



CHILDREN, YOUTH AND FAMILIES (CYF) BEHAVIORAL HEALTH SYSTEM OF CARE COUNCIL

MEETING AGENDA

February 8, 2021 – 9:00-10:30 A.M.

Attendee Meeting Link (Panelist received separate link in via Outlook meeting invitation)

I. Welcome (Valerie Hebert)

2 minutes

II. Approval of Meeting Summary (Minola Clark Manson)

3 minutes

- January 11, 2021 Meeting Summary-Handout-Pages 4-7
- Action Items from January 11, 2021-See meeting summary for completed action items-Page 5

III. Business Items (Yael Koenig)

15 minutes

Board Letters / Board Actions

- January 12, 2021 Board of Supervisors (BOS) Letter-Agenda Item 08-Framework for our Future: Declaring Racism a Public Health Crisis-Handout-Pages 8-11
- January 12, 2021 BOS Letter-Agenda Item 09-Framework for our Future: Ensuring Transparency-Handout-Pages 12-15
- January 12, 2021 BOS Letter-Agenda Item 10-Framework for our Future: Data Driven and Equitable Response to COVID-19-Handout-Pages 16-22
- January 12, 2021 BOS Letter- Agenda Item 11-Framework for our Future: Realigning Policies that Govern County Resources and Contracting-Handout-Pages 23-25
- January 12, 2021 BOS Letter- Agenda Item 12-Framework for our Future: Reforming the County Legislative Agenda-Handout-Pages 26-29
- January 26, 2021 BOS Letter- Agenda Item 09-CHFFA Grant-Fred Finch-Handout-Pages 30-37
- January 26, 2021 BOS Letter Agenda Item 10-Authorize procurement of a single source contract with ICF International for Families
 First Prevention Services Act (FFPSA) Implementation and Capacity Building Technical Assistance Services-Handout-Pages 38-41
- January 26, 2021 BOS Letter- Agenda Item 11-BHS Procurement Omnibus/Contract Extensions-Handouts-Pages 42-73
- January 26, 2021 BOS Letter- Agenda Item 13-Harm Reduction-Handout-Pages 74-77
- January 26, 2021 BOS Letter- Agenda Item 14-2021 Legislative Program Revision-Handouts-Pages 78-99
- January 27, 2021 BOS Letter-Agenda Item 04-Framework for our Future: Measures to Provide Economic Access and Equity in the Cannabis Industry-Handout-Pages 100-107

Link to Board of Supervisors Meeting Agendas: https://www.sandiegocounty.gov/content/sdc/cob/bosa.html

Information

- Welcome Marcelo Podesta, LMFT, new member alternate representing the Fee-For-Service Network Constituency
- February 2021 BHS Director's Report to the Behavioral Health Advisory Board-Handouts-Pages 108-113
- January 1, 2021 Bylaws update to reflect meeting summary vs. meeting minutes format Pages 114-117
- County of San Diego Health Professionals Link and Handout-Pages 118-123
 https://www.sandiegocounty.gov/content/sdc/hhsa/programs/phs/community_epidemiology/dc/2019-nCoV/CommunitySectors/Healthcare_Providers_Community_Clinics_Hospitals_and_Pharmacies.html#PHOC
- E-mail to request to be added to the distribution list for information on upcoming telebriefings and to receive COVID-19 updates via e-mail: MCSDCallCenter.HHSA@sdcounty.ca.gov
- Critical Issues in Child and Adolescent Mental Health Conference-March 19, 2021(Dr. Anoop Karippot)-Register at: https://app.ce-go.com/cicamh-Handout-Pages 183-184

Follow Up Items

- Resources to support LGBTQ students during distance learning (Violeta Mora):
 - o Response to COVID-19: A Checklist to Support LGBTQ Students During Distance Learning -Handout-Pages 124-127
 - o Supporting LGBTQ Students During the Coronavirus Quarantine: A Tip Sheet for School Counselors- Handout-Pages 128-130
 - o Supporting LGBTQ Students During the Coronavirus Pandemic: A Tip Sheet for School Social Workers -Handout-Pages 131-135

IV. Mental Health Services Act (MHSA) Update (Dr. Danyte Mockus-Valenzuela)

3 minutes

Mental Health Services Oversight and Accountability Commission Prevention and Early Intervention events-Flier-Page 136

V. Sub-Committees Updates (Yael Koenig)

20 minutes

- Fiscal Year 2020-21 Mid-Year written updates from each sub-committee –Handouts-Pages 137-149
- Education Subcommittee (Heather Nemour)-Handouts-Pages 150-161
- Cultural Competence Resource Team (CCRT) (Rosa Ana Lozada)-Handouts-Pages 162-173

VI. Hot Topic: Outreach and Engagement - Part II (Minola Clark Manson)

45 minutes

- Recap (Yael Koenig)
- Sharing Best Practices Discussion (Amanda Lance-Sexton and Fran Cooper)-Handout-Pages 174-178

VII. Announcements (Valerie Hebert)

2 minutes

- YMCA Youth and Family Services Housing our Youth (HOY) Program-Link: www.ymcasd.org/contacthoy-Handout-Page 179
- Workforce Education and Training Programs (WET)-Peer Personnel and Placement Application Closes March 16, 2021: https://oshpd.ca.gov/loans-scholarships-grants/grants/wet/
- Behavioral Health Workforce Collaborative-San Diego's Racial Equity Gap Seminar on February 10, 2021: Register at: https://www.eventbrite.com/e/behavioral-health-workforce-seminar-racial-equity-gaps-in-san-diego-registration-133359324329-Handout-Page 180
- Birth of Brilliance-Challenging Us to Create Racial Equity in Early Childhood Conference scheduled for February 25, 2021-Handout-Pages 181-182

Next Executive Committee Conference Call: Date: February 25, 2021 Time: 11:30 A.M. to 12:00 P.M. Next Council Meeting: Date: Monday, March 8, 2021 Time: 9:00 to 10:30 A.M.

County of San Diego Children, Youth and Families Behavioral Health System of Care Council Vision, Mission, and Principles

Council Vision:

Wellness for children, youth and families throughout their lifespan.

Council Mission:

Advance systems and services to ensure that children and youth are healthy, safe, lawful, successful in school and in their transition to adulthood, while living in nurturing homes with families.

