member. However, there is a lack of coordinated, community-based services for veteran/military families. A comprehensive approach is needed to identify, engage, and address this gap.

**Proposal:**
Identify, screen, and treat veterans and their families, utilizing collaborations with community partners who specialize in community-based support, basic needs and homeless prevention, domestic violence prevention, mental health and trauma treatment, and research and evaluation.

**Innovative Component:**
- Coordination of community-based tailored services for veterans and their families

**Primary Purpose:**
- Increase access to underserved groups

**Learning Objective:**
- Makes a change to an existing mental health approach

**Target Population:**
- Veteran and military connected children, spouses/partners, and family members
- Veterans and active service members

**Services:**
- Project will utilize peer navigators to help identify barriers and unmet needs of these families and clinicians to provide direct mental health services
- Provide outreach, support and guidance, community resource information, referrals and linkages, basic needs, financial and career coaching, Tele-therapy, domestic violence prevention and education, mental health and trauma treatment
- Using a family resource model, peer navigators and Tele-therapy, project will direct participants to mental health and substance abuse services. Project will also integrate a family resiliency training such as UCLA FOCUS program to serve military personnel and their families

**Proposed 3-yr Budget:**
- $999,999

**Proposed Annual Budget:**
- $333,333

**Proposed Number Served:**
- Year 1: 180 training cases
- Year 2: 350 treatment trial cases
- Year 3: 475 treatment trial and training cases in other agencies
(total = 1,005; cost per client = $995)
Children and teens suffering from trauma typically drop out of treatment or do not respond to traditional methods. Services are needed to engage youth into treatment.

**Proposal:**
Combine Trauma-Focused Cognitive Behavioral Therapy (TFCBT) and Integrative Treatment of Complex Trauma (ITCT) into a single manual for the treatment of trauma among children and teens

**Innovative Component:**
- Combination of two evidence-based practices into a single approach

**Primary Purpose:**
- Increase the quality of services, including better outcomes

**Learning Objective:**
- Makes a change to an existing mental health approach

**Target Population:**
- Medi-Cal eligible clients, ages 5-18, with history of trauma

**Project Description/Services:**
- Combine the activity-oriented TFCBT approach with the dynamic and relationship-oriented ITCT approach
- Test the model to see if it’s effective compared to traditional approaches, TFCBT, or ITCT alone
- Disseminate to other clinics

**Proposed 3-yr Budget:**
- $564,551

**Proposed Annual Budget:**
- $188,183

**Proposed Number Served:**
- Year 1: 20 training cases
- Year 2: 100 treatment trial cases
- Year 3: 150 treatment trial and training cases in other agencies
(total = 270; cost per client = $2,090)
There is a correlation between unemployment and mental health issues. However, employment centers are not prepared to provide the emotional and mental health support that some of their clients need.

Proposal:
Provide mental health, education, and counseling services within local employment centers to support job seekers’ emotional and mental health needs.

Innovative Component:
- Introduces a new entry point into the mental health system
- Co-location and integration of mental health clinicians at local employment centers

Primary Purpose:
- Increase access to services

Learning Objective:
- Introduce a new mental health approach

Target Population:
- Adults, transitional age youth, foster youth, seniors, and veterans who are unemployed or at risk of unemployment
*TANF recipients
*The Temporary Assistance for Needy Families program is designed to help needy families achieve self-sufficiency

Goals:
- Prevent the development of mental health conditions
- Intervene early to reduce risk factors/stressors
- Prevent conditions from getting worse
- Increase rates of employment and retention

Services:
- Supportive individual counseling
- Brief therapy (no more than 16 sessions) ** Individuals who need more intensive therapy will be referred out
- Mental health education workshops
- Mental health support groups

Description:
- Assessment will be included in enrollment and intake packets at employment centers
- Clinicians will reach out to participants who score at risk or show signs of emotional and mental health problems and offer support
- Individuals who decline support will be part of the control group

Proposed 3-yr Budget:
- $1,120,000

Proposed Annual Budget:
- $373,333

Proposed Number Served:
- Year 1: 75
- Year 2: 100
- Year 3: 50
(total = 225; cost per client = $4,977)
INN05 – Healthy Eating Kitchen and Mobile Application

Rise of obesity among children and teens is a critical issue, which can lead to psychological disorders or mental health issues in adulthood. Healthy eating and healthy living can drastically increase feelings of well-being and a balanced mood, which can help manage and prevent mental health problems.

