COUNTY OF SAN DIEGO

AGENDA ITEM

BOARD OF SUPERVISORS

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Third District

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Fifth District

DATE: **June 9, 2026** DRAFT **XX**

TO: Board of Supervisors

SUBJECT: AUTHORIZE COMPETITIVE AND SINGLE SOURCE PROCUREMENTS, AGREEMENT WITH THE REGENTS OF THE UNIVERSITY OF CALIFORNIA FOR COMMUNITY PSYCHIATRY RESIDENCY PROGRAM, AND AMENDMENT TO EXTEND AN EXISTING CONTRACT (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 competitive and single source procurements. Additionally, it would allow the County to authorize an agreement with the Regents of the University of California for a Community Psychiatry Residency Program and extend an existing behavioral health services contract. Today's actions support the continuation of critical work to advance the behavioral health continuum of care throughout San Diego County. In doing so, these actions 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 Section 401, Article XXIII of the County Administrative Code, authorize the Director, Department of Purchasing and Contracting, to issue Competitive Solicitations 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.

a. Acute Psychiatric Inpatient Services for Children and Adolescents
b. Adult Transitional Rehabilitative Services
c. Biopsychosocial Rehabilitation Services
d. Center for Child and Youth Psychiatry
e. Crisis Residential Treatment Services
f. Foster Family Agency Stabilization and Treatment
g. Full-Service Partnership Intensive Case Management
h. Our Safe Place
i. Para Las Familias
j. Perinatal Outpatient Substance Use Disorder
k. Substance Use Residential Treatment Program

2. In accordance with Section 401, Article XXIII of the County Administrative Code, authorize the Director, Department of Purchasing and Contracting, to issue Competitive Solicitations for the North Inland and North Coastal Crisis Stabilization Units, and upon successful negotiations and determination of a fair and reasonable price, award contracts for an Initial Term of up to one year, with six 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.

3. In accordance with Board Policy A-87, Competitive Procurement, approve and authorize the Director, Department of Purchasing and Contracting, to enter into negotiations with the organizations listed below, and subject to successful negotiations and determination of a fair and reasonable price, award contracts for School-Based Outpatient Behavioral Health Services 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.

- Community Research Foundation
- Family Health Centers of San Diego, Inc.
- Mental Health Systems
- New Alternatives, Inc.
- North County Lifeline, Inc.
- Palomar Family Counseling Services, Inc.
- Pathways Community Services, LLC
- Rady Children's Hospital
- San Diego Center for Children
- San Diego Unified School District

- San Diego Youth Services
- SBCS Corporation
- Sweetwater Union High School District
- Union of Pan Asian Communities
- Vista Hill Foundation
- YMCA of San Diego County

4. In accordance with Board Policy A-87, Competitive Procurement, Procedure § 2.A.2 (Educational Services), approve and authorize the Director, Department of Purchasing and Contracting to enter into negotiations with The Regents of the University of California and, subject to successful negotiations and a determination of a fair and reasonable price, award a contract for the Community Psychiatry Residency Program 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 to requirements and funding, subject to the approval of the Director, Behavioral Health Services.

5. 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 contract #566652 with Alpha Project for the Homeless for Tenant Housing Support and Housing Navigation Services through June 30, 2027, and up to an additional six months, if needed. subject to the availability of funds; and to amend the contract as required to reflect changes to services and funding allocations, subject to the approval of the Director, Behavioral Health Services.

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 2025, approximately one in five 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 most impactful and equitable manner, with the goal of yielding 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.