Council Principles:

- 1. <u>Collaboration of four sectors</u>: Coordination and shared responsibility between child/youth/family, public agencies, private organizations and education.
- 2. <u>Integrated</u>: Services and supports are coordinated, comprehensive, accessible, and efficient.
- 3. <u>Child, Youth, and Family Driven</u>: Child, youth, and family voice, choice, and lived experience are sought, valued and prioritized in service delivery, program design and policy development.
- 4. <u>Individualized</u>: Services and supports are customized to fit the unique strengths and needs of children, youth and families.
- 5. **Strength-based:** Services and supports identify and utilize knowledge, skills, and assets of children, youth, families and their community.
- 6. <u>Community-based</u>: Services are accessible to children, youth and families and strengthen their connections to natural supports and local resources.
- 7. <u>Outcome driven</u>: Outcomes are measured and evaluated to monitor progress and to improve services and satisfaction.
- 8. <u>Culturally Competent</u>: Services and supports respect diverse beliefs, identities, cultures, preference, and represent linguistic diversity of those served.
- 9. <u>Trauma Informed</u>: Services and supports recognize the impact of trauma and chronic stress, respond with compassion, and commit to the prevention of re-traumatization and the promotion of self-care, resiliency, and safety.
- 10. <u>Persistence</u>: Goals are achieved through action, coordination and perseverance regardless of challenges and barriers.







CHILDREN, YOUTH & FAMILIES FRAMEWORK

VISION

Children and youth are healthy, safe, lawful, successful in school and in their transition to adulthood, while living in nurturing homes with families.

PRINCIPLES

Collaborative, Integrated, Child, Youth & Family Driven, Individualized, Strength-based, Community-based, Outcome & Data Driven, Culturally Competent, Trauma Informed, Persistence

PRIORITIES

Ensure a full continuum of care through family-centered and youth-informed services that are compassionate and sensitive to the unique developmental needs of children and youth.

Strengthen partnerships with children/youth's circle of influence to create a supportive environment.

Provide services that empower children and youth to build a healthy sense of self and have confidence to make sound decisions so they thrive in an everchanging world.

Live Well San Diego

\$ Standard of Living

- Economic & Food Security
- Timely Access to Healthcare Inclusive of Behavioral Health Services
- Employment Readiness



Community

- Access to Parks, Playgrounds and Recreation Centers
- Usable Transportation
- Safe Neighborhoods & Schools
- Affordable Stable Housing
- Access to Extracurricular Activities

AREAS OF INFLUENCE



Health

- Daily Physical Activity
- Limited & Supervised Screen
 Time
- Affordable Healthy Food
- Zero Sugary Beverages,
 Drink More Water
- No Substance Use
- No Tobacco Use
- Up to Date Immunizations
- Connection to a Health Home



Social

- Supportive Families
- Nurturing Communities
- Connection to Natural Supports
- Positive Social Interactions



Knowledge

- Quality Education
- Quality Preschool For All
- Good School Attendance
- School Success
- No Suspensions or Expulsions
- Obtain a High School Diploma
- Access to Higher Education & Vocational Programs





CHILDREN, YOUTH AND FAMILIES (CYF) BEHAVIORAL HEALTH SYSTEM OF CARE COUNCIL MEETING SUMMARY

January 11, 2021 | 9:00-10:30 A.M. Virtual Meeting

ITEM	SUMMARY AND ACTION ITEMS
IV. Mental Health Services Act (MHSA) Update (Dr. Danyte Mockus-Valenzuela) Family and youth (Saturday December 12, 2020 – 11:00 A.M.) Providers of behavioral health services (December 1, 2020 – 10:00 A.M.) Focus groups (small group conversations) Fentanyl Warning Campaign (SUD)	Community engagement sessions occurred; report will be made available. Increase on Fentanyl overdose (triple). Partnership campaign to raise awareness with a series of social media posts and billboards about Fentanyl. Flyers developed to make public aware. May is Mental Health efforts- a calendar and website will be developed for the public.
V. Hot Topic: Live Well San Diego Youth Sector CYF Pandemic Point in Time Services Overview (Yael Koenig) - Handout Sharing of Best Practices discussion (Amanda Lance-Sexton and Fran Cooper) - Handout	 Yael Koenig provided an overview of CYF services pre and during pandemic with data from service provided November 2019 compared to November 2020. Fran Cooper and Amanda Lance-Sexton facilitated discussion about best practices for outreach and engagement during the pandemic. Council elected to continue the dialog in the February 2021 meeting: shifting focus from outreach to engagement best practices.
VI. Announcements	
 California Psychological Association: Volunteer System for Psychologists to support children and youth affected by COVID-19 (Dr. Sherry Casper) - Link to register in the pool of volunteers: https://healthcarevolunteers.ca.gov/agreement.php Handout - Pages 89-90 Challenging Us to Create Racial Equity in Early Childhood Conference scheduled for February 23, 2021 - (Steven Jellá) – Handout – Pages 91-92 2021 Virtual Youth Leadership Forum (YLF) for students with disabilities is scheduled for July 11-16, 2021- Deadline to apply is January 29, 2021: https://www.dor.ca.gov/Home/YLF - Handout - Page 93 	Announcements provided by Yael Koenig and Valerie Hebert with a correction for the Challenging Us to Create Racial Equity in Early Childhood Conference scheduled February 25 th (not February 23 rd).
VII. Action Items	Action Due/Status
Provide update on the new date for Juvenile Health and Justice Symposium (original date was March 17, 2020)	CYF Council will provide update when the information is available
Continue 1.11.21 Hot Topic discussion on best practices for outreach and engagement during the pandemic	CYF Council meeting February 8, 2021
Provide resources to support LGBTQ students during distance learning shared by Violeta Mora of the Education Sector, as discussed in 1.11.21 Council Meeting as part of the Business Item Discussion	CYF Council meeting February 8, 2021 Resources provided through Council Business Item
Next Meeting: Virtual Council Meeting	

Next Meeting: Virtual Council Meeting Date: Monday, February 8, 2021 Time: 9:00 to 10:30 A.M.

