# 2021 - 2022 Ventura County Grand Jury



# **Final Report**

# Mental Health Services and Wellness Centers in Ventura County Schools

June 2, 2022

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# Mental Health Services and Wellness Centers in Ventura County Schools

## SUMMARY

Across America, school-aged children are experiencing an unprecedented mental health crisis. One in three high school students report persistent feelings of sadness or hopelessness. From 2017 to 2019 one of six Ventura County students in grades 7, 9, and 11 considered suicide. Half of all mental illness presents itself by age 14, yet few children get the services they need. Despite the one time COVID stimulus funds, there remains a shortage of resources addressing mental health concerns among school-aged youth.

The 2021-2022 Ventura County Grand Jury (Grand Jury) investigated the resources used by the Ventura County Office of Education (VCOE), five Ventura County public school districts, and Ventura County Behavioral Health (VCBH) to meet the mental health needs of school-aged youth.

The Grand Jury found that the school setting is an effective venue to provide mental health services and early mental health intervention. The Grand Jury also found that on-campus Wellness Centers improve access to mental health services while promoting the well-being of students.

The Grand Jury found that funding is not adequate for the long-term sustainability of school-based mental health services. The Grand Jury found that Medi-Cal is underutilized as a funding source for mental health services by VCOE and Ventura County school districts. While barriers exist to claim Medi-Cal matching funds, the Grand Jury found that other California counties have successfully claimed these funds to finance sustainable school-based mental health services.

Based on the initial success of a joint VCOE and VCBH sponsored Wellness Center pilot program, the Grand Jury recommends that Wellness Centers be expanded to all Ventura County public high schools, and that VCOE and VCBH develop a strategy to expand the Wellness Center pilot program into Ventura County public middle schools.

The Grand Jury recommends that VCOE, Conejo Valley Unified School District (CVUSD), Simi Valley Unified School District, Oxnard Union High School District (OUHSD), and Ventura Unified School District, seek and obtain sustainable funding from public and private sources, and create an infrastructure to claim Mental Health Medi-Cal Administrative Activities (MH MAA) funds for Wellness Centers.

Recommendations from the Grand Jury can serve as a model for other Ventura County school districts to strengthen the mental health services accessible to their students.

# METHODOLOGY

The Grand Jury reviewed information from the following:

- California law related to mental health for children
- Internet research to gather relevant information from a variety of authoritative sources
- Relevant documents provided by education and mental health administrators
- Interviews with Ventura County and Alameda County officials who have knowledge of the current mental health programs in each County and schools

# BACKGROUND

## **Youth Mental Health Crisis**

The American Academy of Pediatrics, the American Academy of Child & Adolescent Psychiatry and the Children's Hospital Association jointly declared in late 2021 a National State of Emergency in Children's Mental Health in light of "soaring rates of depression, anxiety, trauma, loneliness, and suicidality with lasting impacts on [young people], their families and their communities." The joint declaration further stated that "the pandemic intensified the youth mental health crisis: across the country we have witnessed dramatic increases in Emergency Department visits for all mental health emergencies including suspected suicide attempts. This...crisis in child and adolescent mental health...represents an acceleration of trends observed prior to 2020." (Ref-01) "Nearly 1 in 3 parents say their children's mental health is worse now than it was before the pandemic," according to a Kaiser Family Foundation poll. (Ref-02)

The U.S. Surgeon General's 2021 Advisory *Protecting Youth Mental Health* points out that "...young people have shown alarming increases in the prevalence of certain mental health challenges – in 2019, one in three high school students and half of female students reported persistent feelings of sadness or hopelessness...." This Advisory defines mental health as "emotional, psychological, and social wellbeing," and notes that the "challenges today's generation of young people face are unprecedented.... And the effect these challenges have had on their mental health is devastating." (Ref-03)