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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) 2026-28 CAO Recommended Operational Plan in the Health and Human Services Agency. If approved, today's recommendations will result in approximate costs and revenue of $ 4.8 million in FY 2026-27 and approximate costs and revenue of $175.2 million in FY 2027-28. 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 & 2: Authorize Competitive Procurements
If approved, this request will result in estimated costs and revenue of $3.1 million in FY 2026-27. The anticipated funding sources are $0.4 million from Realignment, $0.7 million from Substance Use Block Grant (SUBG), and $2 million from Drug Medi-Cal. In addition, estimated costs and revenue of $120.8 million in FY 2027-28. The anticipated funding sources are $45.7 million from Behavioral Health Services Act (BHSA), $28.4 million from Realignment, $35.2 million from Short-Doyle Medi-Cal, $0.9 million from SUBG, and $10.6 million from Drug Medi-Cal. There will be no change in net General Fund costs and no additional staff years.

Recommendation #3: Authorize Single Source Procurements
If approved, this request will result in no costs and revenue in FY 2026-27 and estimated costs and revenue of $50 million in FY 2027-28. The anticipated funding sources are $25 million from BHSA and $25 million from Short Doyle Medi-Cal. There will be no change in net General Fund costs and no additional staff years.

Recommendation #4: Authorize an Agreement with The Regents of the University of California for Community Psychiatry Residency Program
If approved, this request will result in no costs and revenue in FY 2026-27 and estimated costs and revenue of $4.4 million in FY 2027-28. The anticipated funding sources are $4.4 million from BHSA. There will be no change in net General Fund costs and no additional staff years.

Recommendation #5: Authorize an Amendment to Extend Tenant Housing Support and Housing Navigation Services with Alpha Project for the Homeless (Contract # 566652)
If approved, this request will result in an estimated costs and revenue of $1.7 million in FY 2026-27. The anticipated funding source is $1.7 million from Realignment. There will be no change in net General Fund costs and no additional staff years.

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BUSINESS IMPACT STATEMENT
N/A

ADVISORY BOARD STATEMENT
At their meeting on May 7, 2026, the Behavioral Health Advisory Board voted to _____ these recommendations on consent.

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 public and private agencies.

Recommendation #1: Authorize Competitive Procurements

a. *Acute Psychiatric Inpatient Services for Children and Adolescents*
On October 4, 2016 (1), the San Diego County Board of Supervisors (Board) authorized the procurement of Acute Psychiatric Inpatient Services for Children and Adolescents, also known as Child and Adolescent Psychiatry Services (CAPS). Subsequently, on November 16, 2021 (5), the Board authorized a contract term extension of this program up to June 30, 2027, and up to an additional six months, if needed. The CAPS program provides inpatient comprehensive acute psychiatric services for children and adolescents, up to age 17, in a secure environment. Clients are authorized by the County and receive services including intensive physical and mental assessment, evaluation, treatment, psychosocial rehabilitation, and education services for children and adolescent patients, with involvement from their families. The California Department of Health Care Services (DHCS) mandates that county Mental Health Plans provide or arrange inpatient psychiatric hospitalization for children and youth. Services are available countywide.

In FY 2024-25, the program served a total of 245 unduplicated clients, all of whom demonstrated symptom reduction, increased safety, medication stabilization and increased coping skills, enabling safe discharge. These outcomes highlight both the essential role and clinical effectiveness of inpatient psychiatric care for youth experiencing acute behavioral health crises. Given the high volume of clients and the consistently positive treatment results, continued investment in these services is critical to ensure access to medically necessary, short-term stabilization. Procuring Acute Psychiatric Inpatient Services will allow youth with severe psychiatric needs to receive timely, intensive treatment, reduce reliance on emergency departments, and support successful transitions to lower levels of care.

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

b. *Adult Transitional Rehabilitative Services*

On November 16, 2021 (5), the Board authorized the procurement of Adult Transitional Rehabilitative Services. Adult Transitional Rehabilitative Services provide a full-range of bio-psychosocial rehabilitative services to adults 18 years and older, with serious mental illness (SMI), who have Medi-Cal and benefit from a residential treatment setting in San Diego County. These services are an integral component of the long-term care system, offering both a step-down and diversion from more costly levels of care. The program provides comprehensive social and rehabilitative services countywide, such as medication support, case management/brokerage, crisis intervention, rehabilitation, and other rehabilitative and recovery interventions in a community-based, transitional residential setting. The services help clients develop independent living skills for stabilization in the community.