Members/Alternates Attendance

	CONSTITUENCY	MEMBER	STATUS	ALTERNATE	STATUS	
		PUBLIC SECTOR				
1	Behavioral Health Advisory Board (BHAB)	Bill Stewart	+	Rebecca Hernandez	0	
2	Behavioral Health Services (BHS)	Dr. Laura Vleugels	+	Dr. Charmi Patel	+	
3	Public Safety Group/ Probation	Lisa Sawin	0	Chrystal Sweet	0	
4	Child Welfare Services (CWS)	Steve Wells	+	Norma Rincon	0	
5	HHSA Regions	Dori Gilbert	0	Jennifer Sovay	0	
6	Public Health	Dr. Thomas R. Coleman	+	Adrienne Yancey	0	
7	Juvenile Court	H. Ana Espana	+	Beth Brown	+	
8	First 5 Commission	Alethea Arguilez	0	Dulce Aguilar-Cahue	+	
		DUCATION SECTOR				
9	Special Education Local Plan Area (SELPA)	Cara Schukoske	0	Jamie Tate - Symons	+	
10	Regular Education Pupil Personnel Services	Violeta Mora	+	Heather Nemour	+	
11	School Board	Barbara Ryan	0	VACANT		
12	Special Education	Yuka Sakamoto	+	VACANT		
		PRIVATE SECTOR			L	
13	San Diego Regional Center (SDRC) for Developmentally Disabled	Peggie Webb	+	Therese Davis	0	
14	Alcohol and Drug Service Provider Association (ADSPA)	Angela Rowe	+	John Laidlaw	+	
15	Alcohol and Drug Service Provider Association (ADSPA)	Marisa Varond	+	Claudette Allen Butler		
16	Mental Health Contractors Association	Julie McPherson	+	Minola Clark Manson	+	
17	Mental Health Contractors Association (MHCA)	Laura Beadles	+	Michelle Hogan	+	
18	Fee- For-Service (FFS) Network	Dr. Sherry Casper	+	VACANT		
19	Managed Care Health Plan	George Scolari	+	Kathleen Lang	0	
20	Healthcare/ Pediatrician	Dr. Pradeep Gidwani	+	VACANT		
	FAMI	ILY AND YOUTH SECTOR				
21	Family and Youth Liaison	Renee Cookson	+	Valerie Hebert	+	
22	Caregiver of child/youth served by the Public Health System	Debbie Dennison	+	Sue McCoy	0	
23	Youth served by the Public Health System (up to age 26)	Micaela Cunningham	0	VACANT		
24	Youth served by the public health system (up to age 26)	Christine Frey	+	Emma Eldredge	+	

	SUB-COMMITTEES (Non-voting members unless a member of the Council)						
-	Executive Sub-Committee	+/+					
-	Cultural Competence Resource Team (CCRT)	Rosa Ana Lozada	0				
-	CYF CADRE	Julie McPherson/ Marisa Varond	+/+				
-	Early Childhood Sub-Committee	Aisha Pope/Ginger Bial	+/+				
-	Education Sub-Committee	Heather Nemour/Violeta Mora	+/+				
-	Family and Youth as Partners Sub-Committee	Renee Cookson/ Valerie Hebert	+/+				
-	Outcomes Sub-Committee	Emily Trask/Eileen Quinn-O'Malley	+/+				
-	Training Sub-Committee	Rose Woods	+				

Sub-Committees/Sectors/Workgroups Meetings Information:

Due to COVID-19, most of the sub-committees' meetings are occurring virtually Please reach out to the sector lead or Executive Subcommittee member to obtain location/link

Behavioral Health Advisory Board (BHAB) meeting: Meets the first Thursday of the month from 2:30 to 5:00 P.M.

Outcomes: Meets the first Tuesday of every other month from 11:30 A.M. to 12:30 P.M. **Early Childhood**: Meets the second Monday of the month- from 11:00 A.M. to 12:00 P.M. **Education Advisory Ad Hoc:** Meets as Needed, next meeting will be in September 2020.

TAY Council: Meets the fourth Wednesday of the month 3:00 to 4:30 P.M.

CYF CADRE: Meets quarterly on the second Thursday of the month from 1:30 to 3:00 P.M.

CYF System of Care Training Academy: Meets on the first Wednesday of the month from 9:00 to 10:00 A.M.

CCRT: Meets the first Friday of the month from 10:00 to 11:30 A.M.

Family and Youth as Partners: Meets every third Thursday of the month from 1:30 to 3:00 P.M.

Private Sector: Ad Hoc/Meets as needed.





COUNTY OF SAN DIEGO

BOARD OF SUPERVISORS

1600 PACIFIC HIGHWAY, ROOM 335, SAN DIEGO, CALIFORNIA 92101-2470

AGENDA ITEM

DATE:

January 12, 2021

08

TO:

Board of Supervisors

SUBJECT

FRAMEWORK FOR OUR FUTURE: DECLARING RACISM A PUBLIC HEALTH CRISIS (DISTRICTS: ALL)

OVERVIEW

This Board Letter includes early actions for this newly constituted Board to publicly and openly acknowledge that racism is a public health crisis. Changes in our institutional systems must occur for the County of San Diego to be anti-racist and combat historic inequities.

As represented in this resolution titled, "Resolution of the Board of Supervisors of the County of San Diego Declaring Racism a Public Health Crisis," there are historic health, social, economic, and criminal justice disparities, as well as bold actions that can be taken to substantially transform our county values, policies, practices, and community engagement to be more inclusive, responsive and anti-racist.

In declaring racism as a public health crisis, we are acknowledging that racism underpins health inequities throughout the region and has a substantial correlation to poor outcomes in multifacets of life. As the public health agency for the region, the County has a responsibility to tackle this issue head on in order to improve the overall health of our residents. The public health and racist implications of County policies extends beyond those decisions in County Public Health Services to all departments. The measures proposed in this Board Letter will ensure that we are making decisions that promote health equity, are based on equity data, and engage our communities in a participatory process.

We strongly urge your support for the recommendations in this letter to infuse equity as a core principle of the Board of Supervisors and within the overall operations of the County of San Diego at every level.

