

DATE: November 17, 2022

TO: Public Safety Advisory Board

FROM: Audrey Seymour Ramberg, Assistant City Manager/Chief Operating Officer
Parneet Dhindsa, Human Services Manager

SUBJECT: **Update on Mental Health Crisis Response Programs and Presentation of a Mountain View "Community Profile"**

BACKGROUND

On September 28, 2021, the City Council adopted the proposed work plan of the Public Safety Advisory Board (PSAB), which included an item "to explore existing and alternative responses to persons experiencing mental health crisis." At its February 24, 2022 meeting, the PSAB appointed a Mental Health Crisis Response Subcommittee to work on this item. At the same meeting, the PSAB received an update from staff on the status of the proposed expansion of the Santa Clara County Mobile Crisis Response Team (MCRT) into North County, a brand-new community-based mobile program called TRUST (Trusted Response Urgent Support Team), and the Mountain View Police Department's (MVPD) Behavioral Services Unit (BSU).

Over the past nine months, the PSAB Subcommittee has been working to accomplish the work plan item by:

- Reaching out to community contacts and gathering data;
- Synthesizing this information into an informal community profile of mental health crisis needs and resources in Mountain View to help inform the new programs;
- Monitoring development of the TRUST, MCRT, and BSU programs; and
- Developing recommendations for how to promote awareness of these programs within the Mountain View community.

PURPOSE

The purpose of this memorandum is to provide an update on the status of new or expanded alternative mental health crisis response programs in Mountain View since the update in February 2022. The PSAB Mental Health Crisis Response Subcommittee will also present the

“community profile,” which will be shared with the County of Santa Clara Behavioral Health Services, Momentum for Health (Momentum), and the MVPD to help inform the operations of the new North County MCRT, the North County TRUST program, and the MVPD BSU respectively. This “community profile” is focused on the needs for mental health crisis response, especially as they provide alternatives to traditional law enforcement, and not on the full spectrum of services that address mental health needs. **The profile is intended to help service providers, especially those new to the area, better understand and work effectively in the Mountain View community. The profile is a snapshot of useful information and is not intended to be a rigorous or in-depth study for use in setting policies or developing programs.**

DISCUSSION

Update on Mental Health Crisis Response Programs

Mobile Crisis Response Team (MCRT)

The MCRT provides crisis screening (by telephone), assessment and intervention (in the field), and referral to other supportive services. Behavioral health clinicians, usually accompanied by law enforcement liaisons for on-the-scene safety, serve as the primary responder to callers experiencing a mental health crisis.

In April 2022, the Santa Clara County Board of Supervisors approved a recommendation to support the expansion of a dedicated four-person MCRT in the North County/West Valley region. The team will serve adults and provide increased services for young adults aged 16 to 24. In July 2022, City staff had a preliminary conversation with the County to explore the use of a City-owned space for the North County MCRT team. As of October 2022, the County has identified and is pursuing another location in Mountain View. Staff continues to engage with the County to receive updates on the expanded MCRT. The County is currently working to recruit staff and has not yet deployed the new North County team.

Trusted Response Urgent Support Team (TRUST)

TRUST is a Community Mobile Response pilot program designed to respond to people experiencing a mental health crisis or concern without involving law enforcement. The pilot is funded through a five-year Mental Health Services Act grant and will operate in three geographic areas: San Jose, Gilroy, and North County (with a focus on Mountain View, Sunnyvale, and Santa Clara). TRUST is staffed by first-aid responders and community members who have experience in providing peer support and/or crisis intervention.