In FY 2024-25, the program served a total of 29 unduplicated clients. Out of these clients, the program successfully linked every individual to a primary care physician and maintained a 98% satisfaction rate while in the program. Furthermore, all 28 clients scheduled for discharge transitioned into more independent, supported living situation. The data demonstrates the program's effectiveness in promoting stabilization, functional recovery, and reduced reliance on higher-acuity services. These results highlight a clear need to procure Adult Transitional Rehabilitative Services to ensure adults with significant behavioral health needs receive the structured support necessary to maintain progress, prevent rehospitalization, and transition safely into sustainable community living.

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

c. *Biopsychosocial Rehabilitation Services*

On November 16, 2021 (5), the Board authorized competitive solicitations for Biopsychosocial Rehabilitation (BPSR) mental health outpatient services for the Central and South regions. A wide range of BPSR services are provided to meet the needs of the community, including older adult, transitional age youth, crisis, walk-in, primary care collaboration, and co-occurring mental health and substance use disorder (SUD) services.

BPSR programs provide specialty outpatient mental health treatment, walk-in services, rehabilitation, and recovery services to adults ages 18 years and older who have a SMI, including those who may have a co-occurring SUD. The programs provide community-based, recovery-oriented services that are integrated, strength-based, culturally competent,

and trauma-informed. Evidence-based comprehensive outpatient mental health services are also offered, which include assessments, individual and group therapy, psychiatric services, medication management, care coordination, case management, and peer support. These services help increase clinical stability, reduce functional impairment, promote independence and self-sufficiency, improve employment opportunities, enhance psychiatric and social rehabilitation, and recovery.

In FY 2024-25, a total of 3,718 unduplicated clients were served. Of the clients served, 75% showed both clinical and functional improvement or stabilization. Additionally, 98% of clients demonstrated improvement or stabilization with their SUDs. These outcomes demonstrate the importance of BPSR in supporting recovery, reducing impairment, and strengthening community-based stability. Continued procurement of BPSR services is essential to ensure adults have access to structured rehabilitative supports that enhance independence and reduce reliance on higher levels of care.

Today's action requests the Board authorize a competitive procurement for the BPSR programs in the Central and South regions, to award up to four contracts, with an Initial Term of up to one year, with four 1-year Options, and up to an additional six months, if needed.

d. Center for Child and Youth Psychiatry

On November 16, 2021 (5), the Board authorized the procurement of the Psychotropic Medication Clinic known as the Center for Child and Youth Psychiatry (CCYP). CCYP was launched in 2017 as an Innovation program to provide psychotropic medication support services to children and youth up to age 21, who have successfully discharged from their behavioral health treatment provider but continue to require ongoing management of complex medication regimens. The program conducts comprehensive behavioral health and psychiatric assessments to develop a plan for continued medication support services until a transition can be made to a qualified primary care physician for long-term management.

CCYP services are provided countywide and offer timely access to board-certified child and adolescent psychiatrists and nurse practitioners. Primary services focus on medication management and, when clinically indicated, psychiatric evaluation, behavioral health assessments, short-term therapy, coordinated care, and robust resources for families are also provided to promote long-term stability.

According to the American Medical Association, primary care physicians often report feeling ill-equipped to provide behavioral health treatment, particularly in prescribing psychotropic medications. Additionally, the Journal of the American Academy of Child and Adolescent Psychiatry notes that while 7–9% of youth in the general population are

prescribed psychotropic medications annually, this percentage can rise to 25–35% among youth engaged in mental health services.

In FY 2024-25, CCYP served 575 unduplicated clients. Among the 406 discharged clients, 99% avoided hospitalization within 60 days post-discharge.

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

e. Crisis Residential Treatment Services

On November 16, 2021 (5), the Board authorized the procurement of Crisis Residential Treatment Services. Crisis Residential Treatment Services are offered year-round, 24 hours per day, 7 days per week. These services provide an alternative to hospitalization or a step-down from acute in-patient care for San Diego County residents, 18 years or older with SMI, including those who may have a co-occurring substance use condition.

