COUNTY OF SAN DIEGO

AGENDA ITEM

BOARD OF SUPERVISORS

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Second District

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Third District

MONICA MONTGOMERY STEPPE
Fourth District

JIM DESMOND
Fifth District

DATE: **November 18, 2025** **DRAFT** **XX**

TO: Board of Supervisors

SUBJECT
AUTHORIZE COMPETITIVE PROCUREMENTS AND AMENDMENTS TO EXTEND EXISTING CONTRACTS (DISTRICTS: ALL)

OVERVIEW
The County of San Diego (County), Behavioral Health Services, provides a comprehensive array of mental health and substance use services to people of all ages. These services are delivered through County-operated programs and contracts with community service providers and coordinated services are supported through review of electronic health record data and data archives. These services support some of the region's most vulnerable populations, including individuals who are experiencing homelessness, individuals with justice involvement, and children and youth with complex behavioral health conditions.

If approved, today's actions would authorize competitively negotiated procurements qualification based selections, and amendments to extend existing contracts. Today's actions would support the continuation of critical work to advance the behavioral health continuum of care throughout San Diego County. In doing so, these actions would advance the County vision of a just, sustainable, and resilient future for all, specifically those communities and populations in San Diego County that have been historically left behind, as well as our ongoing commitment to the regional *Live Well San Diego* vision of healthy, safe, and thriving communities. This will be accomplished by upholding practices that align with community priorities and improving transparency and trust while maintaining strong fiscal management.

RECOMMENDATION(S)
CHIEF ADMINISTRATIVE OFFICER

1. In accordance with Board of Supervisors Policy A-87, Competitive Procurement, authorize the Director, Department of Purchasing and Contracting, to issue Competitive Negotiated Procurements for each of the behavioral health services listed below, and upon successful negotiations and determination of a fair and reasonable price, award contracts for an Initial Term of up to one year, with four 1-year Options, and up to an additional six months, if needed; and to amend the contracts to reflect changes in program, funding or service requirements, subject to the availability of funds and the approval of the Director, Behavioral Health Services Department. Authorization shall include ability to utilize Qualification Based Selections alternatively if deemed a more effective procurement

method for behavioral health services listed below subject to the approval of the Director, Behavioral Health Services Department.

a. Full-Service Partnership Assertive Community Treatment Services
b. Full-Service Partnership Intensive Case Management Services
c. In-Home Outreach Team
d. Community Input and Planning Services
e. Public Messaging, Community Engagement, and Education Services

2. In accordance with Board of Supervisors Policy A-87, Competitive Procurement, authorize the Director, Department of Purchasing and Contracting, to issue Qualification Based Selections for each of the behavioral health services listed below, and upon successful negotiations and determination of fair and reasonable price, award one or more contracts for an Initial Term of up to one year, with four 1-year Options, and up to an additional six months, if needed; and to amend the contracts, as needed, to reflect changes in program, funding or service requirements, subject to the availability of funds and approval of the Director, Behavioral Health Services Department. Authorization shall include ability to utilize Competitive Negotiated Procurements alternatively if deemed a more effective procurement method for behavioral health services listed below subject to the approval of the Director, Behavioral Health Services Department.

a. Developmental Evaluation Clinic
b. Forensic Assertive Community Treatment Program
c. Clubhouse Services

3. In accordance with Board Policy A-87, Competitive Procurement, and Administrative Code Section 401, authorize the Director, Department of Purchasing and Contracting to amend and extend the following contracts subject to the availability of funds; and to amend the contracts as required to reflect changes to services and funding allocations, subject to the approval of the Director, Behavioral Health Services Department.

a. North Coastal Crisis Stabilization Services (Exodus Recovery, Inc., 565131) – Extend contract through June 30, 2027, and up to an additional six months, if needed.
b. In-Reach Services – Extend contracts through June 30, 2027, and up to an additional six months, if needed.
    i. Project In-Reach (Neighborhood House Association, 548930)
    ii. Faith Based Wellness and Mental Health In-Reach Ministry (Neighborhood House Association, 560754)
c. CalWORKs Connection (Vista Hill Foundation, 566042) – Extend contract through June 30, 2027, and up to an additional six months, if needed.
d. Short-Term Residential Therapeutic Program and Residential Outpatient Children's Mental Health Services – Extend contracts through June 30, 2029, and up to an additional six months, if needed.
    - Varsity Team, Inc., 564845
    - Fred Finch Youth Center, 566359
    - Casa de Amparo, Inc., 566365

- New Alternatives, Inc., 566363

e. OnBase (Hyland Software, Inc., 549813) – Extend contract through June 30, 2031, and up to an additional six months, if needed.