The County selected Momentum, a long-standing nonprofit behavioral health services provider in Santa Clara County, as the North County TRUST provider. Pacific Clinics was selected by the

County as the provider for the San Jose- and Gilroy-based TRUST teams. Momentum has appointed a director for the North County TRUST team who presented to the PSAB at its October 27, 2022 meeting. Staff has been hired to cover the day shifts, and Momentum is recruiting to fill the after-hours shifts to enable 24/7 operation. In the meantime, Momentum plans to operate TRUST from 7:00 a.m. to 5:00 p.m. The TRUST call center, which will be operated by Pacific Clinics, is expected to go live in late November/early December. A passenger van with the TRUST decal is being utilized until the customized van is available. Uniforms have not yet been provided. Momentum is meeting with law enforcement liaisons and attending community events and will be conducting outreach to community-based organizations and groups to learn about community needs and areas of interest and build awareness about TRUST.

Mountain View “Community Profile”

City Government Overview Related to Serving Vulnerable Residents

This section provides an overview of the City’s policies and programs that are especially relevant to the operation of mental health crisis response programs in Mountain View. Throughout this section, opportunities for collaboration between the City and the new programs providers are identified and highlighted.

City Council Community for All Strategic Priority

In June 2021, the Mountain View City Council adopted the Strategic Roadmap that sets forth a vision and seven strategic priorities that will shape the future of the City. One of the priorities is Community for All, which incorporates projects that are supportive of a range of community needs, including the exploration of alternative mental health crisis response models, and development of a Human Services Division that collaborates with a network of service providers to assist vulnerable residents through housing services, mental health services, and other basic-need services. In addition, the City Council Youth Services Committee has focused on youth wellness and mental health and has provided guidance on the development of an action plan currently being implemented by the Community Services Department.

The City has a long history of developing policies and programs and supporting nonprofit and community-based efforts to meet the needs of the most vulnerable members of the community. Recently, this has included:

- Establishing the largest Safe Parking Program in Santa Clara County;
- Partnering to fund and develop the LifeMoves Mountain View interim housing site;
- Launching the Elevate MV Guaranteed Basic Income pilot program; and

- Supporting the Cold-Weather Shelter Program in partnership with the County.

In addition, the City of Mountain View has continued to respond effectively to pandemic-related issues by maintaining and building on innovative strategies designed to assist the most vulnerable members of our community. Significant efforts over this past year include:

- Contributing \$1.8 million and working in partnership with the Mountain View Solidarity Fund and Los Altos Mountain View Community Foundation to disburse one-time flexible financial assistance to extremely low-income residents.
- Providing over \$4 million in funding for rent relief and other direct assistance to low-income residents through the Community Services Agency toward establishing one of the largest local rent-relief programs in the Bay Area.
- Securing \$16.6 million in Homekey funding from the State to redevelop the Crestview Hotel into permanent affordable housing with 67 units in partnership with the County.
- Providing extensive, hands-on, ongoing outreach to vulnerable populations to connect them with pandemic relief resources.
- Providing hygiene and other essential services for unhoused and unstably housed residents.
- Conducting ongoing housing help center/eviction prevention clinics facilitating access to rent relief and legal services.
- Developing a Mobile Home Rent Stabilization Ordinance and updating the Tenant Relocation Assistance Ordinance to provide protections to mobile home tenants.
- Securing Federal funding through the American Rescue Plan Act (ARPA) and Federal Emergency Management Agency for COVID-19-related community needs and expenses.

Although city governments do not receive significant, ongoing State and Federal funding streams for housing and human services, as noted above, the City has leveraged funding from other sources and has worked with a range of government, nonprofit, and community-based organizations to maximize the opportunity to meet our residents' needs. The City has also been effective in the role of convenor, helping support active collaboration among community service providers through monthly check-in meetings, regular updates through emails, and by acting as a coordinator, partner, and solution-finder.