Services include short-term, intensive residential programs that focus on social rehabilitation services and provide recovery-oriented milieu therapy in a safe and therapeutic, home-like setting. Services are provided countywide and help reduce reliance on costly emergency department visits and hospitalizations.

In FY 2024-25, a total of 2,421 unduplicated clients were served. Of the clients served, 70% reported at least a 50% reduction in active crisis-related symptoms. The data demonstrates both strong demand for crisis services and meaningful clinical impact, underscoring the need to expand the continuum of care through Crisis Residential Treatment Services. The high utilization, combined with strong symptom improvement, indicates that individuals experiencing acute behavioral health crises benefit substantially from intensive, community-based stabilization. However, without sufficient residential crisis capacity, many individuals must rely on emergency departments or inpatient psychiatric settings for stabilization. The procurement of Crisis Residential Treatment Services would provide a clinically appropriate, cost-effective alternative for individuals requiring short-term structured care, reducing avoidable emergency department utilization, preventing unnecessary hospitalizations, and improving continuity of care within the crisis system.

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

f. Foster Family Agency Stabilization and Treatment

On July 13, 2021 (11), the Board authorized the procurement of Foster Family Agency Stabilization and Treatment (FFAST) program. FFAST provides outpatient Specialty Mental Health Services to children and youth up to age 21, residing in the County's Foster Family Agency (FFA) homes. FFAs are community-based nonprofit organizations licensed by the California Department of Social Services to deliver enhanced services to foster family homes. Youth placed in FFAs are referred through Child and Family Well-Being (CFWB), Regional Centers, or Juvenile Probation. They are dependents or wards of the Juvenile Court who cannot remain in their own homes or in a County-licensed foster home. While FFAs offer additional supports beyond those available in county foster homes, behavioral health services are not directly provided by CFWB, Regional Centers, or Juvenile Probation. Many of these children and youth have emotional and mental health needs and, without this support, would likely require placement in group homes or other institutional settings.

Services are provided countywide and include individual and family psychotherapy, parent training, crisis intervention, Intensive Care Coordination, Intensive Home-Based Services, medication evaluation and monitoring. Additionally, the services provided through the FFAST program include the State-mandated Therapeutic Foster Care (TFC) services. TFC is a short-term, intensive, highly coordinated, trauma-informed intervention designed for children and youth with complex emotional and behavioral needs. These youth are placed with specially trained foster parents who receive intensive supervision and support to ensure stability and positive outcomes.

The Casey Family Foundation emphasizes that children thrive when they have consistency, predictability, and a secure attachment to a caring adult, which are needs that are critical for those in foster care, who have experienced trauma of repeated family separations. Research also links multiple placement changes to academic challenges and difficulties forming stable and meaningful relationships.

In FY 2024-25, the program served a total of 136 unduplicated clients. Of the 84 clients discharged, 96% avoided psychiatric hospitalization during an outpatient episode. These results demonstrate strong demand and clinical effectiveness, showing the program's critical role in preventing crises and supporting stable foster placements. Continued procurement of FFAST services will ensure youth receive timely, community-based support that reduces reliance on inpatient care and promotes safety and stability.

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

g. Full-Service Partnership Intensive Case Management

On November 16, 2021 (5), the Board authorized the procurement of North County Strength-Based Case Management Services (SBCM). This program will shift to Full-Service Partnership (FSP), providing Intensive Case Management (ICM) services, as required, for participation in BH-Connect. FSP ICM is a higher intensity model that serves adults 18 years and older with SMI who experience significant functional impairments, frequent crises, or high service needs, designed to help them achieve stability and independence. FSP ICM services are delivered by a multidisciplinary team that tailors care to each client's unique needs, including peer services, crisis intervention, psychosocial rehabilitation, psychotherapy, medication management, and on-call services. Teams provide as many contacts as needed to support participants' recovery, with most participants receiving at least one visit per week. Services are provided in the North Coastal and North Inland regions.