EQUITY IMPACT STATEMENT

The County of San Diego (County) Behavioral Health Services (BHS) serves as the specialty mental health plan for Medi-Cal eligible residents within San Diego County who are experiencing serious mental illness (SMI) or serious emotional disturbance. BHS is also the service delivery system for Medi-Cal eligible residents with substance use care needs. In 2024, nearly one in three residents were eligible for Medi-Cal, with Hispanic and Latino residents having the highest percentage of Medi-Cal eligibility at 44%.

For these Medi-Cal eligible residents who experience SMI or have a substance use care need, BHS offers County-operated and BHS-contracted programs that address the social determinants of health by being accessible, capable of meeting the needs of diverse populations, and culturally responsive, with the intent to equitably distribute services to those most in need. In doing so, BHS strives to reduce behavioral health inequities, identifying needs and designing services in a manner most impactful and equitable, which will yield meaningful outcomes for those served. A comprehensive array of behavioral health services is vital for BHS to continue providing access to treatment and care for populations who are underserved by social and behavioral health resources.

SUSTAINABILITY IMPACT STATEMENT

Today's actions support the County of San Diego (County) Sustainability Goal #2 to provide just and equitable access to County services and Sustainability Goal #4 to protect the health and well-being of everyone in the region. These goals will be accomplished by providing a wider availability and range of supportive, inclusive, and stigma-free options to those in need of behavioral health services. Access to a comprehensive continuum of behavioral health services will improve the overall health of communities.

FISCAL IMPACT

Funds for these requests are included in the Fiscal Year (FY) 2025-27 Operational Plan in the Health and Human Services Agency. If approved, today's recommendations will result in no cost and revenue in FY 2025-26 and approximate costs and revenue of $76.5. million in FY 2026-27. These costs will be incorporated into future Operational Plans. There will be no change in net General Fund costs and no additional staff years.

Recommendation #1: Authorize Competitive Negotiated Procurements

If approved, this request will result in no cost and revenue in FY 2025-26 and estimated costs and revenue of $ 34.5 million in FY 2026-27. The funding sources are Behavioral Health Services Act (BHSA) and Short-Doyle Medi-Cal. There will be no change in net General Fund costs and no additional staff years.

Recommendation #2: Authorize Qualification Based Selections

If approved, this request will result in no cost and revenue in FY 2025-26 and estimated costs and revenue of $25.9 million in FY 2026-27. The funding sources are BHSA, Realignment, and Short-Doyle Medi-Cal. There will be no change in net General Fund costs and no additional staff years.

Recommendation #3: Authorize Amendments to Extend Existing Contracts
If approved, this request will result in no cost and revenue in FY 2025-26 and estimated costs and revenue of $16.1 million in FY 2026-27. The funding sources are BHSA, Realignment, California Work Opportunity and Responsibility to Kids, and People Assisting The Homeless. There will be no change in net General Fund costs and no additional staff years.

BUSINESS IMPACT STATEMENT
N/A

ADVISORY BOARD STATEMENT
At their meeting on November 6, 2025, the Behavioral Health Advisory Board voted to _____ these recommendations.

BACKGROUND
The County of San Diego (County) Behavioral Health Services (BHS) provides a comprehensive array of behavioral health services to vulnerable populations, including individuals who are experiencing homelessness, individuals with justice involvement, and children and youth with complex behavioral health conditions. Services are provided through County-operated programs and contracts with local public and private agencies.

Recommendation #1: Authorize Competitive Negotiated Procurements

a. *Full-Service Partnership Assertive Community Treatment Services*

On November 16, 2021 (5), the San Diego County Board of Supervisors (Board) authorized the procurement of Full-Service Partnership (FSP) Assertive Community Treatment (ACT) program for the Central region. Subsequently, on June 28, 2022 (5), the Board authorized the procurement of two FSP ACT programs for the North Coastal and the North Central regions. FSP ACT programs provide intensive multidisciplinary treatment services for clients who are 18 years and older, experiencing homelessness, with serious mental illness (SMI) whose needs cannot be adequately met through a lower level of care, and are deemed in the highest need based on severity of impairment.