SUBJECT: FRAMEWORK FOR OUR FUTURE: DECLARING RACISM A PUBLIC HEALTH CRISIS (DISTRICTS: ALL)

RECOMMENDATION(S) SUPERVISOR NATHAN FLETCHERAND SUPERVISOR NORA VARGAS

- 1.) Approve resolution titled "Resolution of the Board of Supervisors of the County of San Diego Declaring Racism a Public Health Crisis."
- 2.) Direct the Chief Administrative Officer (CAO) to:
 - a.) Create a process to solicit community input to identify county policies and practices that lead to or perpetuate racial or ethnic disparity, with the goal of catalyzing change for just, safe and healthier communities,
 - b.) Revise the statement of values, mission, vision, and strategic plan to represent equity and inclusion as a core principle of the County of San Diego and Board of Supervisors,
 - c.) Incorporate a section titled *Equity Impact Statement* in the Board Letter template for all county departments to identify and determine a systematic approach with standardized guidelines to express the equity impact of recommended actions,
 - d.) Enhance data collection capabilities to identify racial disparities among programs and services that are meant to improve health, social, economic, educational and criminal justice circumstances, and prioritize funding proportional to need when possible.
 - e.) Return to the Board of Supervisors within 90 days with an action plan to implement the direction above and identify the resources needed to achieve these requests.

FISCAL IMPACT

There is no fiscal impact associated with this action. There may be future fiscal impacts associated with final recommendations which would need to be approved by the Board.

BUSINESS IMPACT STATEMENT

N/A

ADVISORY BOARD STATEMENT

N/A

BACKGROUND

Our society must treat racism as the public health issue it is if we are going to improve health for all. The COVID-19 pandemic is disproportionately impacting the lives of Black/African-Americans, Indigenous, Latinx, <u>Asian American & Pacific Islander</u> and <u>all other</u> people of color. This impact, coupled with the lasting negative consequences of racism that include economic

SUBJECT: FRAMEWORK FOR OUR FUTURE: DECLARING RACISM A PUBLIC HEALTH CRISIS (DISTRICTS: ALL)

instability, poverty, barriers to education, and overrepresentation in the criminal justice system, undermines our region's public health.

This Board Letter includes early actions for this newly constituted Board to publicly and openly acknowledge that racism exists, racism has many significant negative consequences, and changes in our institutional systems must occur in order to combat historic inequities. As represented in this resolution titled, "Resolution of the Board of Supervisors of the County of San Diego Declaring Racism a Public Health Crisis," there are historic disparities as well as bold actions that can be taken to symbolically and substantially adjust our county values, policies, procedures, practices, and community engagement to be more inclusive and responsive.

The adoption of this resolution will demonstrate this Board's commitment to lead with the needed change, becoming a more racially equitable and justice-oriented agency in service to all communities within our County.

On May 19, 2020, the Board approved the creation of a community-oriented Leon L. Williams San Diego County Human Relations Commission. Subsequently on June 23, 2020, the Board created the Office of Equity and Racial Justice. These two bold actions were steps in the right direction. Over the past six months, these agencies nominated commissioners, created bylaws, defined roles and responsibilities for both entities, and hired staff for the Office of Equity and Racial Justice. With these administrative steps now complete, the Board is ready to take this next step and provide concrete actions that we would like them to prioritize.

The Board of Supervisors needs to engage the community as we take inventory of our policies and practices using an equity lens. This is the only way to address systemic racism, implicit bias, and institutionalize equity as a core principle of the Board of Supervisors and the operations of the County of San Diego. These actions will further the health, wellness and equity of all San Diegans.

We strongly encourage you to support the attached resolution, and direct the Chief Administrative Officer (CAO) to conduct a community engagement process, incorporate equity in the County's value statements and plans, develop a data driven process to determine how the proposed Equity Impact Statement should be construed and evaluated for board letters, and improve data collection capabilities to show racial disparities and direct county resources proportional to demonstrated need when possible. If approved, the CAO will return to the Board in 90 days with feedback from listening sessions and recommendations for action related to the other action items in this letter.

LINKAGE TO THE COUNTY OF SAN DIEGO STRATEGIC PLAN

Today's proposed actions support the Live Well San Diego Initiative in the County's Strategic Plan, and its vision for San Diego that is Building Better Health, Living Safely, Thriving, by supporting and empowering communities of color.

SUBJECT: FRAMEWORK FOR OUR FUTURE: DECLARING RACISM A PUBLIC

HEALTH CRISIS (DISTRICTS: ALL)

Respectfully submitted,

NATHAN FLETCHER Supervisor, Fourth District

ATTACHMENT(S)RESOLUTION

NORA VARGAS Supervisor, First District 2021 JAN -4 PM. 12: 02

CLERK OF THE SOAKO
OF SUPERVISORS



BOARD OF SUPERVISORS

1600 PACIFIC HIGHWAY, ROOM 335, SAN DIEGO, CALIFORNIA 92101-2470

AGENDA ITEM

DATE:

January 12, 2021

09

TO:

Board of Supervisors

SUBJECT

FRAMEWORK FOR OUR FUTURE: ENSURING TRANSPARENCY AND OPEN GOVERNMENT IN SAN DIEGO COUNTY (DISTRICTS: ALL)

OVERVIEW

The seal in the lobby of the County Administration Center is inscribed with the words, "Good government demands the intelligent interest of every citizen." This ethos should underpin every County decision and action to be transparent, participatory, and collaborative with the public. Transparency provides the public with information about what the County of San Diego is doing. It allows for civic engagement, good governance, and accountability. With transparency, the County can leverage the myriad talents represented by the public and be responsive to the needs of its citizenry. It allows the public to collaborate, provide input, and help shape government policies and programs to serve the needs of our diverse communities.

To further these objectives, this board letter recommends the creation of an Advisory Committee composed of two Board Members and would authorize them to consult county staff, hold meetings, conduct research on best practices, engage the public, and craft recommendations that would allow for greater transparency for San Diego County, including internal procedures as well as public engagement strategies.