Proposal:
Create an interactive healthy living kitchen to encourage children and families to learn about healthy eating. In addition, a mobile application will be created to increase access to this information and reinforce the healthy living values established in the hands-on exhibit.

Innovative Component:
• Combination of hands-on, in person learning with a high tech, mobile application component

Primary Purpose:
• Increase access to services

Learning Objective:
• Introduce a new mental health approach

Target Population:
• 4th and 5th grade level children and their families

Goals:
• Reduce childhood obesity
• Reduce negative stigma related to childhood obesity
• Bring awareness about the importance of healthy eating and its impact on mental health
• Create a fun and engaging way to have hands-on experience in an exhibit and mobile app that will reinforce healthy living values, and expand their knowledge and access to information

Description:
• Healthy living kitchen will focus on understanding and calculating nutritional values of foods, recipes, and menus; choosing healthiest options; making healthy food choices and practices
• Mobile application will provide a broad way to increase access to this information and be utilized for data collection to help evaluate effectiveness of messaging

Proposed 3-yr Budget:
• $1,500,000

Proposed Annual Budget:
• $500,000

Proposed Number Served:
• Year 1: 200,000
• Year 2: 200,000
• Year 3: 200,000
(total = 600,000; cost per client = $2.50)
INN06 – Leap of Faith

Faith communities are an underutilized resource to identify and support families dealing with mental and behavioral issues with their children (0-18). Families tend to bring concerns to pastors more frequently than other professionals; however, pastors are often unprepared to address these issues.

Proposal:
Train ministers of all faiths to provide mental health support and referrals for children with mental illness and their families. Project proposes to offer educational resources and workshops to families, engage in outreach during congregational events, and establish a referral network that enables pastors and/or their designees to link families to services.

Innovative Component:
- Training pastors to provide mental health support and referrals for children with mental illness and their families

Primary Purpose:
- Increase access to services

Learning Objective:
- Make a change to an existing mental health approach
- Introduce a new application to the mental health system of a promising community driven practice/approach

Description/Services
- Pastor to Pastor trainings (ministers of all faiths)
- Workshops related to mental/behavioral health
- Referrals and linkages

Target Population:
- Children and teens (0-18) and their families within faith communities
- Pastors and church/temple staff

Proposed 3-yr Budget:
- $1,434,830

Proposed Annual Budget:
- $478,276

Proposed Number Served:
- Year 1: 480
- Year 2: 960
- Year 3: 240
(total = 1,680 cost per client = $854.07)
INN07 – LGBT Homeless Project

There is a lack of resources for LGBT youth who are homeless or at-risk of homelessness. There are no LGBT specific beds to house the homeless or they are not safely housed, placing them at risk of harassment and physical assault. There is a need for housing and mental health services, particularly services aimed at prevention or family reunification.

Proposal:
Address housing needs of the homeless or at-risk of homelessness within the LGBT community. Staffed with peer mentors and clinicians, project will assist with housing resources, mediation work, employment assistance, and substance abuse treatment and support.

Innovative Component:
• Mental health services aimed at family reunification
• Use of prevention model through mediation work and case management

Primary Purpose:
• Increase access to underserved groups

Learning Objective:
• Makes a change to an existing mental health approach

Target Population:
• LGBT members who are homeless or at-risk of homelessness

Goals:
• Address the needs of the homeless and at-risk of homelessness population within the LGBT community

Description/Services:
• Project plans to contract with community emergency shelters and room and boards to create at least 30 transitional living beds and 5 emergency shelter beds
• Peer mentors will be outreach and engagement workers
• Professional staff will assist with case management/prevention services (e.g., housing resources, mediation work, employment assistance, substance abuse treatment and support, family based services to assist with reunification or prevention of homelessness)
• Combination of individual and family mental health services aimed at family reunification, behavioral health, and successful placement in LGBTIQ safe housing

Proposed 3-yr Budget:
• $3,000,000

Proposed Annual Budget:
• $1,000,000

Proposed Number Served:
• Year 1: 50
• Year 2: 100
• Year 3: 100
(total = 250; cost per client = $12,000)
There are over 10,000 veteran students in OC with little to no access to mental health services. Veterans typically do not self-identify or seek medical services. However, social support from peers produces significant improvement in academic adjustment and fewer PTSD symptoms.