This program operates with a "Whatever it Takes" approach, a community-based, whole-person approach that supports an individual's physical, mental, and social well-being. Services are trauma-informed, recovery-focused, and age-appropriate. Services are delivered in partnership with families or an individual's natural support system. Services include psychiatry, medication management, case management, rehabilitation and support, peer support, co-occurring treatment, supportive employment, housing support services and intensive case management. FSP ACT services reduce costs by decreasing emergency utilization by 40% when comparing client contacts six months before and after consistent engagement to FSP ACT services. In addition, the wraparound services contribute to

client's community stabilization through increased functional improvement and secured transitional and/or permanent housing.

In FY 2023-24, a total of 441 unduplicated clients were served across the three regional programs. Of the 441 clients served, 68% showed functional improvement, crisis utilization decreased by an average of 40%, and as of June 10, 2025, 77% were housed in transitional or permanent housing.

Today's action requests the Board authorize a competitive negotiated procurement of the FSP ACT program, resulting in the award of up to three contracts for the Central, North Central, and North Coastal regions, for an Initial Term of up to one year, with four 1-year Options, and up to an additional six months, if needed.

b. Full-Service Partnership Intensive Case Management Services

On November 16, 2021 (5), the Board authorized the procurement of integrated Biopsychosocial Rehabilitation (BPSR) with an Integrated Strength-Based Case Management (SBCM) component, servicing adults ages 18 years and older with SMI, including those who may have a co-occurring substance use condition, located in the South region. Additionally, a County-operated program is currently delivering SBCM services in the Central, North Central, and East regions. SBCM will be transitioning to Intensive Case Management (ICM) in alignment with Behavioral Health Services Act.

The BPSR with integrated SBCM component as well as the standalone SBCM include recovery-oriented strength-based clinical case management services to individuals with SMI. Services include behavioral assessment, individual and group counseling, case management and brokerage, rehabilitation, crisis intervention, psychiatry and mental health services with a rehabilitation and recovery focus, and various recovery-oriented interventions including referrals to substance use programs and housing placement services.

According to the Behavioral Health Equity Index (BHEI), the South region has a high inequity score of 5 out of 6, while the county has an average inequity score of 4 out of 6, indicating a moderate inequity risk. The BHEI score indicates limited access to resources and services that promote behavioral health. SBCM services have demonstrated effectiveness in supporting client success. Outcomes include functional improvement and stabilization, enhanced residential stability, progress in addressing substance use needs, and advancement toward employment and educational goals.

In FY 2023-24, the South region BPSR with an integrated SBCM component served a total of 279 unduplicated SBCM clients. Of the 279 clients served, 75% showed same or improved functional status, 84% showed same or improved clinical status, 42% decrease in crisis utilization and a 92% reduction in incarceration.

In FY 2023-24, County-operated SBCM services served a total of 423 unduplicated clients. Of the 423 clients served, 83% showed same or improved functional status, 83% showed same or improved clinical status, 42% decrease in crisis utilization and a 75% reduction in incarceration.

Today's action requests the Board authorize a competitive negotiated procurement of Full-Service Partnership Services (currently SBCM), resulting in the award of up to two contracts, one for the South region and another for Central, North Central, and East regions for an Initial Term of up to one year, with four 1-year Options, and up to an additional six months, if needed.

c. *In-Home Outreach Team*

On January 26, 2021 (11), the Board authorized the procurement of the In-Home Outreach Team (IHOT) program. IHOT provides countywide in-home outreach and engagement services to individuals with SMI who are not engaged in outpatient mental health services. IHOT provides in-home assessment, crisis intervention, short-term case management, peer, family and caretaker support services, psychoeducation and linkage to many community services.

In FY 2023-24, the program received 844 referrals, resulting in 704 admissions. Data shows that when clients engage with the IHOT program, crisis utilization decreases. In FY 2023-24, clients who had at least one crisis service encounter 90 days prior to enrolling in the program were compared to clients who received a crisis service 90 days after discharge. Results indicated a 55% reduction in crisis stabilization utilization, 88% reduction in Psychiatric Emergency Response Team interventions, 53% reduction in urgent outpatient utilization, and 66% reduction in inpatient hospitalizations.

