HUMAN SERVICES GRANTS PROGRAM (HSGP)

FY 2021-22 PROGRAM STATUS REPORT

Agency: Providence Saint John’s Child and Family Development Center \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Youth Development Project

Program: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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###### FY 2021-22 SUBMISSION CALENDAR

SECTION I: **PROGRAM ACCOMPLISHMENTS, CHALLENGES, AND CHANGES**

**Program Accomplishments include:**

**Client Engagement:**

* At year-end, YDP therapists provided therapy to eighty-six (86) youth, ten (10) are MSST/YRT youths.
* The YDP program utilizes short-term curriculum based treatment models, along with longer-term process oriented group therapy models, resulting in a total of nine (9) therapy groups this year.
* Forty-seven (47) youth participated in group therapy. Thirty-nine (39) youth were seen in individual/family therapy.

**Mental Health Promotion and Outreach Efforts**

* YDP clinicians provided supportive services for children and youth at Viginia Avenue Park, who were struggling with processing the tragic school shooting which occurred in Uvalde, Texas.
* YDP clinicians provided supportive services for local educators at a pre-school who were emotionally struggling after receiving threats to their safey from a neighbor.
* YDP OHS clinician developed an Identity Dialogue group to help support diverse populations within our respective school sites. Group was well received at both the high school and middle school level.
* YDP OHS clinician planned and offered a workshop for graduating seniors focused on developing interviewing skils and strengths.
* YDP Clinicians provided a series of 16 in-class workshops focused on helping students build positive coping skills as they continue to navigate the impact of the pandemic on their mental health and overall functioning.
* YDP Clinicians provided mental health outreach and consultation services at ELAC monolingual Spanish speaking parenting group.
* YDP Program Clinicians provided three trainings on “Depression and Signs of Suicidality in Adolescence” at our respective scool sites: John Adams Middle School, Lincoln Middle School and Olympic High School. These trainings were a part of an initiative requiring teachers and administrators to better recognize the signs and symptoms of depression and suicidality in their students.
* YDP staff and interns sent weekly emails to teachers who have students participating in our group services. The intention is to help teachers have a better understanding of our program services, and to reinforce the interventions we are implementing in group, in the classroom setting.
* YDP clinicians supported virtual Back to School Nights, where outreach and promotion of our program services was provided for principals to share with parents.
* Outreach and consultation with stakeholders in the community, school personnel, including teachers and counselors take place regularly to assure each youth’s needs are met. At year-end, YDP clinicians provided 100 hours ofconsultation and provided over 842 Outreach hours.
* The following is a breakdown of YDP students served by school site as well as type of service received by school site:

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| --- | --- | --- | --- | --- | --- |
|  | John Adams | Lincoln | Olympic/OCLC | SAMOHI | College |
| Number of unduplicated  Students served | 28 | 28 | 23 | 4 | 3 |
| Type of Service received | 16 Group  12 Individual | 15 Group  13 Individual | 17 Group  6 Individual | 4 Individual | 3 Individual |

**YDP Summer Activities for 2021;**

* YDP clinicians provided a 10-week Positive Parenting Program (Triple P) in Spanish via Telehealth, which was well received by the community.
* YDP provided a 10-week Triple P group in English via Telehealth, which was well received. Both parenting groups also provided support to parents by teaching tools to effectively cope with the various stressors related to the COVID-19 pandemic, and impact on their parenting.
* YDP clinicians provided weekly in-person Therapeiutic Arts and Crafts programming at Police Activities League.
* YDP provided weekly in-person outreach at Virginia Avenue Park throughout the summer months, until the program was closed due to COVID-19 infections.
* YDP clinicians continued to meet with their individual/family therapy clients throughout the summer months, via Telehealth and in person, when possible.

**Significant Program Challenges include:**

* Due to the ongoing impact of COVID-19, we’ve had entire classrooms go into quarantine, which has impacted service delivery at certain sites: For example, we had several instances where group process was disrupted due to multiple participants being in quarantine.
* At Olympic High School, the impact of not having a dedicated counselor as well as the reduction in teachers, continues to negatively impact the number of referrals received. In addition, student attendance at group for that site has been a challenge, which negatively impacts service delivery.

###### SECTION II: ASSESSMENT, EVALUATION AND PARTICIPANT INVOLVEMENT

YDP seeks to achieve the following objectives: To foster resiliency, to foster a belief in the future, and to foster a clear and positive identity. These objectives are measured by administering widely used instrumentation measures at pre-treatment, and post-measures at the completion of treatment.

The YDP team meets bi-monthly to discuss program coordination and implementation to ensure program objectives are being met, and that clients are able to maximize participation in various program components.

**Program Evaluation**

* **Participant Involvement--Client Satisfaction Surveys**:

Annually, YDP staff administer client satisfaction surveys to youth who participated in program services.