**Proposal:**
Design, distribute, and tabulate surveys to identify needs, problems, and potential solutions for veterans. Based on findings, a series of workshops will be offered to address behavioral modification and PTSD symptoms. In addition, mental health providers will visit with veteran students on a social basis to create an open and relaxing environment.

**Innovative Component:**
- Mental health support program for veterans through an activity-oriented, educational, and social environment

**Primary Purpose:**
- Increase access to services

**Learning Objective:**
- Makes a change to an existing mental health approach

**Target Population:**
- Recently discharged military troops currently enrolled in school

**Goals:**
- Build support for veterans
- Serve veterans who are experiencing difficulties in the educational system
- Allow veterans to begin building a sense of purpose in their educational pursuits
- Increase their desire to attend class and belong to a positive/supportive group

**Description/Services**
- Mental health therapists will work with veterans on group projects, visit with veteran students, provide outside interactions, and arrange volunteer work
- Trained PTSD mental health providers will be able to work with veterans on a social basis

**Proposed 3-yr Budget:**
- $1,500,000

**Proposed Annual Budget:**
- $500,000

**Proposed Number Served:**
- Year 1: 100
- Year 2: 250
- Year 3: 300

(total = 650; cost per client = $2,307)
INN09 – Project Embrace

The often traumatic reasons for leaving one’s country, as well as the long and hazardous journey and process of resettlement, increase the risk for refugees to suffer from a variety of mental health issues, yet the identification and treatment of mental health problems has lagged behind.

Proposal:
Combine various support services for newly arrived immigrants and offer a 12-week program that will provide home visits, family support, mental health screenings, and referrals for services, as needed.

Innovative Component:
- Comprehensive family support for newly arrived immigrants, which includes a self-care package, mental health assessment, referrals and linkages, direct mental health services, and peer support.

Primary Purpose:
- Increase access to underserved groups

Learning Objective:
- Makes a change to an existing mental health approach

Target Population:
- Refugees
- Newly arrived Special Immigrant Visas
- Asylees
- Cuban Haitian entrants
- Victims of trafficking

Goals:
- Provide mental health support
- Eliminate stigma and labels
- Integrate into mainstream society
- Increase access to mental health
- Decrease isolation
- Increase services
- Normalize needs of the community

Description/Services:
- Project will collaborate with local agencies regarding the arrival and contact information of immigrant families
- 12-week program led by master’s level clinicians, case managers and mentors from ethnic communities
- 2 phases: Phase 1 – Two home visits made to newly arrived refugees. First visit, self-care package provided, family paired with mentor. Second visit, clinician administers behavioral health measures for screening.
  Phase 2 – Participant services, education, and resources provided

Proposed 3-yr Budget:
- $1,081,956

Proposed Annual Budget:
- $360,652

Proposed Number Served:
- Year 1: 125
- Year 2: 125
- Year 3: 125
(total = 375; cost per client = $2,885)
INN10 – The Way Home

There is currently no reliable, affordable housing available to HCA clients. This underserved group struggles to identify viable living options where they can pursue recovery of their goals.

Proposal:
Offer a database of shared housing for consumers seeking affordable housing. Project will create a committee of consumers and providers to help establish voluntary standards of key elements of shared housing and a process to review homes to ensure they meet these basic standards. A listing of homes that have completed the process would be available through currently existing behavioral and mental health databases.

Innovative Component:
• Offer a database to expand access to shared housing

Primary Purpose:
• Increase access to underserved groups

Learning Objective:
• Makes a change to an existing mental health approach

Target population:
• Consumers who don’t have any type of rental subsidy seeking affordable housing

Goal:
• Expand access to shared housing to consumers and family members

Description/Services:
• Create a list of shared housing resources
• Partner with currently existing resource databases, such as 2-1-1 or OC Links, to provide resources to consumers and family members

Proposed 3-yr Budget:
• $913,660

Proposed Annual Budget:
• $304,553

Proposed Number Served:
• Year 1: 100
• Year 2: 250
• Year 3: 250
(total = 600; cost per client = $1,522)
INN11 – Traditional Chinese Medicine Based Online Meditation Program

Individuals struggling with mental illness often isolate or avoid seeking mental health treatment. Traditional Chinese Medicine has been shown to be an effective practice to help heal physical and mental health issues; however, 80% of people quit after two sessions. A web-based meditation program could reach underserved groups in the comfort and privacy of their own environment.

Proposal:
Create a web-based system designed to deliver and monitor a traditional Chinese meditation program.