Communication and Outreach

The City also helps to meet the needs of its diverse residents through active communication and outreach. This includes the Multicultural Engagement Program, which provides translation and interpretation services in Spanish, Mandarin, and Russian for City documents and meetings, conducts civic leadership academies in Spanish and Chinese, and shares information with and seeks input from the community through participation in Citywide events and outreach to a large and growing network of ambassadors. In addition, the City has a variety of wide-reaching communication channels, including:

- *City Hall Connection*, an every-other-week e-newsletter;
- A twice-yearly print publication, *The View*;
- Regular community updates through social media;
- A comprehensive City website including webpages with information and referral resources regarding a range of local programs and agencies serving Mountain View residents;
- A series of annual neighborhood-based meetings convened by the Council Neighborhood Committee; and
- Regular meetings of the 11 Council-appointed advisory boards.

In addition to sharing City news and discussing City issues, these channels of communication can be used to help keep residents informed about the County and nonprofit organizations the City works with to address important community needs, such as mental health crisis response. As such, the City can be a valuable partner in helping to get the word out about TRUST, MCRT, and the 9-8-8 crisis line.

Library and Community Services

The City operates many programs and facilities to address community needs for recreation, learning, and connection. These programs and facilities are open to the public, including both Mountain View residents and visitors, and many are free of charge.

The City's Library is located at 585 Franklin Street, adjacent to Pioneer Park, and is part of the City Hall/Center for Performing Arts campus in Mountain View's downtown. The Library offers free materials, services, programs, and facilities for the community to connect, create, and learn. In addition, the Library provides a welcoming, well-maintained, and safe facility for patrons to enjoy with comfortable seating, study tables, computers with internet connection, WiFi, and

study rooms. The average number of daily visitors is just under 1,000, which includes individuals who are unsheltered. More information about the Mountain View Library is available on the City website at www.mountainview.gov/depts/library/default.asp.

The Community Services Department is responsible for the delivery of a wide range of recreation programs and services that make Mountain View a better place to live. The Community Services Department operates the Community Center at 201 South Rengstorff Avenue, the Senior Center at 266 Escuela Avenue, and The View Teen Center at 263 Escuela Avenue, along with other City facilities. The City maintains 43 urban parks with Shoreline Regional Community Park, Cuesta Park, and Rengstorff Park being the largest at 753, 32.5, and 16.9 acres, respectively. More information about Mountain View Community Services is available on the City's website at www.mountainview.gov/depts/cs/default.asp.

As noted, Library and Community Services facilities serve the general public, including a wide range of people with different backgrounds, interests, needs, and abilities. Over the past several years, City staff has observed an increase in public behavior in City buildings and parks that seems to indicate behavioral health needs, including potential mental health challenges or alcohol/substance use. Staff at these facilities are not trained mental health professionals and, therefore, are not in a position to diagnose or directly address these needs. At times, however, they find that some action is needed due to behaviors that are jeopardizing safety or causing significant disruption.

The Library, Community Center, and Senior Center could serve as useful locations for the TRUST program van to visit to be visible and accessible to Mountain View residents who may be in need. In addition, City staff at these programs would benefit from receiving information and training that would enable them to help raise awareness about TRUST and other behavioral health resources and provide them with alternatives to calling 9-1-1.

Mountain View Police Department

The MVPD is located at 1000 Villa Street. The mission of the MVPD is to keep Mountain View safe and tackle crime through quality policing that secures the trust and support of the people it serves and protects. The MVPD fulfills its mission through comprehensive programs that make safety a priority, focus on effectively working with people, and obtain fair and impartial results through education, prevention, intervention, suppression, and enforcement efforts. The MVPD provides a visible presence, effective and timely response to calls for service, innovative community engagement activities, and comprehensive services for investigations, community-focused policing initiatives, and emergency preparedness. The MVPD is also responsible for Police and Fire support services, emergency communications, and ensuring professional standards and accountability.

The MVPD has developed a BSU pilot, which launched in April 2021, to reduce the frequency of Police contact with people experiencing a mental health crisis by refocusing the efforts of an existing crisis team. The members of this team receive a minimum of 80 hours of specialized crisis training and are available across all shifts. A full-time Community Services Officer, who is an Associate Licensed Professional Clinical Counselor/Marriage and Family Therapist, is assigned to respond with the team as appropriate and to review incidents and reports to identify opportunities to follow up and provide additional assistance. The BSU makes further contact, as much as possible, with individuals who reside in Mountain View, including unsheltered individuals with known locations, to continue to offer resources and confirm the person is connected to services, if desired.