Today's action requests the Board authorize a competitive negotiated procurement of the IHOT program for an Initial Term of up to one year, with four 1-year Options, and up to an additional six months, if needed.

d. *Community Input and Planning Services*

On November 7, 2023 (31), the Board authorized the procurement of the Breaking Down Barriers program. Subsequently, on October 22, 2024 (27), the Board authorized a contract extension term of this program up to June 30, 2026, and up to an additional six months, if needed, ensuring continued outreach and engagement capacity during the statewide transition from the Mental Health Services Act (MHSA) to the Behavioral Health Services Act (BHSA).

The Community Input and Planning Services program, previously the Breaking Down Barriers program, will partner with trusted community-based organizations to support community health education efforts and to facilitate recurring input opportunities with BHSA stakeholder groups. BHSA introduces a nearly three-fold increase in required community engagement compared to MHSA, expanding both the number and diversity of stakeholder groups counties must connect with. The program will engage individuals with

lived experience, families, providers, community partners, and other BHSA stakeholder groups to promote local behavioral health resources and gather insights and recommendations to inform County behavioral health planning and resource allocation. Services are countywide and include community outreach and education, facilitation, documentation, and reporting activities that support the County's BHSA Community Planning Process. Contractors will organize and lead community sessions with assigned BHSA stakeholder groups, collect and summarize input, and provide reports that inform County behavioral health planning and decision-making. Research and program data demonstrate individuals from diverse and underserved communities face persistent barriers to accessing behavioral health services, including stigma, cultural differences, and limited awareness of available resources. Engaging trusted messengers from community-based organizations that represent these populations provides a more effective and cost-efficient approach to outreach and education, as these organizations have established relationships, linguistic fluency, and credibility. Through these partnerships, the program reduces access barriers, improves behavioral health literacy, and ensures that community perspectives inform County planning under the BHSA.

In FY 2024-25, the Breaking Down Barriers Program provided prevention/early intervention services to 11,146 participants. Furthermore, 187 community presentations and 62 group sessions were provided. Of the 11,146 individuals who participated in the program, 6,533 (59%) completed a post-program survey. Of those who completed the post-program survey, 6,468 (99%) demonstrated an increased awareness of mental health resources, knowledge of factors leading to mental health stigma, and strategies to reduce and prevent the stigma of mental illness.

Today's action requests the Board authorize a competitive negotiated procurement for the Community Input and Planning Services program, resulting in the award of up to six contracts, for an Initial Term of up to one year, with four 1-year Options, and up to an additional six months, if needed.

e. *Public Messaging, Community Engagement, and Education Services*

On November 13, 2018 (12), the Board authorized the procurement of Suicide Prevention, Stigma Reduction and Substance Use Prevention Multi-Media Campaign services. On October 22, 2024 (27), the Board authorized a contract extension term of this program up to June 30, 2026, and up to an additional six months, if needed, ensuring continued public messaging and education capacity during the statewide transition from MHSA to BHSA.

The Public Messaging, Community Engagement, and Education Services program transitions and broadens this originally prevention-focused effort to a platform for communication, behavioral health literacy, and engagement to support community planning activities under BHSA. The program will provide countywide media announcements, public engagement, and targeted outreach activities that support stakeholder involvement and increase awareness of local behavioral health resources. Services include management of department engagement websites and communication channels, development of educational and outreach materials, coordination of countywide

media and community engagement activities that promote behavioral health literacy, connecting residents to local resources, and supporting participation in BHSA Community Planning Process efforts.

Research consistently shows that stigma and limited behavioral health literacy remain significant barriers to seeking help and accessing care. In 2024, Strata Research conducted a community survey to measure the effectiveness of the multi-media campaign. Out of 601 online survey respondents, 91% of those exposed to the campaign agreed it effectively highlighted the importance of seeking help and support. In FY 2024–25, the multi-media campaign generated more than 33.2 million media impressions and 7.8 million engagements across digital and social platforms for youth audiences. In FY 2023-24, 90% of surveyed residents reporting increased awareness of behavioral health resources and 89% expressing greater comfort discussing mental health.

These outcomes demonstrate continued progress in improving behavioral health literacy and build a foundation for broader community engagement and participation under the BHSA. The Public Messaging, Community Engagement, and Education Services program will continue to address these barriers, supporting public participation in County behavioral health planning, promoting understanding, and reducing stigma.