RECOMMENDATION(S)

SUPERVISOR NATHAN FLETCHER AND SUPERVISOR JOEL ANDERSON

- 1. Establish an Advisory Committee to review, assess, conduct stakeholder outreach and recommend modifications to enhance transparency, accessibility, and open government within the County of San Diego's operations, public engagement processes, and website offerings, including but not limited to the following:
 - a. Public Records Act portal
 - b. Accessing archived public records

SUBJECT: FRAMEWORK FOR OUR FUTURE: ENSURING TRANSPARENCY AND OPEN GOVERNMENT IN SAN DIEGO COUNTY

- c. Email retention policy
- d. Board and stakeholder engagement, including but not limited to:
 - i. Annual County budget
 - ii. Meetings of the Board of Supervisors, and other public meetings such as County Boards & Commissions
- 2. Appoint Supervisor Joel Anderson and Supervisor Nora Vargas to the committee.
- 3. Direct the Chief Administrative Officer to provide staffing to support the committee.
- 4. Report back to the Board of Supervisors regularly with progress reports and return with a final report and recommended changes in 180 days.

FISCAL IMPACT

There is no fiscal impact associated with these recommendations. There may be future fiscal impacts associated with recommendations proposed by the Advisory Committee. Any such recommendations would need to be approved by the Board.

BUSINESS IMPACT STATEMENT

N/A

ADVISORY BOARD STATEMENT

N/A

BACKGROUND

The seal in the lobby of the County Administration Center is inscribed with the words, "Good government demands the intelligent interest of every citizen." This ethos should underpin every County decision and action to be transparent, participatory, and collaborative with the public. Transparency provides the public with information about what the County of San Diego is doing. It allows for civic engagement, good governance, and accountability to the public. With transparency, the County can leverage the myriad talents represented by the public and be responsive to the needs of its citizenry. It allows the public to collaborate, provide input, and help shape government policies and programs to serve the needs of our diverse communities.

The County of San Diego has made reforms in the past to facilitate greater transparency. These efforts include developing a website to navigate archived public records, creating an online budget portal, and conducting evening budget hearings.

However, the opportunity presented by changing leadership at the Board of Supervisors provides an opening to revisit and reexamine past decisions around transparency. It is an opportunity to reflect on current policies and recommend changes that allow for greater transparency, including access to public records, documents, and meetings in recognition that public participation and access to information is foundational to our democracy.

This board letter recommends the creation of an Advisory Committee composed of two Board Members and would authorize the Committee to consult county staff, hold meetings, conduct research on best practices, engage the public, and craft recommendations that would allow for

SUBJECT: FRAMEWORK FOR OUR FUTURE: ENSURING TRANSPARENCY AND OPEN GOVERNMENT IN SAN DIEGO COUNTY

greater transparency for San Diego County. Meetings of the Advisory Committee will be accessible and open to the public. Meeting times and locations will be made public, and key stakeholder groups and members of the media will be invited to attend and provide input.

We propose that the Advisory Committee begins with investigating the following issue areas, but the scope of the committee is certainly not limited to these issues:

Public Records Act Requests

Under the California Public Records Act, members of the public have the right to access information to pursue the people's business. This fundamental right helps advance transparency, promotes more comprehensive understanding of government decisions, and ensures accountability to the public.

However, the current system of submitting and receiving County Public Records Act requests is outdated and in need of review. There is no central clearinghouse to submit requests and no portal to view public records that are responsive to prior requests — meaning that there are drains on staff time to produce the responsive records and potentially process the same request multiple times.

Other government agencies have a central clearinghouse and a simple process to follow for requesters. The Advisory Committee should research alternatives to the current County system and propose solutions like a user-friendly web portal.

Archived Public Records

Since 1996, the Clerk of the Board of Supervisors has provided online access to official records from Board of Supervisors meetings. In 2010, the Clerk of the Board digitized the County's microfilm records of official Board actions dating back to 1877 and made them available via online record search. Last spring, the Clerk of the Board released an update to the online records search that made all online records full text searchable. However, because records have been categorized in a variety of formats over the years, the search portal does not function as it should and often does not return responsive documents.

The Clerk of the Board is actively working with the County's technology contractor to address issues with the online search system. As the Clerk of the Board continues to pursue improvements, it would be helpful to have the Advisory Committee participate in a review of the usability, other technology improvements, and provide feedback from the public's perspective.

Email Retention Policy

The County of San Diego has an email auto-delete policy. After 60 days, emails are auto-deleted unless they are archived or otherwise saved. Most other governments in San Diego County have a substantially longer email retention period. The auto-delete policy can remove public records that are important to the functioning and transparency of democracy. The Advisory Committee should review the current email retention policy and propose any necessary changes.

SUBJECT:

FRAMEWORK FOR OUR FUTURE: ENSURING TRANSPARENCY AND

OPEN GOVERNMENT IN SAN DIEGO COUNTY

Board and Stakeholder Engagement

The Advisory Committee is also tasked with providing recommendations on ways to enhance Board and stakeholder engagement on important subjects, including the County's budget process and Board meetings.

Over the past two years, there have been changes proposed annually to ensure that the budget process is transparent and accessible to the public. Evening budget hearings are scheduled annually with high levels of participation and feedback. The Advisory Committee should make recommendations to revise the budget process to achieve more robust stakeholder participation in the entire County budgeting process and generally enhance stakeholders' views of County government; improve credibility and trust through increased budget transparency; and develop and implement a comprehensive communication strategy.

The County of San Diego currently allows for public participation at Board of Supervisors meetings and other County of San Diego boards and commissions. It is our intent that this Advisory Committee will investigate additional options to engage the public, solicit feedback, and develop opportunities for diversity in engagement with these governing agencies. Where appropriate, information technology can be used to meet these outcomes, such as the recent use of call-in opportunities for the public at Board meetings, available since the beginning of the COVID-19 pandemic.

We urge your support for the actions before you to create an Advisory Committee made up of two Supervisors to identify recommendations enhance transparency, accessibility, and open government, direct the CAO to assign staff to support the committees work and report back to the Board with regular progress reports and a final report in 180 days.