In addition, MVPD has a dedicated Community Outreach Officer in the Neighborhood and Event Services Unit who works with vulnerable residents in Mountain View using an approach based on relationship-building and compassion to identify and address individual and community needs. Many of the individuals that the Community Outreach Officer works with are unsheltered or unstably housed and/or are experiencing crisis or mental health challenges.

Officers and staff involved with the BSU and community outreach programs have developed relationships with residents in need and are available to help the new TRUST and MCRT programs establish connections with the community and to be of assistance when law enforcement involvement is needed.

Community Overview

This section provides general information to help new program providers better understand the Mountain View community.

The City of Mountain View covers 12 square miles and is home to over 80,000 residents. During the day, the population grows to more than 128,000 due to Mountain View's active downtown, major employers and innovators, such as Google, LinkedIn, Intuit, and the NASA Ames Research Center, regional entertainment attractions, including Shoreline Amphitheatre and the Mountain View Center for Performing Arts, the regional Shoreline at Mountain View park, a regional trail system, and proximity to a major Caltrain/BART transit center. A map of the City is included in Attachment 1 and notes points of interest, such as the locations of community centers, service providers, schools, and transit centers.

More than half of Mountain View’s population is between the ages of 20 and 54, and nearly 25% is in the 25- to 34-year-old age bracket.

Table 1: Breakdown of Mountain View Population by Age

<5	6.5%
5-19	15.4%
20-24	5.2%
25-34	22.6%
35-44	16.8%
45-54	12.1%
55-64	10.2%
65+	11.2%

Source: U.S. Census Bureau, 2016-2020 American Community Survey (ACS) 5-Year Estimates.

Mountain View is a diverse community with residents and visitors from around the world. Roughly 35% of residents are Asian and around 17% are Hispanic or Latino. A little more than 5% of residents are two or more races. Mountain View celebrates its diversity and has a long history of welcoming newcomers without regard to documentation status. Nonetheless, some residents without documentation are reluctant to access mental health and other resources due to concerns about repercussions related to their immigration status.

Table 2: Breakdown of Mountain View Population by Race/Ethnicity

White	40.1%
Asian	34.9%
Hispanic or Latino	17.2%
Black or African American	1.4%
American Indian and Alaska Native	0.1%
Native Hawaiian and Other Pacific Islander	0.3%
Two or More Races	5.3%
Other Race	0.7%

Source: U.S. Census Bureau, 2020 Census State Redistricting Data.

Nearly three-fourths of residents ages 25 and older hold a bachelor’s degree or higher. The median household income in Mountain View is \$144,000. During the 2015-2019 American Community Survey period, approximately 47% of households in Mountain View had incomes of \$150,000 or more, while nearly 20% of households had incomes less than \$50,000. Although there is overall prosperity, income gaps have continued to widen, and the community has been significantly impacted by the COVID-19 pandemic. Preliminary data, as of March 2022, indicate

Mountain View has an unemployment rate of 1.7%, which is lower than the rates for both the County and State.

Table 3: Breakdown of Mountain View Household Income Distribution

Less than \$14,999	1,808	5.4%
\$15,000 to \$24,999	1,418	4.2%
\$25,000 to \$34,999	1,360	4.0%
\$35,000 to \$49,999	1,916	5.7%
\$50,000 to \$74,999	2,926	8.7%
\$75,000 to \$99,999	2,711	8.0%
\$100,000 to \$149,000	5,840	17.3%
\$150,000 and above	15,777	46.7%

Source: U.S. Census Bureau, American Community Survey, 2015-2019 five-year sample period.