According to Cochrane Database of Systematic Reviews, data shows that FSP ICM services improve general functioning, employment and housing outcomes, and reduce crisis utilization. In FY 2024-25, the program served 262 unduplicated clients. Of the 262 clients, 75% showed same or improved functional status, 79% showed same or improved clinical status, there was a 47% reduction in crisis utilization, and 93% were housed as of December 31, 2025. These outcomes demonstrate the program's effectiveness in promoting stability, recovery, and independence. Procuring FSP ICM services is essential to ensure continued access to intensive, coordinated supports that reduce hospitalization risk and improve long-term outcomes.

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

h. Our Safe Place

On July 13, 2021 (11), the Board authorized the procurement of Behavioral Health Services for Lesbian, Gay, Bisexual, Transgender, and/or Questioning (LGBTQ+) youth and young adults, Our Safe Place (OSP) program. OSP is designed to support LGBTQ+ youth up to age 21 and their caregivers by providing outpatient clinical services in a supportive and inclusive environment.

The program offers a comprehensive range of services including behavioral health assessment, individual and family therapy, rehabilitation services, Intensive Care Coordination, medication evaluation and monitoring, and substance use support. In addition, drop-in centers provide safe spaces for youth to connect with peers and access resources such as support groups for youth and caregivers, case management, community engagement activities, and basic needs assistance. Services are provided countywide.

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According to The Trevor Project, of over 18,000 LGBTQ+ youth ages 13-24, those who reported having gender-affirming environments such as supportive schools experienced lower rates of suicide attempts. Specifically, 54% of transgender and nonbinary youth in such environments reported reduced suicidal behavior.

In FY 2024-25, the program served 71 unduplicated clinic clients and 219 clients in drop-in centers. Of the 45 clients discharged from the clinic and 87 from the drop-in centers, 97% avoided psychiatric hospitalization during an outpatient episode.

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

i. Para Las Familias

On January 24, 2017 (2), the Board authorized the procurement of Para Las Familias (PLF). PLF provides outpatient behavioral health services to young children ages 0-5, who meet medical necessity criteria and present with Serious Emotional Disturbance. Services include comprehensive assessments, plan development, individual, group and family therapy, collateral, rehabilitation services, Intensive Care Coordination, Intensive Home-Based Services, crisis intervention, and case management.

A 2022 Centers for Disease Control and Prevention report identified the leading barriers to receiving necessary health care among children with an existing early childhood mental disorder. The most common challenges included difficulty securing appointments (72%), cost-related issues (39%), and lack of available services in the area (39%). Furthermore, the California Department of Social Services' All County Letter 24-35 issued in June 2024, the No Wrong Door Policy mandates that all children must be referred for assessment and services within three days of opening a child welfare case.

In FY 2024–25, the program served 159 unduplicated clients. Of the 120 clients discharged, 65% participated in family therapy sessions. This demonstrates strong engagement from caregivers, which is essential in early childhood mental health treatment.

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

j. Perinatal Outpatient Substance Use Disorder

On July 13, 2021 (11), the Board authorized the procurement of the Perinatal Outpatient Substance Use Disorder (SUD) Treatment Services Program. Subsequently on December 5, 2023 (24), the Board authorized additional funding to increase access to recovery residences for clients experiencing homelessness in outpatient substance use treatment.

The program provides outpatient SUD treatment, recovery, and ancillary services for women, pregnant and parenting women, and pregnant and parenting adolescent females ages 15 and older, with substance use conditions. Services are trauma-informed and include screening and assessment, individual and group counseling, care coordination, peer support, parenting education, vocational readiness, housing support, childcare, and therapeutic interventions for children in client's custody. Certain program sites offer contingency management for stimulant use disorder, Medication for Addiction Treatment, and ambulatory withdrawal management.