Today's action requests the Board authorize a competitive negotiated procurement of the Public Messaging, Community Engagement, and Education Services program for an Initial Term of up to one year, with four 1-year Options, and up to an additional six months if needed.

Recommendation #2: Authorize Qualification Based Selections

a. Developmental Evaluation Clinic

On January 26, 2021 (11), the Board authorized the procurement of Developmental Evaluation Clinic (DEC) services. DEC provides developmental, psychological and neuropsychological evaluations and referrals for infants and preschoolers. These are structured, formal, specialized psychological evaluations for Medi-Cal eligible children aged 0 to their sixth birthday.

According to the American Academy of Pediatrics, early evaluation offers several key benefits, including the early detection of developmental delays, customized interventions, prevention of future challenges, guidance for parents, better understanding of behavior, support for learning and adaptive needs, resilience-building, and the ability to monitor developmental progress. Services are provided countywide.

In FY 2024-25, the program served 900 unduplicated clients, providing families with a treatment roadmap based on comprehensive evaluations, along with individualized care coordination to connect clients to appropriate ongoing services. As a result of these evaluations, the program facilitated 3,524 referrals to mental health services, developmental services, and other support services.

Today's action requests the Board issue a Qualification Based Selection for DEC services for an Initial Term of up to one year, with four 1-year Options, and up to an additional six months, if needed.

b. Forensic Assertive Community Treatment Program

On June 4, 2019 (10), the Board authorized the procurement of FSP ACT Services for the justice involved population. This program serves individuals 25-59 years old with SMI, including those with co-occurring substance use, who have been incarcerated and treated for mental illness while in jail or prison and/or are re-entering the community from jail or prison. Services include rehabilitative mental health services, intensive case management, housing, educational and employment support, and treatment services.

This program is designed to improve the behavioral health and quality of life of adults and older adults in the community who are experiencing homelessness and have an SMI by increasing clinical and functional stability through an array of behavioral health services, housing opportunities, and educational and employment supports. If approved, this program will be enhanced to Forensic Assertive Community Treatment (FACT) program to further support the justice involved population. This enhanced program will build on the ACT model and provide care to clients with SMI who are involved with the criminal justice system by providing customized supports based on criminogenic needs and risks, while bridging the behavioral health and criminal justice systems. The goal of this specialized program is to prevent future justice involvement, reduce recidivism, and minimize costs associated with repeated involvement in the criminal justice system.

Services are provided countywide. In FY 2024-25, the program served a total of 280 unduplicated clients. During FY 2024-25, 55% of clients with education goals on their treatment plan showed progress, 45% of clients with employment goals on their treatment plan showed progress, and 79% with housing goals on their treatment plans showed progress. In addition, 68% of clients showed same or improved functional status, and 66% of clients showed same or improved clinical status.

Today's action requests the Board issue a Qualification Based Selection for the FACT program for an Initial Term of up to one year, with four 1-year Options, and up to an additional six months, if needed.

c. Clubhouse Services

On January 26, 2021 (11), the Board authorized the procurement of five regional Clubhouses. Subsequently, on June 28, 2022 (5), the Board authorized the procurement of four specialty Clubhouses and one additional regional Clubhouse. Clubhouses assist TAY, adults, and older adults with an SMI, including those with a co-occurring substance use condition, in achieving social, financial, health and wellness, educational, and vocational goals.

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Clubhouse services are based on the Clubhouse International model, a strength-based social model where clubhouse members and staff collaborate in the operation of the Clubhouse. Services include outreach and engagement, and involvement in the Work-Ordered Day model of inclusion in Clubhouse daily operations, aligned with Clubhouse International standards. In addition, evening, weekend and holiday activities are offered for socialization. Research shows that Clubhouse services can improve social connectedness, self-esteem, quality of life, and both physical and mental well-being. Additionally, these services help reduce hospitalizations, criminal justice involvement, as well as improve employment outcomes. Clubhouse services are provided countywide.

In FY 2023-24, Clubhouses served a total of 1,969 unduplicated members. Of the 607 members who had completed and updated an individualized goal plan, 87% reported improvement. Among the 265 members with baseline and follow-up data, there was a decrease in hospitalizations from 22% to 16%. Additionally, among the 301 members with follow-up data, there was an increase in the percentage of members who were competitively employed from 11% at baseline to 19% at follow-up. Clubhouse services will be eligible for Medi-Cal billing as part of BH-CONNECT implementation, providing a pathway for long-term financial stability.