The City has well-built residential communities, neighborhood parks and playgrounds, and a variety of housing that seeks to fulfill the diverse needs of the community, including subsidized affordable housing, Below-Market-Rate ownership and rental units, and an ongoing commitment to the investment of affordable housing in the community. Even with these significant efforts, the lack of affordable housing continues to be a critical issue in the region and beyond.

Estimated data for 2022 indicates that just over half of the housing units in Mountain View are in multi-family structures, with 48.4% of the units in medium or large properties (five or more units) and 8.2% of units in small buildings (two to four units).

Table 4: Breakdown of Mountain View Housing Units

Single-Family Detached	27.9%
Single-Family Attached	12.7%
Small Multi-Family (2 to 4 units)	8.2%
Medium or Large Multi-Family (5+ units)	42.4%

Source: California Department of Finance, 2020-2022 Population and Housing Estimates.

Mountain View is served by high-quality public elementary and secondary schools in the Mountain Whisman School District (MVWSD), Los Altos School District, and Mountain View Los Altos Union High School District (MVLA). In addition, several private schools serve the Mountain View community. Public school locations are shown on the map in Attachment 1. The districts offer various programs to promote student emotional wellness. More information about resources for the MVLA school community is available on the district’s website at www.mvla.net/Departments/Educational-Services/Student-Wellness/index.html. Resources

provided by MVWSD are outlined on their website at www.mvwsd.org/parents/virtual_wellness_center.

There are several nonprofit organizations and community-based groups located in and/or serving the Mountain View community, many of whom provided input for the community profile. These organizations and groups work with dedication and skill to identify and meet the needs of Mountain View’s vulnerable residents. Attachment 3 provides a resource list of programs that may be able to help share information with their clients about the new and expanded crisis response services in North County, make referrals to, and receive referrals from TRUST.

Mental Health Crisis Needs and Resources

This section presents information gathered by the PSAB subcommittee and staff regarding mental health crisis needs and resources in Mountain View.

The goal of the PSAB’s mental health crisis response work plan item is to support the success of the North County MCRT and TRUST programs by helping to build community awareness of these programs and providing the program providers with information about the mental health crisis response needs and resources in Mountain View. To identify needs and resources, the PSAB Mental Health Crisis Subcommittee and City staff gathered data and conducted outreach to the following local contacts: Community Services Agency, Community Health Awareness Council, Project Safety Net, County Behavioral Health Services Department, El Camino Hospital, Mountain View Los Altos High School District, MVPD Behavioral Services Unit and Neighborhood and Event Services Unit, Mountain View Public Library, Mountain View Community Services Department, and Mountain View Multicultural Engagement Program (Attachment 2).

The data gathered and themes from the outreach are presented below.

MVPD Behavioral Health Calls

As mentioned above, MVPD has a dedicated Community Services Officer working in the BSU, who reviews incidents and reports to identify opportunities for crisis follow-up and connection to services. To support this work and gather general data on mental health response, trends, and issues, starting in 2019, MVPD began adding a notation to Police calls for service when there is an indication of a mental health concern.

Between 2019 and 2021, there were a total of 1,056 calls in which there was a perception of an involved mental health issue, which is an average of 352 calls per year. Due to shifts in how the data was recorded in the early stages of this relatively new practice of annotating calls, it is important to take any potential meaning regarding call trends with caution.

Table 5: MVPD Calls for Service—Mental Health Concern

Year	Calls Related to Possible Mental Health Concern
2019	254
2020	319
2021	483

Source: MVPD CIT Calls Data, 2018-2021.

MVPD Drug Overdose Calls

Over the four-year period between 2018 to 2021, there were a total of 221 calls in which there was an indicated alcohol and/or drug overdose, an average of 55 calls per year. Between January and April 2022, there were a total of 21 calls related to alcohol and/or drug overdose.

Table 6: MVPD Calls for Service—Drug/Alcohol Overdose

Year	Calls Related to Drug/Alcohol Overdose
2018	41
2019	56
2020	58
2021	66

Source: MVPD Overdose Calls Data, 2018-2021.

