Behavioral Health Advisory Board Meeting
March 5, 2026



3/24 Board Item: Update on the Youth Optimal Care Pathways Model

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Youth Behavioral Health Crisis

24% Increase Emergency Department encounters for suicide attempts and self-harm among 10–17-year-olds (2019-2023)

Youth mental health indicators based on a 2023-25 survey of San Diego County students

28%
Felt chronic sadness in the past year

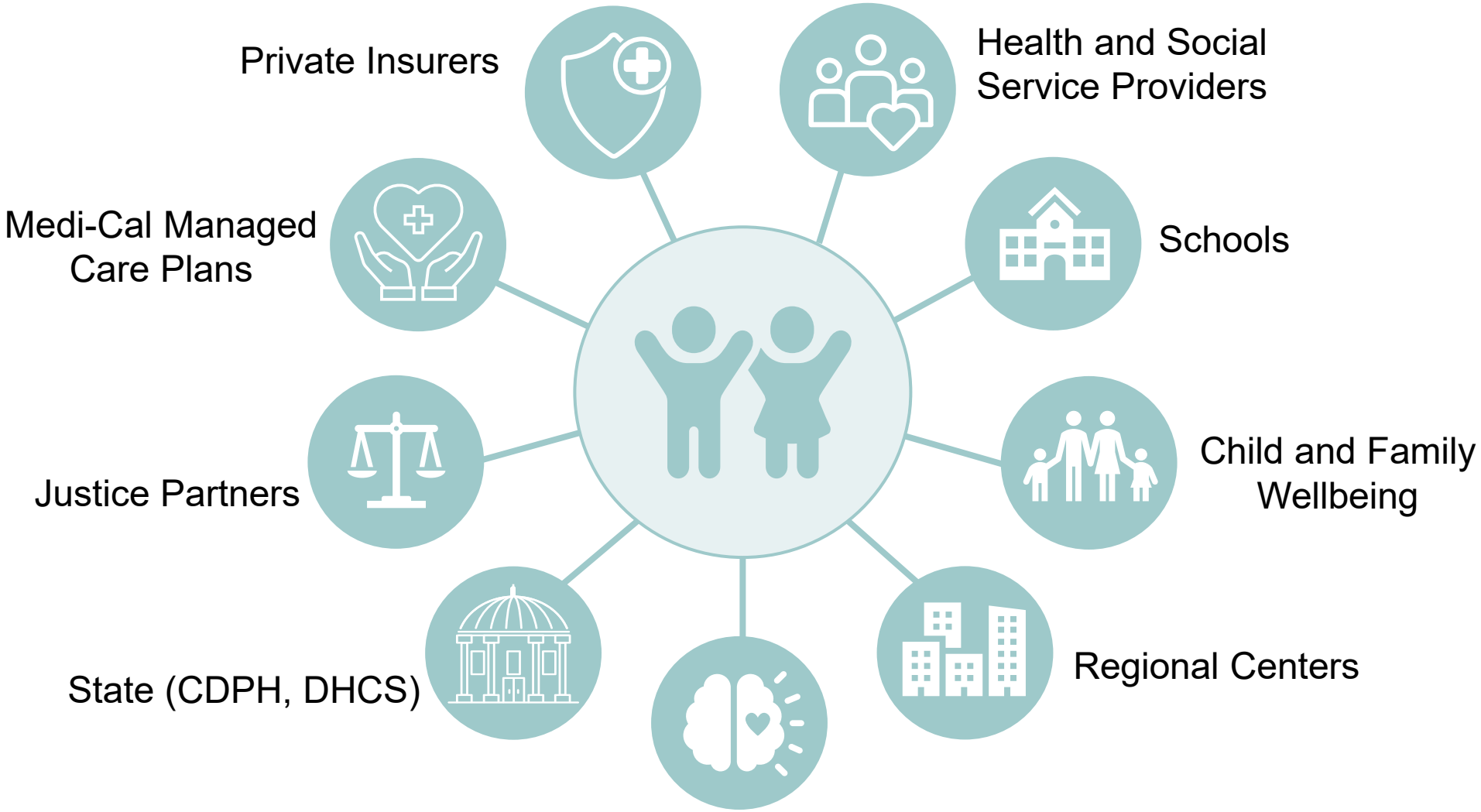
10%
Considered suicide in the past year

36%
Felt lonely in the past month

24%
Experienced emotional distress in the past month

68%
Received emotional support from an adult in their home

Collective Commitment to Serving Youth



Illustrative example,
not an exhaustive list of all partners

Informing the Youth OCP Model: Stakeholder Engagement

Engagement Methods

- Listening Sessions
- Focus groups
- Collaborative discussions
- BHSA Community Planning Process