The Substance Abuse and Mental Health Services Administration (SAMHSA) 2020 publication, Addressing the Specific Needs of Women for Treatment of Substance Use Disorders, advises that SUD treatment for women be trauma-informed, address co-occurring mental health needs, include consideration of medications, and incorporate cultural responsiveness. In alignment with DHCS Perinatal Practice Guidelines and clinical best practice, the program addresses the needs of clients with co-occurring mental health conditions, justice involvement (including involvement with Child and Family Well-Being), and housing insecurity, and provides therapeutic interventions for the clients' children. Services are provided countywide and program staff reflect the cultural and linguistic diversity of the communities served at each site.

In FY 2024-25, the six programs served a total of 1,165 unduplicated clients. Of the 313 discharged clients who completed treatment in 31 or more days, 86% reported no new arrests. Furthermore, 91% of the 161 discharged clients, who were experiencing homelessness at intake, obtained housing by the end of treatment phase, and 96% of the 27 births were drug-free.

Today's action requests the Board authorize a competitive procurement for five Perinatal Outpatient SUD treatment programs for an Initial Term of up to one year, with four 1-year Options, and up to an additional six months, if needed.

k. *Substance Use Residential Treatment Program*
On July 18, 2023 (14), the Board authorized the competitive procurements of the Substance Use Residential Treatment Programs. These programs provide 24-hour, non-medical residential substance use treatment, withdrawal management, recovery, and ancillary services to adults aged 18 years and older with substance use conditions, including co-occurring mental health conditions.

Services include clinical assessments for substance use and mental health needs, care coordination, and a "warm hand-off" to the appropriate level of care in the mental health system when needs exceed the services available through the program. Services are comprehensive, preventive, rehabilitative, and therapeutic behavioral health care delivered in the least restrictive environment and in the most effective modality based on the

American Society of Addiction Medicine criteria. Services are provided countywide across the substance use treatment network.

The Substance Use Residential Treatment Programs are designed to promote timely access to care, support retention in treatment, reduce relapses and justice involvement, and improve overall quality of life. In FY 2024-25, the program served 199 unduplicated clients. Among the 106 clients who were homeless upon admission and discharged as planned, there was a decrease in homelessness of over 98%. This procurement represents 38 of the region's 402 total substance use residential beds.

Today's action requests the Board authorize a competitive procurement for the Substance Use Residential Treatment Programs for 38 beds for an Initial Term of up to one year, with four 1-year Options, and up to an additional six months, if needed. If approved, it is anticipated that procurement for a Substance Use Residential Treatment Program may result in multiple contract awards.

Recommendation #2: Authorize Competitive Procurements

On June 25, 2019 (23), the Board authorized the procurement of the North Inland Crisis Stabilization Unit. Subsequently, on November 17, 2020 (10), the Board authorized the procurement of North Coastal Crisis Stabilization Services. Then, on May 19, 2020 (6), the Board authorized a contract term extension of the North Inland Crisis Stabilization Unit up to June 30, 2027. Most recently, on November 18, 2025 (5), the Board authorized a contract term extension of North Coastal Crisis Stabilization Services up to June 30, 2027.

Both programs are referred to as Crisis Stabilization Units (CSUs) and operate 24 hours per day, 7 days per week in the North Region of San Diego County. The CSUs serve adults and older adults, including Medi-Cal beneficiaries, individuals from under-resourced communities, and those experiencing serious mental illness and/or severe substance use conditions. The CSUs provide voluntary services and behavioral health interventions under the Welfare and Institution Code 5150 for services lasting less than 24 hours. These services support individuals experiencing a psychiatric emergency that requires a timelier response to prevent worsening of symptoms, rather than waiting for a regularly scheduled visit. While located in the North Region, services are offered countywide.

Data show that the services offered by the CSUs help divert individuals from higher levels of care when acute level services are not required. Crisis services remain a critical component of behavioral health networks and support the management of behavioral health conditions through linkages to continuous care.