Drug Overdose Deaths

In July 2022, staff met with the County Behavioral Health Services Department, Prevention Services Division, to understand the issues in Mountain View related to substance use and suicide. From 2018 to July 2022, there have been a total of 40 deaths related to drug overdose in Mountain View. Between January and July 2022, there were a total of eight deaths related to drug overdose.

MVPD staff have shared that, overall, there has been a dramatic increase in narcotics use, specifically methamphetamines and opioids. With fentanyl becoming pervasive, it is common to find it mixed in with other drugs, which can relate to the overall increase in fentanyl poisoning. As fentanyl becomes more available and more popular among younger generations, it is also common for casual or first-time users who have not built a tolerance to overdose.

Table 7: Drug Overdose Deaths

Year	Drug Overdose Deaths
2018	10
2019	7
2020	9
2021	6

Source: County of Santa Clara Office of the Medical Examiner-Coroner Data Dashboard 2018-2021.

Suicide-Related Deaths

From 2015 to 2019 (the latest date for which County data is available), there were a total of 23 suicide-related deaths in Mountain View, averaging 4.6 per year. Across the four-year period, the primary method of suicide was by firearm, and the highest number of deaths occurred in the 35- to 44-year-old age bracket.

Themes from Conversations with Local Contacts

As previously mentioned, the PSAB Subcommittee talked with a number of people who either work to meet crisis needs of individuals or serve the general public and have observations that relate to perceived behavioral health needs.

Across the board, all contacts shared a unanimous theme that people are presenting with increased levels of anxiety and depression, as exhibited through a greater number of referrals and more acute needs. This is also a theme regionally and nationally. While the pandemic exacerbated the needs, local contacts indicated that this trend was present before the pandemic. More detail regarding this and other themes is summarized below. Given the complexity and interrelationship between different concerns and circumstances, there is some overlap between the categories of themes.

- **COVID-19 pandemic effects.**
 - Increased levels of emotional distress and feelings of anxiety related to job-related stress and living situations possibly being negatively impacted.
 - More acute diagnoses, perhaps related to a delay in receiving care.
 - Need for rebuilding social skills and creating a sense of community and belonging.

- **Anxiety and depression among all age groups.**
 - Consistently living with an activated fight or flight response.
 - Increasing among children transitioning into middle school and high school.
- **Concerns among high schoolers.**
 - Substance use.
 - Other crisis, including housing instability and threat of violence.
 - Need for safety plans for suicidal ideation.
- **Parents.**
 - Feelings of stress from the responsibilities of parenting.
 - Work-related or unemployment-related stress.
 - Possible impacts of parent distress on children/youth feeling of isolation.
 - Emotional tiredness.
- **Observations of behavior related to mental health concerns among unsheltered residents.**
 - Expressions of fears or beliefs perceived as paranoia.
 - Verbal and physical aggressions and irate behavior (including racial undertones).
 - Suspicions of possible substance use based on behavior or surrounding paraphernalia.
 - Fear and pressure related to the uncertainty faced by residents living in vehicles.
- **Lack of special-needs resources.**
 - Increase in children exhibiting characteristics of special needs without formal diagnosis.
 - Parents not feeling they have access to sufficient resources.

- Delayed identification or uncertainty of special needs for children who missed early childhood learning in preschool/kindergarten.
- Significant challenge among bilingual Spanish-speaking children and their monolingual Spanish-speaking parents.
- **Newcomers.**
 - Social anxiety.
 - Depression due to loss of connections with their country of origin.
- **Persons in crisis who do not meet level of involuntary hold/do not want assistance.**
 - Stress of waiting for person in crisis to either meet involuntary hold criteria or make decision to seek assistance.
- **People are willing to obtain help.**
 - Not as afraid to obtain the mental help health they may need.
 - More open and willing.
 - Understand help may be needed and would like to receive care.
- **Barriers to accessing services.**
 - Finances.
 - Inability to pay for services.
 - Inability to obtain services due to financial impact from missing work to receive care.
 - Increased costs for therapy.
 - Lack of insurance.
 - Time to find and participate in services.