Stakeholders

Over 200 stakeholders engaged across San Diego County including:

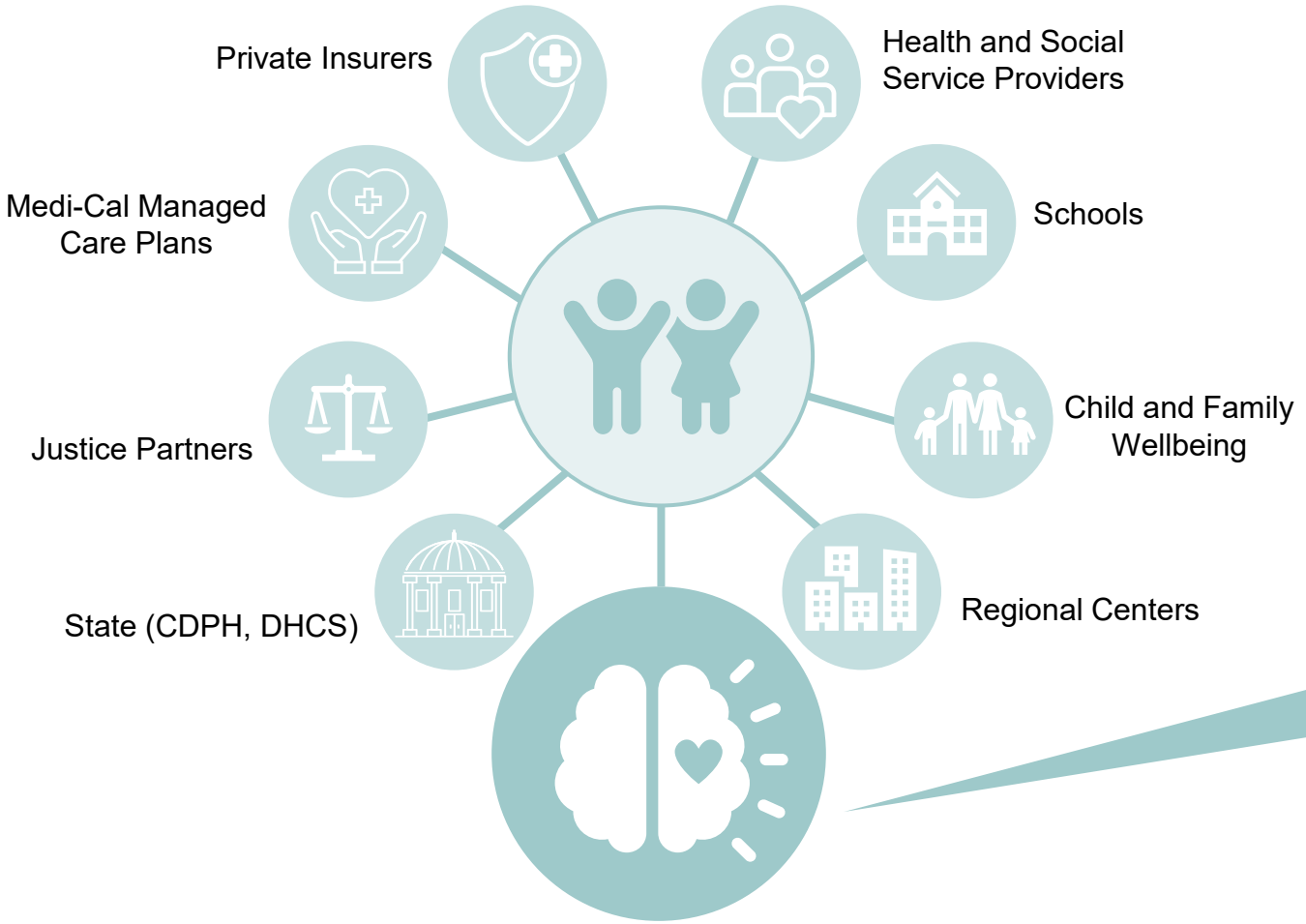
- Youth
- Families & caregivers
- CBOs
- Education partners
- Managed care plans
- Local hospitals
- Federally Qualified Health Centers
- Advocacy groups
- Representatives from HHSA