The 2017-2019 California Healthy Kids Survey (CHKS) revealed that 30% of California grade 7 students, 33% of grade 9 students and 37% of grade 11 students reported experiencing chronic sadness. (Ref-04) The CHKS survey also indicated that 30% of Ventura County grade 9 students and 36% of grade 11 students reported chronic sadness. (Ref-05) Statewide, 15% of grade 7, 16% of grade 9, and 16% of grade 11 students considered suicide between 2017 and 2019. (Ref-04) In Ventura County, 16% of grade 7, 16% of grade 9, and 17% of grade 11 students considered suicide. (Ref-06) In 2019, suicide was the second leading cause of death in California among youth ages 15 to 24. (Ref-07)

According to the North Carolina Medical Journal (March 2020), "[a]ny comprehensive understanding of contemporary adolescents' mental health requires

a consideration of the role of social media." (Ref-08) The Pew Research Center points out that "[r]oughly eight-in-ten teens' ages 13 to 17 (81%) say social media makes them feel more connected to what's going on in their friends' lives." (Ref-09) However, the February 2020 Canadian Medical Association Journal reported "[h]igh proportions of youth engage in heavy smartphone use and media multitasking, with resultant chronic sleep deprivation, and negative effects on cognitive control, academic performance and socioemotional functioning." "Evidence from a variety of...studies implicate smartphone and social media use in the increase of mental distress, self-injurious behavior and suicidality among youth...." (Ref-10)

## Long-Term Consequences of Unaddressed Mental Health

"Half of all mental illness presents itself by age 14, yet few children get the services they need," according to the America's School Mental Health 2022 Report Card. (Ref-11) The California Children's Trust report, *Reimagining Child Well Being in Santa Clara County*, states that "[s]tudents with unaddressed needs are more likely to experience difficulties in school, including:

- Higher rates of tardiness and absenteeism
- Higher rates of suspension, expulsion, and high school drop-out
- Lower grades and test scores
- Disruptive behavior in classrooms and hallways
- Perpetrating or being the victim of frequent bullying as victim
- Using alcohol and other drugs on campus" (Ref-12)

A study in the Journal of the American Academy of Child & Adolescent Psychiatry shows "[a]ny childhood/adolescent depression was associated with higher levels of adult anxiety and illicit drug disorders and also with worse health, criminal, and social functioning..." into adulthood. (Ref-13)

The U.S. Surgeon General's 2021 Advisory recognizes that the "prevalence of mental health challenges varies across subpopulations;" for example, "socioeconomically disadvantaged children...are two to three times more likely to develop mental health conditions than peers with higher socioeconomic status." (Ref-03) Those at risk include children of families in crisis, children in poverty, LGBTQ+ children, and victims of violence, sexual abuse, racism or bullying. These risk factors combine with pervasive stigma and shame about mental health needs within families and communities to further hinder individuals from seeking and accepting mental health services. (Ref-14, Ref-15)

## Legislative Efforts to Address the Youth Mental Health Crisis

Federal, state and local agencies have recognized the decline of mental well-being in American children and the significance of devoting resources at public schools to improve positive mental health. (Ref-15, Ref-16, Ref-17, Ref-18) The U.S. Surgeon General's 2021 Advisory recommends the expansion of mental health programs and the hiring of more mental health staff in schools (Ref-03). The California Mental Health Services Act (MHSA) establishes criteria for awarding funds to all school districts and county offices of education. Funds are directed to programs preventing mental illness from becoming severe, improving access to underserved populations such as foster youth, LGBTQ+ or expelled/suspended students, and outreach to families to recognize potentially severe mental illness. The Act targets mental health services for children and includes campus-based mental health services. The Act charges the California Mental Health Services Oversight & Accountability Commission (MHSOAC) to target secondary students with trauma prevention and early intervention programs. (Ref-19, Ref-20) California's "...Children and Youth Behavioral Health Initiative was announced in July 2021 with a \$4.4B investment to enhance, expand and redesign the system that supports behavioral health for children and youth." This initiative "will be designed and implemented in partnership with [California Health & Human Services Agency] CalHHS departments, education stakeholders from early childhood, K-12 and higher education...." (Ref-21)