- Distant location of services.
- Increased wait times for appointments.
- Cultural competency and language proficiency among therapists and other licensed providers.
- Lack of pediatric psychologists.
- General lack of awareness of available resources.
- Being unstably housed.
- Need for child care for parents seeking care or experiencing crisis.
- While stigma has decreased in the recent past, it continues to be a prominent barrier.

Recommendations to County and TRUST to Raise Awareness

Among the organizations and staff subcommittee members reached out to, there was a high level of interest in active engagement to raise awareness about new or expanded alternative mental health crisis response programs. **Effective outreach is key to building trust in the new and expanded crisis response programs in North County that have been developed to provide an alternative to calling 9-1-1 and engaging law enforcement. Such outreach will increase access to and use of the TRUST and MCRT programs, thus demonstrating the need to sustain these programs, especially TRUST, which is a pilot funded with a time-limited grant allocation.**

Outreach recommendations include the following:

- **Conduct robust outreach and engage in continued collaboration** with Mountain View partners, such as City departments, high schools and continuation schools, mental health providers, Emergency Assistance Network (EAN) providers, and health-care organizations to facilitate access to TRUST and other programs. Specific ideas include participation in resource fairs and the creation of a widely available set schedule for the TRUST van to be in key locations.
- **Develop and disseminate resource and referral information designed to reach the general public making use of trusted partners and established communication channels.** This could include ongoing communication and collaboration with City departments and relevant City advisory boards, such as the Youth Advisory Committee, schools, nonprofit organizations, and others to enable them to share information and the development of

user-friendly handouts and content for postings on mental health resource webpages, community bulletin boards, the City's social media channels, etc. Information should also include how the 9-8-8 crisis line works and how callers can request to be transferred to the call center being established for the TRUST program.

- **Provide deescalation/mental health first aid trainings** for front-line staff in programs serving vulnerable populations and key agencies working with the general public to support the ability to provide a basic level of assistance to people observed to be experiencing a perceived mental health challenge and coordinate effectively with response providers.
- **Provide ongoing input to County Behavioral Health Services and Momentum for Health** regarding Mountain View needs for crisis response services and feedback about the North County TRUST and MCRT programs. This includes the City's continued convening of a network of community-based organizations, City staff participation on the current Countywide TRUST Community Advisory Board (CAB), and the creation of a North County CAB as soon as possible.
- **Use diverse communication methods, which include language and cultural competence.** This includes the social networking channels used by the Spanish- and Mandarin-speaking communities (such as WhatsApp and WeChat) and connecting with informal, in-person networks to meet people where they are.
- **Link with Pacific Clinics** to identify any opportunities to coordinate with high schools on case management following 5150 placements.

Next Steps for PSAB Work Plan Item on Mental Health Crisis Response

In order to support the success of new or expanded alternative mental health crisis response models, staff recommends the following next steps:

- Finalize and format the community profile and outreach recommendations as a stand-alone document and share it with Santa Clara County Behavioral Health and Momentum for Health as the North County TRUST provider.
- Implement outreach recommendations noted above that involve City departments.
- Continue to monitor program development and participate in TRUST Community Advisory Board (CAB).
- Gather and provide ongoing community feedback about TRUST to the CAB.

RECOMMENDATION

Staff recommends that the PSAB receive the update on mental health crisis response programs and provide input regarding the Mountain View community profile and outreach recommendations to the North County MCRT and TRUST providers.

ASR-PD/MS/6/MGR

625-11-17-22M

- Attachments:
1. City of Mountain View Map
 2. List of Community Contacts
 3. Appendix of Mental Health and Other Community Resources