Today's action requests the Board issue a Qualification Based Selection for Clubhouse Services with an Initial Term of up to one year, with four 1- year Options, and up to an additional six months, if needed.

Recommendation #3: Authorize Amendments to Extend Existing Contracts

a. *North Coastal Crisis Stabilization Services (Exodus Recovery, Inc., 565131)*
On June 25, 2019 (1), the Board authorized the establishment of Crisis Stabilization Services in the North region of San Diego County. The North Coastal Crisis Stabilization Unit (CSU) is a community-based facility operating 24 hours per day and 7 days per week to provide care for adults experiencing psychiatric emergencies, including those with co-occurring disorders, who are eligible for Medi-Cal funded services or who are low-income. The CSU serves both voluntary clients and those on a Welfare and Institutions Code 5150. North Coastal CSU services include psychiatric evaluations, mental health assessments, crisis intervention, crisis stabilization, brief outpatient counseling, case management, and medication management. Services are provided countywide, and within a community-based setting and are designed to divert individuals from higher levels of care such as inpatient services or emergency departments and connect them to ongoing care.

Data shows that the services offered by North Coastal CSU support diversions from higher levels of care as individuals are stabilized, thus not requiring inpatient level services. Crisis services remain a critical component of the behavioral health continuum of care and support the management of behavioral health conditions via linkages to continuous care.

In FY 2024-25, the North Coastal CSU served a total of 1,073 unduplicated clients. In FY 2024-25, 93% of clients were diverted from inpatient hospitalization. In addition, out of

the 1,458 clients discharged in FY 2024-25, 74% were connected to community services within 30 days of being discharged.

This request for a contract extension aims to align the program with the clinical design and bundled procurement planned for CSUs, which have contract expiration dates of June 30, 2027. The existing contract is set to expire on July 31, 2026; the proposed extension would align the end date to match other adult CSU contracts.

Today's action requests the Board authorize an extension of the current contract with Exodus Recovery, Inc. for North Coastal Crisis Stabilization Services, up to June 30, 2027, and up to an additional six months, if needed.

b. *In-Reach Services*

In January 2022, the California Department of Health Care Services (DHCS) began implementing the Medi-Cal Transformation Initiative, formerly referred to as California Advancing and Innovating Medi-Cal. This includes the Justice-Involved Initiative component of Medi-Cal Transformation, which allows eligible individuals to enroll in Medi-Cal prior to release from incarceration, receive behavioral health links, and a defined set of Medi-Cal pre-release services to ensure continuity of health care coverage and access to health and social services as they transition back into the community. Behavioral health links include connections to services for individuals who receive medication treatment for SUDs, including through the Medi-Cal Managed Care Plan provider network. In such cases, correctional facilities work in partnership with County BHS and share appropriate information with the respective health plans or provider that prescribes medication for SUDs. Currently, the County provides in-reach services and behavioral health linkages to a subpopulation of individuals in County jails with SMI and/or SUD and are referred to in-reach services by the Sheriff's Office Reentry staff.

Under the Medi-Cal Transformation Initiative, BHS is required to provide behavioral health links for individuals with SMI that are in detention facilities and transitioning back to the community, this includes not only our local detention facilities but also the California Department of Correction and Rehabilitation (CDCR). On May 21, 2024 (8), the Board authorized Neighborhood House Association's Project In-Reach (Contract #548930) and Project In-Reach Ministry (Contract #560754) to continue to provide in-reach services and behavioral health links for detention facilities that have gone live on October 1, 2024, and to further support the County to prepare for the 90-day pre-release services mandates. Services aim to provide engagement for incarcerated adults who have or are at-risk of psychological disorders and/or substance use conditions while incarcerated to prepare them for community reentry, with the goal of reducing the number of individuals who return to custody upon release. This is accomplished by improving outcomes among key areas of functioning: health, housing, mental health, prosocial behavioral, substance use, family wellness, and employment. Services are provided countywide, and include screening, case management, group and individual counseling, and crisis intervention.