## **Mental Health Services at School**

The 2021 data collected by Mental Health America shows that 66% of California youth with major depression did not receive any mental health treatment, ranking California 45<sup>th</sup> out of 50 states and the District of Columbia in providing this mental health treatment. (Ref-22) A 2019 University of Maryland School of Medicine report states that "children and adolescents are more likely to receive needed mental health care in their school than in any other setting. Of children and adolescents who receive mental health services, 70%–80% receive them in school. Schools offer a more accessible, less stigmatizing environment than traditional community-based mental health settings...." (Ref-23) In the school setting teachers, counselors and other staff are situated and trained to identify mental health issues. (Ref-15) The 2019 report also states "[y]outh are 6 times more likely to complete evidence-based treatment when offered in schools than in other community settings..." (Ref-23)

## **School Climate**

According to a 2020 MHSOAC report, "[a] positive school climate is a major factor in student experiences and success." It "...benefits all students, especially those at risk." This report further cites "[f]our aspects of school climate are associated with mental health and wellbeing: 1) positive social connections and relationships; 2) school safety; 3) school connectedness; and, 4) academic environment. Students who feel that their schools have these characteristics report better psychosocial wellbeing, more positive and pro-social behaviors, fewer mental health issues, and fewer delinquent or risk behaviors." (Ref-14)

## **Strategies for Mental Health Intervention in Schools**

Mental health service providers, researchers and educators utilize a 3-tier framework in the delivery of mental health services to school children. Fig-01 is a commonly used representation of the 3-tier framework. Tier 1 refers to schoolwide preventive efforts for general healthy living and learning (core instruction), which applies to 75-90% of students. Tier 2 includes short-term targeted interventions for counseling, support or referral, which are applied to 10-15% of students. Tier 3

impacts less than 10% of students who "...have significant challenges that do not respond to intervention and support in Tier 1 or Tier 2." (Fig-01) (Ref-14, Ref-24)

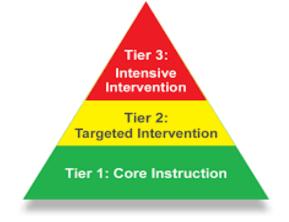


Fig-01 - Multi-Tier System of Supports (Ref-25)

## Wellness Centers and School-Based Health Centers

The Wellness Center is an on-campus model that delivers primarily Tier 1 and some Tier 2 services while referring Tier 3 services to off-campus mental health providers. This model focuses on providing a safe, supportive environment where students can discuss concerns and needs in a confidential, non-judgmental space. (Ref-15, Ref-26) Wellness Center services include "mental health screening, intervention, counseling, education, and referrals; crisis intervention; linkages to a vast network of counseling and mental health treatment; coordination with health, educational, and other community services; suicide prevention; drop-out prevention; and outreach to high-risk youth." (Ref-27)

The school-based health center model provides a full range of on-campus medical services in addition to mental health resources provided in a Wellness Center. (Ref-28) The American Journal of Public Health notes that "[s]tudies have shown a significant decline in depression among students who received school health center mental health services and a reduced likelihood of suicide ideation among students attending schools with school health centers." (Ref-29)

## **Ventura County School Districts**

Ventura County has 20 public school districts, each accountable to its own school board. There are approximately 140,000 students in 190 schools including 32 public high schools and 40 public middle schools. (Ref-30, Ref-31) The Ventura County Office of Education (VCOE) "collaborates with [these 20] local districts to provide a coordinated and coherent system of support." Training, workshops, professional learning and coaching are available as well as administrative and fiscal supports to these districts. (Ref-32) The Grand Jury interviewed officials from five public school districts representing 60% of Ventura County's student population.