* **Internal Systems of Evaluations**:

YDP continued to make use of several internal mechanisms to review the impact of the program. The YDP team met bi-monthly to discuss coordination and implementation of services and are diligently working to ensure youth and family mental health needs are being met. In addition, Chart Reviews are conducted to assess client progress, and YDP staff attend an Annual Program Evaluation Retreat with the Executive Director and the Outpatient Director. At the retreat, program outcomes are reviewed along with client and community needs.

**Collaboration and Consultation with other Service Providers;**

* LMS lead effectively collaborated with the ASB student body and LMS school counselors to develop a video promoting mental health awareness on campus, which was shown school wide.
* YDP JAMS clinician effectively collaborated JAMS Mental Health support staff and with the Paws 4 Life program to help provide students with access to therapy dogs during May MH awareness month.
* JAMS lead clinician effectively collaborated with the 6th grade school counselor and her school psychology interns at JAMS to provide in-class presentations to all 6th grade students, which was focused on helping promote positive coping skills to better cope with transition back to school and the ongoing impact of the COVID-19 Pandemic.
* YDP Coordinator effectively collaborated with Lincoln school counselors to offer presentations to the entire school, which focused on identifying and building upon their positive coping skills.
* YDP lead clinicians effectively collaborated with JAMS, Olympic and Lincoln staff in enhancing their knowledge around the impact of mental health on overall socio-emotional and academic functioning, which not only assisted in better coordination of services for open clients, but also resulted in referrals to our program.
* YDP clinicians attended monthly school counselor meetings at John Adams Middle School and bi-monthly meetings at Lincoln Middle School, where they collaborated and consulted with counselors about services provided on campus, as well as updated them on progress of youth in treatment.
* YDP clinicians regularly participated in SST meetings where they collaborated with school personnel including school counselors, school nurse, school psychologist, assistant principals, and teachers, in helping to better identify students in need of mental health support and to better access their educational needs.
* YDP clinicians attended the bi-weekly Youth Resource Team (YRT 2.0) meetings via Zoom. This meeting includes SMPD, Probation, PYFC, JVS, DMH, and PAL. Coordinator effectively collaborated with partners and assisted the group by addressing the possible mental health needs of the youth identified by the team.
* YDP Coordinator effectively collaborates with community partners and attends the bi-monthly Middle School Support Team meetings.
* YDP clinicians continued to demonstrate strength in collaborating with community providers and attended the quarterly School-Based Mental Health Providers meeting, and the YDP Coordinator attended the Santa Monica Mental Health Coordinator’s meeting.

###### SECTION III: BOARD INVOLVEMENT

Board met on July 28, October 27, November 17th, January 26th, May 25th and July 27th. Average Board attendance is 95%. Board Development Activities include: In person Board event held to honor the late Chair, welcome new members and to thank outgoing members. 11 Board Members work and/or reside in Santa Monica, and there is 1 current Board vacancy with no immediate plans to fill. Significant policy directions or actions taken by the Board during this reporting period include the below items:

* Approved appointments for new Board Chair
* Approved medical staff appointments and reappointments
* Approved election of Board Officers; Special Advisors
* Approved the Revised 2022 Operating Budget.
* Approval of Quality and Patient Safety Committee Summary
* Approval of Various policies and procedures
* Approval of Peer Reviews

###### SECTION IV: STAFFING PATTERN

In July of 2021, after 9 years being a part of the YDP program, Dr. Ashley Silvera transitioned out of YDP. We welcomed Dr. Marie Johnson to YDP in January 2022.

**SECTION V: SPECIAL FUNDING CONDITIONS**

Standard Funding Conditions:

* Agency will participate in the City’s efforts to develop an outcomes measurement system to better track human services program demographics and outcomes.
* YDP Clinicians have successfully transitioned a majority (over 95%) of their services to in-person services. All group therapy services are provided in person, and the majority of Individual Therapy services are in person, with the exception of few clients who preferred and requested to continue via Telehealth services. Classroom workshops and staff trainings have all been conducted in person. School and community meetings (SST’s, counselor meetings, YRT/MSST) are for the most part being conducted and attended virtually.
* Agency will support eligible clients in submitting applications to applicable relief and housing sustainability programs as needed.

Youth and Families Agencies:

* Agency leadership actively participates in Santa Monica C2C meetings, and YDP staff actively participate in bi-weekly YRT and MSST meetings.
* Agency will work with the City and the youth and family network of care to provide coordinated support to individuals and families that might require agency expertise in the aftermath of a serious community crisis.

School-Based Mental health Programs:

* The YDP program provides services 12 months per year and documents summer activities conducted in the community.
* Agency will document intake and report the number of eligible Santa Monica participants that have Medi-Cal/DMH funding, private insurance, or no insurance:

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| --- | --- | --- | --- |
| Medi-Cal | Private insurance | No Insurance | Not Reported |
| 48 | 24 |  | 14 |

* YDP maintains a staffing pattern that includes bilingual/bicultural licensed clinicians as well as bilingual/bicultural Master’s level Interns.
* YDP does not meet with CREST staff, CDP staff does, and it is documented in the CDP Mid-Year Report.
* A Year-End review meeting was held with school counselors and/or relevant administrators to discuss number of students served, observed service trends, and to discuss potential future needs.