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CDCR went live with the Medi-Cal Transformation Initiative pre-release services in February 2025, with the first referrals sent to Project In-Reach and Project In-Reach Ministry in July 2025. San Diego's local Sheriff's Office and Probation Department are scheduled to go live with pre-release services in late 2025.

Today's action requests the Board authorize an extension of the current contracts with Neighborhood House Association for Project In-Reach and Faith Based Wellness and Mental Health In-Reach Ministry up to June 30, 2027, and up to an additional six months, if needed. This request will allow for an evaluation of the behavioral health links requirement under the Medi-Cal Transformation Initiative, helping to guide the development of programs for justice-involved individuals with SMI as they reintegrate into the community after incarceration and further account for the impact of this initiative.

i. *Project In-Reach (Neighborhood House Association, 548930)*
On January 7, 2014 (9), the Board authorized the procurement of Jail In-Reach Services. Subsequently, on November 16, 2021 (5), the Board authorized a contract term extension of this program up to June 30, 2024, and up to an additional six months, if needed. Most recently, on May 21, 2024 (8), the Board approved a further extension through June 30, 2026, to support pre-release Medi-Cal enrollment, Behavioral Health Links, and 90-Day Pre-release services for justice-involved individuals.

In FY 2024-25, this program received 159 referrals and conducted 155 screenings and served a total of 126 unduplicated clients, of whom 83% were linked to community-based services upon discharge from the program.

ii. *Faith Based Wellness and Mental Health In-Reach Ministry (560754)*
On November 13, 2018 (12), the Board authorized the procurement of Faith Based Wellness and Mental Health In-Reach Ministry. Subsequently, on May 21, 2024 (8), the Board approved a further extension through June 30, 2026, to support pre-release Medi-Cal enrollment, Behavioral Health Links, and 90-Day Pre-release services for justice-involved individuals.

This program provides services similar to Jail In-Reach services, with the addition of pastoral counseling to provide spiritual support. In FY 2024-25, the program received 204 referrals and conducted 202 screenings and served a total of 183 unduplicated clients, of whom 91 % were linked to community-based services upon discharge.

c. *CalWORKs Connection (Vista Hill Foundation, 566042)*
On June 4, 2019 (10), the Board authorized the procurement of CalWORKs Connection program. This program provides screening, referral, and linkage to treatment programs and community resources for CalWORKs Welfare to Work (WTW) participants. The program is designed to assist families in moving from WTW by addressing behavioral health

barriers to employment and provides behavioral health screening, coordination of SUD services, and family stabilization services to CalWORKs participants.

This service is a core component of the CalWORKs program, supporting compliance with work participation requirements, and a requirement of self-sufficiency eligibility. Furthermore, it is an essential service designed to enable WTW participants with SUD to access necessary resources to obtain employment to achieve self-sufficiency. Services are provided countywide.

In FY 2024-25, a total of 52 unduplicated clients received behavioral health screenings. There were 6,070 clients screened for SUD services and seven of these participants met the criteria for SUD treatment referral. Of the 337 family stabilization referrals received from Self-Sufficiency Services, 59 participants were provided with care coordination. A total of 4,698 participants received SUD prevention education.

An extension is being requested for the existing contract that is set to expire on June 30, 2026. CalWORKs funding is uncertain and potentially unstable and recent State and federal changes make it difficult to commit to a five-year contract term. As a result, a one-year extension is being requested to ensure available funding supports program design.

Today's action requests the Board authorize an extension of the current contract with Vista Hill Foundation for the CalWORKs Connection program up to June 30, 2027, and up to an additional six months, if needed.

d. *Mental Health Residential Short-Term Residential Therapeutic Programs* (*Varsity Team, Inc., 564845; Fred Finch Youth Center, 566359; Casa de Amparo, Inc., 566365; New Alternatives, Inc., 566363)*

On October 17, 2000 (1), the Board authorized the implementation of the Children's Mental Health Initiative that allowed for an expanded continuum of comprehensive mental health care for children, adolescents, and their families. This action authorized the execution of new contracts for mental health services to children placed in State-licensed residential care programs. Subsequently, on January 24, 2017 (2), the Board authorized single source contracts for residential services including the Short Term Residential Therapeutic Program (STRTP).