# DISCUSSION

## Youth Mental Health in Ventura County

Experts consider school to be the "bedrock of the community and the place where children spend most of their time outside of their homes," and "central to promoting wellness, and accurately identifying and quickly responding to trauma and emerging mental health needs." (Ref-14) Ventura County school districts have implemented an array of mental health services and programs for their students ranging from traditional counseling to various referral programs. In partnership with Ventura County Behavioral Health (VCBH), there are 72 mental health clinicians assigned throughout county schools. (Ref-15)

School districts have also partnered with VCBH or VCOE on a number of programs involving referrals to contracted off-campus entities. Logrando Bienestar helps Latinx students overcome stigma and navigate mental health services. (Ref-33) Care Solace connects youth to mental health services. (Ref-34) Rainbow Umbrella provides education, support and stigma reduction for LGBTQ+ youth through community groups and meetings. (Ref-35) Building Resilience and Inclusion Through Engagement (BRITE) promotes well-being and helps youth with substance abuse problems. (Ref-36) For special education students, VCOE partners with VCBH to provide intensive home-based mental health intervention to students and their families through the Collaborative Educational Services (COEDS) program. (Ref-37) Interface Children & Family Services is a comprehensive provider of mental health and trauma treatment. (Ref-38)

The Ventura County Supervisors approved funding for an independent assessment of the County's mental health system in February 2022. The assessment will examine the entire system and where intersections with other agencies exist, including education, hospital systems, law enforcement, and other social services. The assessment is expected to take 18 months, beginning in mid-2022. (Ref-39)

## **Wellness Centers**

A 2020 MHSOAC report "identified common barriers to promoting student wellness and addressing the signs and symptoms of mental health needs when they first arise, including the following:

- The education system's priority focus on learning and academic achievement...
- Schools lack of on-campus resources, including sufficient numbers of schoolbased mental health professionals...
- The complexity of family needs...
- Mental health services and supports for children and their families are often poorly organized...
- Stigma and shame about mental health needs are pervasive in families and communities." (Ref-14)

Some Ventura County school districts have utilized Wellness Centers, physically located on school campuses, to address the mental health needs of youth. Wellness Centers place an emphasis on Tier 1 services. (Ref-15)

"The goals of Wellness Centers include:

- Prevent mental illness from becoming severe and disabling
- Reduce risk factors negatively affecting mental health and academic success
- Improve access to mental health services
- Create a safe and supportive environment to confidentially discuss concerns, free from stigma or shame
- Provide a space for helpful interaction with peers" (Ref-27)

## **Conejo Valley Unified School District Wellness Centers**

In 2020, CVUSD established Wellness Centers at all five of its high schools with a staff of five licensed or near-licensed clinicians. Ventura County is experiencing a severe shortage of qualified mental health counselors, social workers, and therapists. In response, the district enhanced mental health staffing capacity by utilizing 13 college student interns. Hours of operation on school days are before, during and after school. Each center has a separate physical space with couches, and private rooms for in-person counseling. The start-up cost for establishing the Wellness Centers was funded by the Conejo Schools Foundation (10%), a California MHSA grant (30-40%) and the remainder by one-time COVID stimulus funds. Feedback from "students, teachers, counselors, and parents throughout the district is overwhelmingly positive." (Ref-15)

#### Ventura County Office of Education Wellness Center Pilot Program

In 2021, VCOE collaborated with VCBH to obtain a MHSA grant for \$6.6 million over five years to set up Wellness Centers on eight high school campuses within Ventura County: four in Oxnard, and one each in Fillmore, Moorpark, Santa Paula, and Ventura. However, there are no Wellness Centers in Ventura County public middle schools. On school days, each center is staffed with a half-time coordinator, limiting service hours to half days. These Wellness Centers opened in the fall of 2021. A joint VCOE and VCBH Wellness Center Administrative Team meets regularly to monitor and refine services. (Ref-15)

#### **Oxnard Union High School District Wellness Centers**

OUHSD's administration and its school board decided to expand the four VCOE and VCBH pilot program Wellness Centers to serve all its students and reallocated funds from its budget to pay for five additional centers. The expansion included funding for a director to manage the Centers, two full-time wellness specialists, and one guidance technician for each center. Centers are open before, during and after school and include some Saturday hours. Ten to twelve trained student peers, under the direction of an adult specialist at each campus, manage wellness communications for the entire student body. These communications include social

media/TV platform, school announcements, peer visits to classrooms, "Kindness Weeks" and other mental health awareness campaigns. (Ref-15)

