BHAB Re-entry Support for Justice-involved Youth and Adult Ad Hoc Subcommittee Final Report

This subcommittee met nine times between March 2025 and February 2026 to fully understand the re-entry system for justice involved youth and adults. Our goal was to increase awareness of the Justice-Involved Reentry Initiative that provides medical and behavioral health services for adults and youth in San Diego County jails. We hoped to empower the subcommittee to make recommendations to the Behavioral Health Advisory Board (BHAB), Behavioral Health Services (BHS), and the Board of Supervisors (BOS) to improve the transition from incarceration to community-based care.

BHAB Members involved: Robin Sales (Subcommittee Chair), Judith Yates, Minola Clark Manson, Stuart Gaiber, Jessica Kramer.

BHS Staff were instrumental in the facilitation of the group and subject matter experts guided us through complicated policy and programmatic issues.

Many community members participated each month representing Community-based Organizations (CBOs), racial justice groups, organizations serving unhoused individuals, family members of incarcerated persons who have serious behavioral health issues, Alternative to Incarceration (ATI) Community Advisory Task Force, and disability rights groups. These participants brought community perspective and lived experiences to guide our discussions and were much appreciated. Many others from various governmental agencies adjacent to BHS educated our group in policy and priorities.

Meeting Dates and Topics:

March 24th, 2025
Next Move Program Overview
Yael Koenig, Deputy Director, Programs & Services Behavioral Health Services

April 28, 2025
Intervention Strategies for Justice-Involved Youth
Dante Dauz, Public Safety Group

June 23, 2025
Roundtable Discussion – Community Supervision Services Panel
Overview of Juvenile and Adult Probation with Q&A from Subcommittee Participants

July 21, 2025
Debrief on Community Supervision Roundtable
Subcommittee members

August 25, 2025
Discussion: Re-Entry Care Transitions – Perspectives on Smooth Handoffs
and Continuity of Care

September 22, 2025
Overview & Planning Discussion: BHAB Subcommittee Behavioral Health
Services Act (BHSA) Input Session on October 27, 2025
Kat Briggs, MPH, Chief, Communication & Engagement, Behavioral Health Services

October 27, 2025
BHSA Input Session
Kat Briggs, MPH, Chief, Communications and Engagement, Behavioral Health Services

January 26, 2026
Preparation for Final Report and Action Item for BHAB regarding Recommendations for Board of Supervisors

February 23, 2026
Final meeting prior to Sunsetting Subcommittee-Summary of past year and finalization of Recommendations

The following are learnings gleaned from the presentations and discussions and reflect input from Subcommittee participants:

- There are existing programs within BHS that serve youth exiting incarceration that can help families, but which are voluntary. Improved communication, cooperation, and follow up between the Juvenile Probation Department and BHS would be helpful in the critical aftermath of release from detention.

Best practices for Improving Re-entry for Youth:

- Incorporating cultural diversity into programming (i.e. youth coming together to share their culture through food); Offering realistic social tools (e.g. preventing peer pressure; Improve Family Connections: some youth have strained relationships with parents/guardians and this can impact their re-entry ;Giving youth options to be released to a trusted adult or staff member; Genuine and honest efforts for relationship/ community building with youth.

Update on Local Medi-Cal Transformation Justice Involved Re-entry Initiative Behavioral Health Services (BHS):

- Behavioral Health Links: Includes correctional facilities, health agencies, and Medi-Cal managed care plans. Focused on linking individuals to treatment and services pre- and post-release.
- Project In-Reach & Next Move Program In-Reach Services: Targeted at youth and adults returning from CDCR.
- Facilities, especially those under 21 or formerly in juvenile detention.
- Perspectives on Smooth Handoffs and Continuity of Care
    - Communication of resources; funding for substance use disorder (SUD) treatment beds; case management; using peers with lived experience (site visits to Clubhouses, jail visits, transition programs; using alternatives to incarceration to prevent revolving door, Forensic Assertive Community Treatment (FACT) program.

BHSA Overview and Planning for Input Session and follow-up session produced much input from the committee:

- Key areas to explore: Connections between systems; Housing and re-entry; Wraparound support; Linkages to medical services; Equity and lived experience; Other emerging needs.
- Focused on transitions, peer involvement, better lines of communication and data exchange between BHS and San Diego Sheriff's Office (SDSO), building community trust, community providers invited to resource fair in facilities, enhanced care management, housing support, prevention and early intervention, more flexibility in funding programs and engagement of CBOs.
- Uptraining of jail staff to identify and treat trauma (per class action settlement, SDSO is overhauling behavioral health treatment).

In conclusion, we acknowledge that BHS has made good progress in supporting those exiting incarceration and that some of the barriers impeding that work is out of BHS control. We are encouraged that the SDSO will go live with Medi-Cal Justice Involved Transformation in July 2026 and that enhanced care management will support seamless transition back into the community. Cooperation and data sharing between BHS, the SDSO, and ATI both can be transformative. Recommendations to follow.

Respectfully submitted,
Robin Sales, Subcommittee Chair