STRTP means a residential facility operated by a public agency or private organization and licensed by the Community Care Licensing Division of the California Department of Social Services pursuant to Section 1562.01. STRTPs provide an integrated program of specialized and intensive care and supervision, services, supports treatment, and short-term, 24-hour care and supervision to children that are trauma-informed, as defined in standards and regulations adopted by the department. The care and supervision provided by a short-term residential therapeutic program shall be nonmedical, except as otherwise permitted by law. Private short term residential therapeutic programs shall be organized and operated on a nonprofit basis. An STRTP may be operated as a children's crisis

residential program. STRTPs provide integrated, specialized and intensive care and services to youth placed in their care by the Child and Family Well-Being (CFWB) Department. CFWB oversees the residential services provided and BHS establishes companion contracts for the provision of specialty mental health services. These programs provide a full range of Title 9 outpatient diagnostic and treatment for children and adolescents ages 6-19 years old and non-minor dependents who are seriously emotionally disturbed, are full-scope Medi-Cal beneficiaries, and are residing in a STRTP. Services are provided countywide and include full range mental health services, case management, care coordination, crisis intervention, group and family therapy, and care coordination with CWFB and justice partners.

STRTPs provide 24-hour treatment for clients or residents who require a higher level of care than those available in an outpatient setting. Contracting with the same provider for residential and behavioral health services promotes continuity of care and enhances efficiency and effectiveness for clients requiring both services. In FY 2024-25, STRTPs served a total of 229 unduplicated clients. Of the 132 clients discharged, 50% transitioned to a lower level of care, and 96% avoided hospitalization.

The existing contracts are set to expire on June 30, 2026, for Varsity Team, Inc. and on June 30, 2027, for Fred Finch Youth Center, Casa De Amparo, Inc. and New Alternatives, Inc. This request for a contract extension is to ensure consistency and alignment with CFWB's timeline for competitive solicitations.

Today's action requests the Board authorize an extension of the current contracts with Varsity Team, Inc. for STRTP and Fred Finch Youth Center, Casa de Amparo, Inc. and New Alternatives, Inc. for Residential Outpatient Children's Mental Health Services up to June 30, 2029, and up to an additional six months, if needed.

e. OnBase (Hyland Software, Inc., 549813)

On April 3, 2015, under Board Policy A-87, the Department of Purchasing and Contracting authorized the single source procurement of OnBase, a platform used for enterprise content management and data archival of medical records for clients who have received behavioral health treatment. The County utilizes Hyland's OnBase software for document imaging, coding, chart completion, and secure cloud storage, all in compliance with the Health Insurance Portability and Accountability Act (HIPAA). The platform also supports disconnected scanning, concurrent user access, and hosted infrastructure, enabling County teams to securely manage protected health information across locations.

OnBase's archived data is crucial in meeting federal, State and County information blocking and record retention requirements. BHS is currently exploring options and recommendations to develop a strategic plan for a centralized BHS data archival platform inclusive of data from multiple current solutions and sources. Timelines and dependencies are currently unknown and transitioning to a new contract at this time would introduce significant challenges, including potential disruptions to patient continuity of care workflows, gaps during any needed data migration, and potential for subsequent system

transition after finalization of the BHS strategic plan. Extending the current contract with Hyland ensures uninterrupted access to the systems that support medical record retention compliance, operational stability, secure document handling and provides value to the County with cost efficiencies and continuity during planning phases. Furthermore, the proposed contract extension is necessary to preserve the functionality of the OnBase platform and ensure uninterrupted access to hosted HIPAA compliant data, critical to the operations of County BHS.

Today's action requests the Board authorize an extension of the current contract with Hyland Software, Inc. for the OnBase platform through June 30, 2031, and up to an additional six months, if needed.

LINKAGE TO THE COUNTY OF SAN DIEGO STRATEGIC PLAN

Today's proposed actions support the County of San Diego 2025-2030 Strategic Plan Initiatives of Equity (Health) and Community (Quality of Life) as well as the regional *Live Well San Diego* vision of healthy, safe, and thriving communities. This is accomplished by reducing disparities and disproportionality of individuals with mental health and substance use conditions and ensuring access to a comprehensive continuum of behavioral health services administered through accessible behavioral health programs.

Respectfully submitted,

USE "INSERT PICTURE" FUNCTION TO INSERT SIGNATURE

EBONY N. SHELTON
Chief Administrative Officer

ATTACHMENT(S)

N/A

DRAFT