Informing the Youth OCP Model: Stakeholder Engagement

Key Insights from Stakeholders

- Early concerns are most often identified in family & school settings
- Services should be relational, culturally responsive, and accessible
- Need for coordinated systems across schools, providers, CBOs
- Schools are a trusted entry point for early mental health support

Our Role



County Behavioral Health Services encompass:

- Delivering specialty mental health and substance use treatment
- Serving youth with significant behavioral health needs
- Providing crisis services and acute care
- Partnering with stakeholders to ensure integrated care and support care coordination

Expanding the Youth System of Care

Principles:

- Estimate need for specialty treatment specific to the age ranges 0-5, 6-11, 12-17, and 18-25
- Meet State benchmarks for the percentage of youth receiving specialty treatment in each age group
- Ensure all youth in our system are connected to outpatient care
- Divert from emergency departments to County crisis response services
- Expand access to intensive community-based services
- Ensure adequate residential treatment capacity to reduce extended hospital stays

Expanding capacity in 4 key areas

- **Crisis Response**
- **Early Intervention and Outpatient**
- **Intensive Community-Based Care**
- **Residential Treatment**

Early Intervention and Outpatient

- Under BHSA counties are responsible for early intervention which includes:
  - Outreach
  - Access and linkage
  - Treatment services focused on reducing disparities and adverse outcomes
- Outpatient and school-based services

Type of Care		# of Clients Served in FY 2024-25 *Ages 0-25*	Projected # of clients served in FY 2030-31 *Five-year Growth*	% Growth
Early Intervention and Outpatient	Mental Health	**16,422**	**21,176**	**29%**
	Substance Use	**673**	**961**	**43%**

Crisis Response

- Specific to the developmental, social, and clinical needs of youth
- Designed to reduce emergency department visits, hospitalizations, justice-involvement, and out-of-home placements
- Crisis services include:
  - Mobile Crisis Response Teams (MCRTs)
  - Crisis Stabilization Units (CSUs)
  - Children's Crisis Residential Program

Type of Care		# of Clients Served in FY 2024-25 *Ages 0-25*	Projected # of clients served in FY 2030-31 *Five-year Growth*	% Growth
Crisis Response	Mental Health & Substance Use	**2,971**	**7,848**	**164%**

Intensive Community-Based Care

- Comprehensive services for youth who are at higher risk for hospitalization
- Services include:
  - High Fidelity Wraparound (HFW)
  - Intensive Outpatient Programs (IOP)
  - Partial Hospitalization Programs (PHP)

Type of Care		# of Clients Served in FY 2024-25 *Ages 0-25*	Projected # of clients served in FY 2030-31 *Five-year Growth*	% Growth
Intensive Community-Based Care	Mental Health	**633**	**1,091**	**72%**
	Substance Use	**68**	**155**	**127%**

Residential Treatment

- Psychiatric Residential Treatment Facilities (PRFTs)
  - Subacute alternative to hospital settings
- Short-term Residential Treatment Programs (STRTPs)
  - Structured specialized care with a goal of transitioning to less restrictive setting
  - Focus on foster youth

Type of Care		# of Clients Served in FY 2024-25 *Ages 0-25*	Projected # of clients served in FY 2030-31 *Five-year Growth*	% Growth
Residential Treatment	Mental Health	**187**	**234**	**25%**
	Substance Use	**86**	**122**	**42%**

Strategies to Expand Access and Improve Engagement

School-Based Strategies

- Expand crisis response services
- Evaluate needs, service engagement, and outcomes
- Partner with school districts to assess and redesign services

Family Systems & Supports

- Maximize State initiatives to implement evidence-based practices
- Create holistic care spaces that offer enriching social activities
- Partner with stakeholders to ensure safe environments

Health Care Integration

- Explore financially sustainable partnerships
- Increase collaboration with managed care providers
- Advocate for state policies that promote integrated behavioral health

Recommended Next Steps

School-Based Strategies

Authorize procurements for school-based early intervention programs

Family Systems & Supports

Establish data-sharing agreements between County departments, including BHS, CFWB, Probation, and others

Health Care Integration

Establish data-sharing agreements with managed care plans and local hospitals


Q&A

Youth OCP Five-year Capacity Growth

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