

Disclaimer: This Policy and Procedure is a DRAFT for feedback and is not active at this time.

XX-XX ALLOWABLE USES OF CDPH/CHVP FUNDING FOR MENTAL HEALTH CONSULTATION IN HOME VISITING

PURPOSE

To provide support to local California Department of Public Health (CDPH)/California Home Visiting Programs (CHVP) to build capacity and enhance mental health supports.

POLICY

CDPH/CHVP local health jurisdictions (LHJs) may use a portion of their State General Fund (SGF) or Maternal, Infant, Early Childhood Home Visiting (MIECHV) (*pending HRSA approval*) allocation for CDPH/CHVP mental health consultation in alignment with the parameters outlined below.

LHJs are encouraged to identify strategies for how the mental health consultant might integrate with community organizations, other local agencies, and local public health leadership to support coordination and sustainability for provision of mental health supports.

CDPH/CHVP funds cannot be used to provide direct mental health care or services to home visiting families; however, the mental health consultant may provide direct mental health services to participants through other funding sources.

PROCEDURE

- I. Parameters and Procedures
 - A. The mental health consultant is defined as anyone licensed to provide therapeutic services in California, or working toward their licensure, or working under the supervision of a licensed clinician.
 - i. Note: If the mental health consultant is not licensed or working toward their licensure, the LHJ should provide a clear explanation of the qualifications, education and ensure oversight and alignment with allowability of funding and the established scope of work (SOW)/duty statement.
 - B. CDPH/CHVP funds may not be used for the following mental health consultation activities:
 - i. Direct mental health services or treatment provided directly to families.

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(See definition for direct mental health services below), such as therapy or counseling.

- ii. Mental health services requiring diagnosis.
 - iii. A participant helpline staffed by the mental health consultant.
 - iv. A stand-alone mental health training series not accompanied by additional, ongoing support.
 - v. Coaching services to implement one specific curriculum, assessment, or model.
- C. Mental health consultant may support CDPH/CHVP funded home visiting staff by providing guidance, support, and expertise in addressing mental health related issues and challenges that may arise within the context of their work. This does not include individual therapy. Some examples of mental health consultation to home visiting staff may include:
- i. Individual and group level reflective consultation with home visiting staff. This may include the program manager/ supervisor, if desired.
 - 1. Ongoing and regular opportunities for home visitors to reflect on, and manage the secondary trauma brought on by their complex work.
 - 2. Use these reflective practices to strengthen support that home visitors provide. Reflective practices may include, but are not limited to the following:
 - reflecting on one’s experiences and engaging in a process of continuous learning.
 - debriefing events and experiences that occurred during home visiting work.
- D. Mental health consultant may partner with home visitors to ensure they have the knowledge and skills to work with families presenting mental and behavioral health challenges. Some examples of mental health consultation to build home visitors’ capacity to support families may include:
- i. Support home visiting programs to strengthen policies and procedures that support linking families to mental health services.
 - ii. Build relationships with local mental health professionals to support participant referrals/linkage.

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- iii. Establish protocols and practices for home visiting staff to use with families during challenging and/or crisis situations and safety planning with families.
 - iv. Identify and implement evidence-based approaches (i.e., supplemental activities or curricula) in home visiting programs to support the mental health and wellbeing of families, with approval from CDPH/CHVP and model developers.
 - v. Assist home visitors to identify and address service gaps and capacity needs of families with mental health concerns.
 - vi. Build home visitors capacity to conduct and respond to screenings (e.g., screenings for maternal depression, intimate partner violence and developmental delays) that identify mental health and developmental needs of children and families.
 - vii. Help home visitors support families in creating safe home environments that foster the health, development, and growth of children so they may flourish and thrive.
 - viii. Provide mental/behavioral health training to home visiting staff on topics including but not limited to:
 - 1. Perinatal mood and anxiety disorders; alcohol and other substance use disorders; best practices and support for mental health screening; trauma-responsive practices; and intimate partner violence prevention and response.
- E. Allowance of use of funds for mental health consultation are based on criteria listed on the Request Form for Mental Health Consultant with CDPH/CHVP.
- F. Interested LHJs must submit a Request Form for Mental Health Consultant with CDPH/CHVP to their program consultant (PC). Once the request is submitted, the assigned PC will have 10 business days to respond with additional questions or approval.
- G. LHJs must have their *Request Form for Mental Health Consultant* with CDPH/CHVP approved prior to including a mental health consultant to their budget. The maximum allowable FTE for a mental health consultant is 1 FTE. LHJs may determine time allotment for staff based on program needs. See the *Request Form for Mental Health Consultation* attached to the policy.

Attachment 7: Allowable Uses of CDPH/CHVP Funding for Mental Health Consultation in Home Visiting

DEFINITIONS:

- *Direct mental health services* are ambulatory care services which provides direct delivery of mental health services and interventions. The services include family support, counseling, assessments, education, and prevention. Each service is unique and enhances quality of life tailored to the needs of each individual and family encouraging collaboration from supporters and loved ones.

AUTHORITY/REFERENCES

- Model Requirements and Recommendations
- [Local MCAH Fiscal Policy and Procedure](#)
- Embedding Infant and Early Childhood Mental Health Consultation in Maternal, Infant, and Early Childhood Home Visiting Programs:
<https://mchb.hrsa.gov/sites/default/files/mchb/programs-impact/iecmhc-roadmap.pdf>
- See attached for the Request Form for Mental Health Consultant with California Department of Public Health/California Home Visiting Program (CDPH/CHVP)