#### Other Examples of School-Based Health Centers or Wellness Centers

Alameda County has had school-based health centers providing mental health services in addition to medical services since 1996. Its 2020-21 preliminary evaluation of the centers reviewed clinical data, surveyed program participants (students), quarterly reports and activity logs. The evaluation identified 36% of visits were for behavioral health issues. Data from those surveyed showed 93% of students felt the centers helped them "deal with stress/anxiety better," as well as helped them "stay out of trouble." When asked if they agree or strongly agree how they feel because of Health Centers, 95% reported they "do better in school," 93% reported "feeling better about my future" and 90% reported "feeling safer at my school." (Ref-15, Ref-40)

Sacramento County, in 2020, launched an "initiative to establish schools as 'centers of wellness' with access to mental health clinicians on every school campus. The initiative, a partnership between the Sacramento County Office of Education and the Sacramento County Department of Health Care Services establishes a systemwide, continuum of care for mental health and wellness sustained on Medi-Cal funding, and with an emphasis on prevention and social and emotional learning." (Ref-41)

## **Funding Sources for School-Based Mental Health Services**

California's Local Control Funding Formula (LCFF), along with funding from federal and local sources, constitute each district's total operating budget annually. To fund ongoing mental health services, districts must either tap into their budgets or seek other public or private sources. (Ref-15) Public sources include MHSA grants and Medi-Cal. (Ref-42)

Alameda County implemented its health centers with start-up funding from a bond approved 0.5% sales tax increase along with reallocation of tobacco settlement funds and MHSA grant monies. Sustainable funding for the ongoing operation of the centers has been partly achieved through the MH MAA program. Alameda County claims these matching funds utilizing a team of three to four full-time employees. In 2020, those reimbursements for qualifying mental health activities amounted to over \$24 million. (Ref-15) Activities qualifying as MH MAA-eligible for reimbursement include outreach and enrollment, care coordination and monitoring, transportation, referral, eligibility determination, program planning, policy development, and interagency coordination. (Ref-43)

Ventura County school districts have opted not to participate in Medi-Cal reimbursement programs based on challenges associated with the claiming process. (Ref-15) These challenges center on administrative or process complexities, onerous auditing, limited resources, staffing, and knowledge. (Ref-44) The California Children's Trust asserts that while "the administrative barriers to Medi-Cal funds are real...given the rapidly growing number of students eligible for Medi-Cal, we strongly encourage education leaders to take...steps to set up...Medi-Cal

programs as a strategy to improve social, emotional, and mental health support to students." (Ref-45)

In October 2021, the California Department of Education, California Department of Health Care Services, California Health and Human Services Agency, and the Medi-Cal for Students Workgroup made the following recommendations to the California State Legislature and Department of Finance:

- Implement programs to maximize reimbursement on school-based expenditures
- Facilitate Medi-Cal billing and claiming audit process
- Identify options for expanding access to school-based preventive health, mental health, and substance abuse services (Ref-44)

# FINDINGS

- **F-01.** The Grand Jury finds that mental health problems among youth are widespread, severe and have long-term repercussions.
- **F-02.** The Grand Jury finds that mental health issues can begin in childhood and, if left unaddressed, can continue into adulthood.
- **F-03.** The Grand Jury finds that the school setting is an effective venue to provide mental health services and early mental health intervention.
- **F-04.** The Grand Jury finds that the well-being of students affects their academic performance and success in school.
- **F-05.** The Grand Jury finds that Wellness Centers reduce stress and anxiety, increase feelings of safety and improve academic performance in students.
- **F-06.** The Grand Jury finds that school-based Wellness Centers improve children's access to mental health services.
- **F-07.** The Grand Jury finds that Ventura County has a shortage of mental health professionals at schools.
- **F-08.** The Grand Jury finds that Oxnard Union High School District has established a Wellness Center in each of its nine high schools.
- **F-09.** The Grand Jury finds that there are Wellness Centers in 18 out of 32 Ventura County public high schools.
- **F-10.** The Grand Jury finds that there are no Wellness Centers in Ventura County public middle schools.
- **F-11.** The Grand Jury finds that CVUSD's utilization of college-level mental health interns is a method for supplementing mental health staff at each of its five high schools.