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In FY 2024-25, the North Inland CSU served 1,671 unduplicated clients. Of the clients served, 96.9% were diverted from inpatient hospitalization. In addition, out of the 2,471 clients discharged in FY 2024-25, 61% were connected to community services within 30 days of being discharged.

In FY 2024-25, the North Coastal CSU served 1,073 unduplicated clients. Of the clients served, 93.1% were diverted from inpatient hospitalization. In addition, out of the 1,476 clients discharged in FY 2024-25, 74% were connected to community services within 30 days of being discharged.

On March 24, 2026 (28), the Board approved recommendations in the Youth Optimal Care Pathways (OCP) model which expands crisis services for youth in anticipation of 164% projected growth in capacity for this level of care over the next five years. In alignment with this direction, the North Inland CSU currently serving adults is being evaluated and expanded to serve youth.

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

Recommendation #3: Authorize Single Source Procurements for School-Based Outpatient Behavioral Health Services

On January 24, 2017 (2), the Board authorized the single source procurement of School-Based Outpatient Behavioral Health Services. Subsequently, on July 18, 2023 (14), October 22, 2024 (27) and May 20, 2025 (17), the Board authorized additional single source procurements for School-Based Outpatient Behavioral Health Services. The programs provide culturally competent, outpatient behavioral health services at designated schools, home, community or office/clinic locations, as well as via telehealth. Services include individual, group & family therapy, case management, rehabilitative services, crisis intervention, medication management and outreach and engagement to children and youth up to age 21, and their families.

The program was launched in 1995 under the oversight of the Board's School Subcommittee. In 2002, the Board began awarding and renewing school-based contracts through a single-source process. Since then, the County has collaborated extensively with elementary, middle, and high schools, as well as current and prospective providers and stakeholders, to build an infrastructure that supports this partnership. School districts, through the support of their School Board, determine suitable providers to serve students on their designated school campuses. This effort has created a system of care focused on making behavioral health services accessible on school campuses, with programs tailored to meet the unique needs of students and schools. The County cannot competitively procure for these services, since the providers are selected by the respective School Board. Hence, these programs qualify for single source contracts to provide specialty mental health services based on Board Policy A-87 Competitive Procurement, Procedure § 3.A.3 - Continuity: The procurement is for goods and/or services where continuity of providers will allow the County an opportunity to leverage previously initiated work, or benefit from efficiency

or critical knowledge, that other sources of the goods and/or services cannot provide or would require substantial re-work to perform.

According to 2022 data from the National Center for Education Statistics, more than two-thirds of public schools reported an increase in the number of students seeking mental health services since the onset of the COVID-19 pandemic. Furthermore, the World Health Organization reports that one in seven adolescents ages 10-19 experiences a mental disorder. About half of these conditions begin by age 14, however, the majority remain undetected and untreated.

Currently, BHS has 25 school-based contracts (Attachment A). In FY 2024-25, school-based programs served a total of 6,789 unduplicated clients. Of 4,189 discharged clients, 96% avoided psychiatric hospitalization or rehospitalization.

Today's action requests the Board authorize single source contracts with existing contractors (Attachment A) for school-based behavioral health services for an Initial Term of up to one year, with four 1-year Options, and up to an additional six months, if needed. These programs qualify for single source contracts to provide specialty mental health services based on Board Policy A-87 Competitive Procurement 3.C.3 - Continuity: The procurement is for goods and/or services where continuity of providers will allow the County an opportunity to leverage previously initiated work, or benefit from efficiency or critical knowledge, that other sources of the goods and/or services cannot provide or would require substantial re-work to perform.

Recommendation #4: Authorize an Agreement with The Regents of the University of California for the Community Psychiatry Residency Program

On September 13, 2016 (8), the Board authorized the single source procurement for the Community Psychiatry Residency Program. Subsequently, on November 16, 2021 (5), the Board authorized a contract term extension of this program up to June 30, 2027, and up to an additional six months, if needed.