**SECTION VI: SERVICE NEEDS AND REFERRALS**

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| **ASSESSMENT OF ADDITIONAL SERVICE NEEDS**  **(Santa Monica Participants)** | **FY 2021-22**  **Number Responding “Yes”**  **at Mid-year** | **FY 2021-22**  **Number Responding “Yes”**  **at Year-end** |
| 1. “Do you or anyone in your household have unmet employment needs?” | 0 | 0 |
| 1. ”Have you missed or been late on a home rental or mortgage payment within the last 12 months?” | 0 | 0 |
| 1. “Do you or anyone in your household have an unmet childcare/afterschool need?” | 0 | 0 |

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| **INCOMING PARTICIPANT REFERRALS**  **(Santa Monica Participants)** | **FY 2021-22**  **Number**  **at Mid-year** | **FY 2021-22**  **Number**  **at Year-end** |
| Participants referred by another agency |  |  |
| **Please list the top 3 referring agencies** |  |  |
| * 1. **MSST/YRT (St. Joseph)** | 4 | 10 |
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**SECTION VII: PROGRAM SERVICES AND OUTCOMES**

**Program Outcome Results**

* The respondents included only those youth who completed both the pre and post questionnaires, and who did not miss any items on the pre and post questionnaires.
* YDP **exceeded most** of its target outcomes:*Most youth who in* ***pre-treatment fell in the clinical ranges of the respective measures****,* ***made significant improvement post-treatment****.* Of the youth who fell in the clinical range of the Depression measure in pre-treatment (scores of >16), **78.6%** reported lower levels of depressive symptoms from pre to post treatment.  For those youth who fell in the clinical range of the Self-Esteem measure (score of <15), **46.4%** increased their self-esteem levels from pre-to post treatment. Lastly, for those youth who in pre-treatment fell in the clinical range on the Mattering scale (score of <10) **72.4%** reported higher levels of mattering post-treatment*.*

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|  | **Service Category/ Program Goal** | **Activity Type** | **Activity Description** | **Annual Target\*** | **Documentation**  **Method** |
| 1 | Improved mental health | Output  Output | Participant receives individual therapy  Participant receives group therapy | 25 SMPP  60 SMPP | At Year End 39 participants received Individual therapy services. At Year End 47 participants received group therapy services. |
| Outcome  Outcome  Outcome | Participant increases self esteem  Participant decreases depression  Participant increases sense of mattering | 65% (55 SMPP)  65% (55 SMPP)  65% (55 SMPP) | At year-end, 46.4% of respondents reported an increase in their Self-Esteem.  At year-end, 78.6% reported a decrease in Depression  At year end, 72.4% reported an increase of their sense of Mattering. |
| 2 | Improved mental health | Output | YRT/MSST Participant receives group or individual therapy | 10 SMPP (duplicated in 85 total participants) | At year end we served 10 YRT/MSST youths. |
| 3 | Improved school climate | Output | Provide mental health consultation to school personnel and stakeholders in the community | 75 consultations | At Year-End we’ve provided 100 mental health consultations hours to school personnel and stakeholders in the community. |

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| --- | --- | --- | --- |
| Document number of youth served per site, as well as those referred, but who did not receive services | At year-end:  28 youth were served at JAMS  28 were served at Lincoln  23 served Olympic High,  4 served at SAMOHI  3 were college students | 100% of youth served in the program will be captured per site, as well as number of those referred but not served. | At year-end:   * JAMS: 52 were referred; 24 not served. * LMS: 42 referred; 14 not served * Olympic/OCLC: 31 referred; 8 not served |

JAMS Breakdown of 24 that did not pan out for services:

* 14 Declined services
* 8 No follow through from parent, despite ongoing outreach by YDP clinician
* 2 referred to another clinic: CLARE, and Kaiser.

At LMS breakdown of 14 that did not pan out for services:

* 2 Parents declined services
* 2 Parents never followed up, despite ongoing attempts to reach them
* 4 dropped out of group prematurely
* 2 Did not meet Medical Necessity for services (Their symptoms did not meet criteria for a DSM mental health diagnosis)
* 1 moved out of the country during the assessment process
* 2 parents sought services elsewhere
* 1 moved to another school during the referral process

At Olympic/OCLC Breakdown of 8 referrals that did not pan out for services:

* 2 declined services
* 1 did not want parental involvement in treatment, and was connected to a different provider
* 5 dropped out of services prematurely, prior to 6 sessions due to school attendance related issues

###### VARIANCE REPORT:

###### Year-End: Please identify specific outputs or outcomes not on track for being met by year-end. Provide an explanation of the barriers the program is experiencing and the steps the staff is taking to mitigate the situation.

###### Not Applicable.

**SECTION VIII: PROPERTY MANAGEMENT**

Not Applicable.

**By submitting this report to the Housing and Human Services Division, I certify that this report is true, complete and accurate to the best of my knowledge and that all disbursements have been made in compliance with the conditions of the Grantee Agreement and for the purposes indicated.**