- **F-12.** The Grand Jury finds that Ventura County school districts have obtained time-limited funding for initial establishment of Wellness Centers.
- **F-13.** The Grand Jury finds that current funding for Wellness Centers in Ventura County schools is not adequate for long-term sustainability.
- **F-14.** The Grand Jury finds that school districts in other California counties have successfully claimed Medi-Cal MH MAA matching funds to finance school-based mental health services.
- **F-15.** The Grand Jury finds that Medi-Cal MH MAA is under-utilized as a funding source for mental health services by Ventura County school districts.

# RECOMMENDATIONS

- **R-01.** The Grand Jury recommends that by June 30, 2024, VCBH in collaboration with VCOE, expand the Wellness Center pilot program into all Ventura County public high schools. (F-01, F-02, F-03, F-04, F-05, F-06, F-09)
- **R-02.** The Grand Jury recommends that by June 30, 2025, VCBH in collaboration with VCOE, develop a strategy to expand the Wellness Center pilot program into Ventura County public middle schools. (F-01, F-02, F-03, F-04, F-05, F-06, F-12)
- **R-03.** The Grand Jury recommends that pursuant to Wellness Center continuity and expansion VCOE, Conejo Valley Unified School District, Simi Valley Unified School District, and Ventura Unified School District seek and obtain sustainable funding from public and private sources. (F-12, F-13, F-14, F-15)
- R-04. The Grand Jury recommends that pursuant to Wellness Center continuity and expansion, VCOE, Conejo Valley Unified School District, Simi Valley Unified School District, and Ventura Unified School District create an infrastructure to claim Medi-Cal MH MAA funds for Wellness Centers. (F-12, F-13. F-14, F-15)

# RESPONSES

## Responses required from:

## The following elected officer within 60 days:

Ventura County Superintendent of Schools (F-01, F-02, F-03, F-04, F-05, F-06, F-09, F-12, F-13, F-14, F-15) (R-01, R-02, R-03, R-04)

## The following governing bodies within 90 days:

Ventura County Behavioral Health/Board of Supervisors (F-01, F-02, F-03, F-04, F-05, F-06, F-09, F-10) (R-01, R-02)

Conejo Valley Unified School District (F-01, F-02, F-03, F-04, F-05, F-06, F-10, F-12, F-13, F-14, F-15) (R-02, R-03, R-04)

Oxnard Union High School District (F-12, F-13. F-14, F-15) (R-03, R-04)

Simi Valley Unified School District (F-01, F-02, F-03, F-04, F-05, F-06, F-09, F-10, F-12, F-13, F-14, F-15) (R-01, R-02, R-03, R-04)

Ventura Unified School District (F-01, F-02, F-03, F-04, F-05, F-06, F-09, F-10, F-12, F-13, F-14, F-15) (R-01, R-02, R-03, R-04)

## COMMENDATIONS

The Grand Jury commends Conejo Valley Unified School District's leadership and school board for locating private funding sources, developing college-intern staffing and establishing Wellness Centers at its five high schools. (F-07, F-11)

The Grand Jury commends Oxnard Union High School District's leadership and school board for expanding its Wellness Centers to all nine of its schools and for expanding the level of services at those centers beyond the VCOE and VCBH "pilot" funding levels. (F-08, F-09)

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# GLOSSARY

TERM	DEFINITION
BHAB	Behavioral Health Advisory Board
BRITE	Building Resilience and Inclusion Through Engagement
CalHHS	California Health & Human Services Agency
CHKS	California Healthy Kids Survey
COEDS	Collaborative Educational Services
CVUSD	Conejo Valley Unified School District
LCFF	Local Control Funding Formula
LGBTQ+	Lesbian, gay, bisexual and transgender, queer (or questioning), all of the gender identities and sexual orientations that are not specifically covered by the other five initials
ΜΗ ΜΑΑ	Mental Health Medi-Cal Administrative Activities
MHSOAC	Mental Health Services Oversight & Accountability Commission
MHSA	Mental Health Services Act
MTSS	Multi-Tier System of Supports
OUHSD	Oxnard Union High School District