LINKAGE TO THE COUNTY OF SAN DIEGO STRATEGIC PLAN

The requested action supports the County's 2021-2026 Strategic Plan objectives of Operational Excellence and Thriving Communities, by promoting residents to engage in community life and civic activities

Respectfully submitted,

NATHAN FLETCHER Supervisor, Fourth District

Nother Atto

JOEL ANDERSON Supervisor, Second District

ATTACHMENT(S)

Legistar v1.0

4



BOARD OF SUPERVISORS

1600 PACIFIC HIGHWAY, ROOM 335, SAN DIEGO, CALIFORNIA 92101-2470

AGENDA ITEM

DATE:

January 12, 2021

10

TO:

Board of Supervisors

SUBJECT

FRAMEWORK FOR OUR FUTURE: A COLLABORATIVE, DATA-DRIVEN, AND **EQUITABLE RESPONSE TO COVID-19 IN SAN DIEGO COUNTY (DISTRICTS: ALL)**

OVERVIEW

On February 14, 2020, the San Diego County Public Health Officer issued a Declaration of Local Health Emergency, in response to the COVID-19 pandemic, one of the first counties in the nation to take such a bold action. On March 19, 2020, the State of California public health officials issued an order for anyone living in the state to stay home, except for those providing essential services.

While the San Diego County Public Health Officer has been leading the response in San Diego County in a data-driven manner, in the months since the initial stay at home order in March 2020, this Board has undertaken various activities in opposition to the COVID-19 response. The previous Board has questioned the actions of San Diego County's Public Health Officer; written letters to the Governor in opposition of Executive Orders; and some Board members have openly advocated for the defiance of State and local Public Health orders. These actions have harmed our public health response and undermined confidence in our strategy.

COVID-19 has disproportionately impacted communities of color. Current county data shows that the case rates for minority populations are significantly higher than for their white counterparts. This disparity is especially pronounced in the Hispanic or Latino community. The same disparate impact is reflected by the data showing the distribution of cases by zip code, particularly the prevalence of cases in the South Bay and Southeastern San Diego. San Diego County has made great strides engaging with the community and determining new methods to improve outreach but focus and additional resources are required to continue to improve the scope of work.

Today's actions request the San Diego County Board of Supervisors adopt a resolution to reorient and restate our County's response to COVID-19; one that adheres to a continued, data-driven response; works collaboratively, rather than antagonistically with the State; and emphasizes a more

SUBJECT: FRAMEWORK FOR OUR FUTURE: A COLLABORATIVE, DATA-

DRIVEN, AND EQUITABLE RESPONSE TO COVID-19 IN SAN DIEGO

COUNTY (DISTRICTS: ALL)

equitable response to the pandemic by prioritizing future funding using a health equity lens when appropriate.

RECOMMENDATION(S) SUPERVISOR NATHAN FLETCHER AND SUPERVISOR NORA VARGAS

- 1.) Adopt the attached resolution entitled A COLLABORATIVE, DATA-DRIVEN, AND EQUITABLE RESPONSE TO COVID-19 IN SAN DIEGO COUNTY, which outlines the science-based and equitable approach the County will pursue working in collaboration with State officials in response to the COVID-19 pandemic.
- 2.) Find that the policy statements contained in the attached resolution supersede any contradictory policy statement contained in past Board of Supervisors initiated resolutions and letters related to COVID-19.
- 3.) Direct the Chief Administrative Officer to prioritize, when appropriate, the distribution of future COVID-19 response and recovery-related federal, state, and local funding based on a data-driven approach that identifies communities requiring the highest need of support based on positive COVID-19 cases and takes into account health equity tools that measure degree of disparities.

FISCAL IMPACT

This action will not have any current fiscal impact but contemplates prioritizing with an equity lens, when appropriate, the distribution of future allocations of COVID-19 response and recovery-related federal, state, and local funding based on highest need.

BUSINESS IMPACT STATEMENT

This action will help support individuals, families and communities impacted by COVID-19.

ADVISORY BOARD STATEMENT

N/A

BACKGROUND

On February 14, 2020, the San Diego County Public Health Officer issued a Declaration of Local Health Emergency, pursuant to California Health and Safety Code Section 101080 in response to the COVID-19 pandemic, one of the first counties in the nation to take such a bold action. By taking early action, the County signified our commitment to public health and preparation for the pandemic. On March 19, 2020, the State of California public health officials issued an order for anyone living in the state to stay home, except for those providing essential services.

Community transmission of COVID-19 in San Diego County remains a central concern of San Diego County's Public Health Department. The County made significant efforts early in the pandemic to "flatten the curve," slowing down the spread of the virus, which helped to avoid an increase in the cases that overwhelm the healthcare system. For this reason, the San Diego County

SUBJECT: FRAMEWORK FOR OUR FUTURE: A COLLABORATIVE, DATA-DRIVEN, AND EQUITABLE RESPONSE TO COVID-19 IN SAN DIEGO COUNTY (DISTRICTS: ALL)

Public Health Officer continues to issue and amend Public Health Orders to enhance efforts to protect the health of the public. Despite early success, San Diego County has experienced recent surges in positive cases, often tied to people ignoring or openly defying safety measures. These actions are due in part to fatigue with the long-standing situation, but also can be attributed to the mixed messages from elected officials at all levels whose statements and actions are sometimes in direct contradiction to the Public Health Orders. This irresponsible behavior has been detrimental to our region's health and safety.

As of December 6, 2020, San Diego County, as part of the 11-county Southern California region and in response to the Intensive Care Unit (ICU) bed capacity dipping below 15 percent, was placed on a more restrictive stay at home order by the State of California. As a result of the ICU bed trigger, further restrictions on activities outside of essential ones were put in place to slow the spread of COVID-19 and ease the pressure on the region's hospital system.

As of January 2, 2021, in San Diego County, there have been 168,020 confirmed positive cases of COVID-19 and 1,592 deaths due to the virus. Hospitalized patients over the past 30 days have increased 93 percent and ICU patients over than same time have increased by 84 percent. The current capacity of the Southern California region ICU bed capacity is 0 percent.

COVID-19 has disproportionately impacted communities of color. Current county data shows that the case rates for these populations are significantly higher than for their white counterparts. This disparity is especially pronounced in the Hispanic or Latino community. As of January 2, 2021, 83,415 of COVID-19 cases, or 57.6 percent of the region's total, were individuals who identified as Hispanic or Latino, while according to estimates from the US Census, only 34.1 percent of the county's population is Hispanic or Latino. That accounts for a rate of 7,629.1 per population of 100,000. Black San Diegans, as of January 2, 2021, account for 5,067 of San Diego COVID-19 cases, a case rate of 3,007.9 per 100,000. And while Native Hawaiian/Pacific Islander individuals account for only 1.0 percent of San Diego County's total COVID-19 cases, this equates to 9,765.8 cases per population of 100,000 for that ethnicity. As a comparison, San Diego County residents identifying as white have a rate of 2,429.5 population of 100,000.