The Community Psychiatry Residency Program recruits and trains psychiatrists and psychiatric mental health nurse practitioners working in public behavioral health to support State requirements of provider to member ratios. The program provides training to psychiatry residents that are interested in working in public behavioral health. Additionally, the program provides training to psychiatric mental health nurse practitioners from local San Diego universities to gain experience working alongside resident psychiatrists. Services are provided countywide and include training and clinical supervision in community psychiatry for psychiatry residents and psychiatric mental health nurse practitioner trainees to increase the number of psychiatric healthcare providers in the public behavioral health workforce. Currently, there are 11 psychiatry residents and eight psychiatric mental health nurse practitioners placed in County contracted programs.

SUBJECT: AUTHORIZE COMPETITIVE AND SINGLE SOURCE PROCUREMENTS, AGREEMENT WITH THE REGENTS OF THE UNIVERSITY OF CALIFORNIA FOR COMMUNITY PSYCHIATRY RESIDENCY PROGRAM, AND AMENDMENT TO EXTEND AN EXISITING CONTRACT (DISTRICTS: ALL)

This program qualifies for a categorical exemption of Board Policy A-87 Competitive Procurement, based on Procedure § 2.A.2 - Educational Services: Procurement of classroom or course based educational services from a non-profit or public institute of high education, professional association or similar provider. In September 2016, a Request for Information for the Community Psychiatry Residency Program was conducted to identify providers capable of supporting the psychiatry residency training program. The University of California, San Diego (UCSD) was determined to be, and remains, the only medical education institution in San Diego County. The next closest medical schools, UC Irvine and UC Riverside, would not place their residents in San Diego programs for clinical rotations. Moreover, UCSD offers a residency track that specializes in public behavioral health and community-based psychiatry services.

Today's action requests the Board authorize an agreement with The Regents of the University of California for Community Psychiatry Residency 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 #5: Authorize an Amendment to Extend Tenant Housing Support and Housing Navigation Services with Alpha Project for the Homeless (Contract #* 566652)**

On January 26, 2021 (11), the Board authorized the procurement of Tenant Housing Support and Housing Navigation Services. This program provides tenant housing support and housing navigation services to individuals experiencing homelessness, as well as those at-risk of homelessness, who have behavioral health conditions and are connected or will be connected to permanent supportive housing (PSH).

Tenant Housing Support and Housing Navigation Services provides housing navigation services and peer support services to assist clients in identifying, securing, and maintaining safe and affordable housing. The program also supports individuals transitioning into PSH using the Critical Time Intervention (CTI) model. The CTI model helps vulnerable individuals during key transitions by connecting them with community resources and support networks, promoting integration, and ensuring continuity of care. Services are provided countywide.

In FY 2024-25, the program served a total of 836 clients. Of the clients served, 93% maintained housing for a minimum of 12 months, 98% moved into housing within 120 days of voucher or subsidy issuance, and all clients were referred to appropriate housing within 60 days of enrollment.

An extension is requested for the existing contract, which is set to expire on June 30, 2026. The extension will allow for uninterrupted service delivery while departmental planning and program alignment activities continue. Due to the upcoming shift to BHSA, a majority of the current contract activities are not allowable expenses. However, BHS is continuing to explore alternative funding opportunities or transferring the activities to another County department to continue the work.

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SUBJECT: AUTHORIZE COMPETITIVE AND SINGLE SOURCE PROCUREMENTS, AGREEMENT WITH THE REGENTS OF THE UNIVERSITY OF CALIFORNIA FOR COMMUNITY PSYCHIATRY RESIDENCY PROGRAM, AND AMENDMENT TO EXTEND AN EXISITING CONTRACT (DISTRICTS: ALL)

Today's action requests the Board authorize an extension of the current contract with Alpha Project for the Homeless for Tenant Housing Support and Housing Navigation Services up to June 30, 2027, 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 2026-2031 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)
Attachment A, Behavioral Health Services Single Source List of Contracts

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