Innovative Component:
• Practice of traditional Chinese meditation and use of a web-based system to monitor and track results of meditation technique specifically designed for mental health consumers

Primary Purpose:
• Increase access to underserved groups
• Increase access to services

Learning Objective:
• Makes a change to an existing mental health approach

Target population:
• Patients of doctors, clinics, hospitals, homes, ethnicities who have online access

Goals:
• Reduce drop-out rate and maintain engagement in program

Proposed 3-yr Budget:
• $870,300

Proposed Annual Budget:
• $290,100

Proposed Number Served:
• Year 1: 200
• Year 2: 1,000
• Year 3: 5,000
(total = 6,200; cost per client = $140)
INN12 – Whole Person Healing Initiative

Unmet spiritual needs can have a negative impact on health, increase healthcare costs, and may result in overuse of health care system (e.g., 70% of visits to PCP are related to psychosocial and emotional problems). Religion and spirituality have been shown to make a positive impact on health, suggesting a more holistic approach is needed in mental health treatment.

Proposal:
Integrate physical, mental, and spiritual health to treat mild to severe mental illness. This project proposes to use a multidisciplinary team of professionals (i.e., medical doctor, physician assistants, spiritual leaders, mental health workers, licensed clinicians) to address the whole person in mind, body, and spirit.

Innovative Component:
• Integration of physical, mental, and spiritual services
• Co-location of integrated physical, mental, and spiritual health services
• Use of consumer with shared faith and lived experience

Primary Purpose:
• Increase the quality of services, including better outcomes

Learning Objective:
• Makes a change to an existing mental health approach

Target population:
• Adults and older adults with mild to severe mental illness

Goals:
• Reduce stigma
• Educate patients about mental health through their spirituality
• Increase access to services and underserved groups and provide high quality services to improve outcomes
• Decrease overutilization of health care services
• Train consumers in providing spirituality-based peer support services
• Train clinicians in incorporating spirituality into services
• Collaboration of team to provide holistic patient care

Services:
• Assessment of physical, mental, and spiritual issues
• Referrals and linkages to services as needed
• Mental health services that integrate spirituality

Proposed 3-yr Budget:
• $2,569,800

Proposed Annual Budget:
• $856,600

Proposed Number Served:
• Year 1: 150
• Year 2: 300
• Year 3: 400
(total = 850; cost per client = $3,023)
Rates of unemployment and underemployment are high among those diagnosed with serious mental illness, specifically transitional age youth (TAY). Increasing employment rates would decrease toll on SSI, and improve mental health, self-esteem, and social connectedness. However, the single most commonly reported obstacle to employment among TAY is lack of confidence.

**Proposal:**
Create a food services business that provides hands-on job training and experience combined with on-site support staff who build participants’ confidence in the workplace and help manage mental health symptoms and behaviors while on the job.

**Innovative Component:**
- Utilize full-time, on-site mental health and employment coaches to create a unique supported work environment for TAY that addresses a cognitive emotional component (self-confidence) in conjunction with building workplace experience.

**Primary Purpose:**
- Increase the quality of services, including better outcomes

**Learning Objective:**
- Makes a change to an existing mental health approach

**Target Population:**
- TAY with SPMI who are not currently succeeding in supported employment offered by the FSPs and TAY PACT

**Goals:**
- Improving the employment outcomes of TAY through on-site supervision by easing transition into employment setting and addressing problems early on
- Participants would graduate from this wrap around supportive training program and obtain and maintain competitive employment, improve mental health outcomes and increase their resilience

**Services:**
- Educate participants on “how to be an employee” (review employer expectations and commonly encountered workplace situations)
- Use of cognitive behavioral and motivational interviewing techniques to build resilience and confidence prior to beginning jobs
- Participants will participate in all aspects of the food service business and work alongside experienced staff who will train them in their respective duties, provide emotional support, and redirection as needed
- On-site employment specialists (assist with resume building, job search, mock interviews, build confidence, workplace behaviors); mental health coaches (assist with symptom behavior and management, coping skills, confidence building); and Job trainers (train participants on job performance and build workplace confidence)
- Collaboration with FSP/PACT to ensure treatment goals are being worked on

**Proposed 3-yr Budget:**
- $6,070,739

**Proposed Annual Budget:**
- $2,023,579

**Proposed Number Served:**
- Year 1: 50 - 75
- Year 2: 150 - 200
- Year 3: 150 - 200
(total = 350 - 475; cost per client = $17,344 - $12,780)