The same disparate impact is reflected by the data showing the distribution of cases by zip code, particularly the prevalence of cases in the South Bay and Southeastern San Diego.

¹ https://www.sandiegocounty.gov/content/dam/sdc/hhsa/programs/phs/Epidemiology/COVID-19%20Race%20and%20Ethnicity%20Summary.pdf

² https://www.census.gov/quickfacts/fact/table/sandiegocountycalifornia,CA/PST045219

³ https://www.sandiegocounty.gov/content/dam/sdc/hhsa/programs/phs/Epidemiology/COVID-19%20Race%20and%20Ethnicity%20Summary.pdf

⁴ https://www.sandiegocounty.gov/content/dam/sdc/hhsa/programs/phs/Epidemiology/COVID-19%20Race%20and%20Ethnicity%20Summary.pdf

⁵ https://www.sandiegocounty.gov/content/dam/sdc/hhsa/programs/phs/Epidemiology/COVID-19%20Race%20and%20Ethnicity%20Summary.pdf

SUBJECT: FRAMEWORK FOR OUR FUTURE: A COLLABORATIVE, DATA-DRIVEN, AND EQUITABLE RESPONSE TO COVID-19 IN SAN DIEGO COUNTY (DISTRICTS: ALL)

At the same time, these zip codes tend to be the areas with the most negative economic impact due to the COVID-19 pandemic. One reason is that many in these communities work in tourism and service jobs, sectors that have been particularly hard hit by the economic outcomes of the COVID-19 pandemic. While professional and business service jobs have started experiencing growth (additional 2,800 jobs between October and November 2020), there continues to be job loss in the leisure and hospitality sectors (900 additional losses during that same time period). An October 2020 report by the San Diego Association of Governments (SANDAG) noted that half of the 64,800 individuals who experienced job loss in the first six months of COVID-19 and identified as Hispanic or Latino were employed in the tourism sector. This impact is reflected in particularly high unemployment numbers in the same zip codes that have been experiencing high numbers of positive cases of COVID-19. For example, according to a recent report on the impact of the pandemic on the San Diego economy, zip codes in Logan Heights, Golden Hill, City Heights, National City, and San Ysidro had some of the highest percentage of unemployment in the region (ranging from 17.6 percent - 14.7 percent).

The reasons for the disproportionate harmful impact of COVID-19 on communities of color are myriad and include: existing health disparities exacerbated by the pandemic and related to lack of equitable health access; absence of federal support of low-wage workers, leading to economic realities that required continuing in the workplace, even if situations are unsafe; higher likelihood of working in high-contact essential jobs that cannot be carried out remotely; prevalence of people of color in job sectors such as tourism and the service industry that have not yet made an economic recovery; and inequitable distribution of resources to those most impacted. San Diego County has made great strides engaging with the community and determining new methods to improve outreach but focus and additional resources are required to continue to improve this scope of work.

While the San Diego County Public Health Officer has been leading the response in San Diego County in a data-driven manner, in the months since the initial stay at home order in March 2020, the previous Board has undertaken various activities in opposition to the COVID-19 response. This Board has questioned the actions of San Diego County's Public Health Officer; written letters to the Governor in opposition of Executive Orders; and some Board members have openly advocated for the defiance of State Public Health orders. These actions have harmed our public health response and undermined confidence in our strategy.

Furthermore, the Board has allocated funding across the region, but the emphasis has been on equal distribution rather than equitable distribution. As such, the underlying inequities are made starker.

Today's actions request the San Diego County Board of Supervisors adopt a resolution to reorient and restate our County's response to COVID-19, one that adheres to a continued, data-driven

⁶ https://www.labormarketinfo.edd.ca.gov/file/lfmonth/sand\$pds.pdf

⁷ https://sandag.org/uploads/publicationid/publicationid 4712 28193.pdf

⁸ https://www.sandag.org/uploads/publicationid/publicationid 4707 28033.pdf

SUBJECT: FRAMEWORK FOR OUR FUTURE: A COLLABORATIVE, DATA-

DRIVEN, AND EQUITABLE RESPONSE TO COVID-19 IN SAN DIEGO

COUNTY (DISTRICTS: ALL)

response, works collaboratively, rather than antagonistically with the State, and emphasizes a more equitable response to the pandemic.

Further, given the disproportionate impacts on people of color and zip codes associated with lower incomes, future COVID-19 response and recovery funding received by the County should prioritize these hardest hit areas and populations using a health equity lens when appropriate.

We urge your support.

LINKAGE TO THE COUNTY OF SAN DIEGO STRATEGIC PLAN

Today's proposed action to restate the County's response to the COVID-19 pandemic based on priorities of equity, collaboration, and data-driven science supports the Healthy Families, Safe Communities, and Operational Excellence Strategic Initiatives in the County of San Diego's 2020-25 Strategic Plan by ensuring that the response protects the health of San Diegans with a particular focus on those populations and areas of the county that are most negatively impacted by the COVID-19 pandemic.

Respectfully submitted,

NATHAN FLETCHER Supervisor, Fourth District

ATTACHMENT(S)
RESOLUTION

NORA VARGAS Supervisor, First District

on Eva

SUBJECT: FRAMEWORK FOR OUR FUTURE: A COLLABORATIVE, DATA-

DRIVEN, AND EQUITABLE RESPONSE TO COVID-19 IN SAN DIEGO

COUNTY (DISTRICTS: ALL)

AGENDA ITEM INFORMATION SHEET

REQU	IRES I	FOUR '	VOTES	:		Y	es	X	No			
WRIT'	TEN D	ISCLO	SURE	PER	COU	NTY	СНА	RTER	SECTION	1000.1	REQUIR	ED
	Yes	\boxtimes	No									

PREVIOUS RELEVANT BOARD ACTIONS:

December 8, 2020 (6) Receive Update on the COVID-19 Response, Ratify Actions, and Authorize Any Other Action Necessary to Address the COVID-19 Pandemic; November 17, 2020 (8), Receive Update on the COVID-19 Response, Ratify Actions, and Authorize any other Action Necessary to Address the COVID-19 Pandemic; October 27, 2020 (3), Receive Update on the COVID-19 Response, Ratify Actions, Adopt a Resolution, Approve Implementation of Fully Funding Capital Projects that were Put on Hold Due to the COVID-19 Pandemic, and Authorize any other Action Necessary to Address the COVID-19 Pandemic; October 13, 2020 (14), Resolution Requesting Local Consultation and the Use of Hospital Capacity Metrics for California's COVID-19 Health Order; October 13, 2020 (3), Receive Update on the COVID-19 Response, Ratify Actions and Authorize any other Action Necessary to Address the COVID-19 Pandemic; September 29, 2020 (5), Receive Update on the COVID19 Response, Ratify Actions, and Authorize any other Action Necessary to Address the COVID19 Pandemic; September 22, 2020 (2), Receive Update on Discussions with the State of California as it Relates to San Diego County's COVID-19 Metrics; September 15, 2020 (7), Receive Update on the COVID-19 Response, Ratify Actions, Receive Update on Allocation of CARES Act Funds for Testing, Tracing and Treatment, Authorize Acceptance of COVID-19 Epidemiology and Laboratory Capacity Enhancing Detecting Funding, Authorize a Single Source Contract with the University of California, San Diego, and Authorize any Actions Necessary to Address the COVID-19 Pandemic; September 15, 2020 (6), Receive Presentation of the San Diego County Region as it Relates to the Impact of the COVID-19 Pandemic; August 4, 2020 (4), Receive Update on the COVID-19 Response, Ratify Actions, Receive Update on the Costs Associated with Engaging a Third-Party Statistician, and Authorize any other Action Necessary to Address the COVID-19 Pandemic; August 4, 2020 (3), Approve Proposal for the Allocation of \$48.8 Million in CARES Act Funding, Establish Appropriations to Support Proposal Allocations, and Receive Update on the Feasibility of Funding for Testing at the United States/Mexico Border; July 7, 2020 (4), Receive Update on the COVID-19 Response, Ratify Actions and Authorize Any Other Action Necessary to Address the COVID-19 Pandemic; June 23, 2020 (4), Receive Update on the COVID-19 Response, Ratify Actions and Authorize Any Other Action Necessary to Address the COVID-19 Pandemic, and Establish Appropriations to Support Proposed Actions; June 2, 2020 (4), Receive Update On The COVID-19 Response, Ratify Actions And Authorize Any Other Action Necessary To Address The COVID-19 Pandemic; May 19, 2020 (5), Receive Update On The COVID-19 Response, Ratify Actions and Adopt a Resolution Waiving Certain Fees, and Authorize Any Other Action Necessary to Address the COVID-19 Pandemic; May 19, 2020 (19), Approve amendments to Board of Supervisors Policy G-16 and the Capital Improvement Needs Assessment (CINA) Program prioritizing County of San Diego (County) Capital projects for Fiscal Years 2020-2025; May 5, 2020 (2), Receive Update on the COVID-

SUBJECT: FRAMEWORK FOR OUR FUTURE: A COLLABORATIVE, DATA-DRIVEN, AND EQUITABLE RESPONSE TO COVID-19 IN SAN DIEGO

COUNTY (DISTRICTS: ALL)

19 Response, Ratify Actions, and Authorize Any Other Action Necessary to Address the COVID-19 Pandemic, and take the necessary steps to implement options waiving fees in Planning & Development Services and Department of Environmental Health; April 21, 2020 (2), Receive Update on the COVID-19 Response, Ratify Actions, and Authorize Any Other Action Necessary to Address the COVID-19 Pandemic; April 7, 2020 (4), Receive Update on the COVID-19 Response, Ratify Actions, Execute Leases and Licenses of Real Property, Direct Renters to be Entitled to Rent Deferral and a Moratorium on Eviction, and Authorize Any Other Action Necessary to Address the COVID-19 Pandemic; March 24, 2020 (21), Receive Update on the COVID-19 Response, Authorize the CAO to Apply for, Accept, and Execute any Grant, Gift or Revenue Agreement in Response to the COVID-19 Pandemic, and Ratify Actions Taken by the CAO, Public Health Officer, and Director of the Department of Purchasing and Contracting; March 24, 2020 (19), Protecting Tenants, Homeowners, and Small Businesses Affected by the Novel Coronavirus Pandemic in the Unincorporated Area; March 10, 2020 (2), Review and Continue Local Health Emergency and Local Emergency; February 19, 2020 (01), Ratify Proclamation of Local Emergency and Ratify Declaration of Local Health Emergency Regarding COVID-19.

BOARD P	\mathbf{OL}	ICIES	APPL	JCA	BLE
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N/A

BOARD POLICY STATEMENTS:

N/A

MANDATORY COMPLIANCE:

N/A

ORACLE AWARD NUMBER(S) AND CONTRACT AND/OR REQUISITION NUMBER(S):

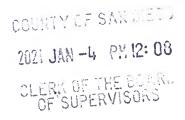
N/A

ORIGINATING DEPARTMENT: Fourth and First Districts of the Board of Supervisors

OTHER CONCURRENCE(S): N/A

CONTACT PERSON(S):

Sarah Dawe	Ruth Martin			
Name	Name			
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Phone	Phone			
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COUNTY OF SAN DIEGO

BOARD OF SUPERVISORS

1600 PACIFIC HIGHWAY, ROOM 335, SAN DIEGO, CALIFORNIA 92101-2470

AGENDA ITEM

DATE:

January 12, 2021

11

TO:

Board of Supervisors

SUBJECT

FRAMEWORK FOR OUR FUTURE: REALIGNING POLICIES THAT GOVERN COUNTY RESOURCES AND CONTRACTING (DISTRICTS: ALL)

OVERVIEW

This new Board has an opportunity to bring fiscal management, impact data, and contracting practices in-line with community priorities, improve transparency and trust while also maintaining good fiscal stewardship of County resources. We are confident by making adjustments to these functions we will be more effective and far reaching in our pursuit of healthy, safe and thriving communities while also continuing to be fiscally responsible and solvent. It is a win-win for the community and our employees.

As such, we are recommending an Advisory Committee made up of two Board members be created with county staff support, to review, assess and recommend modifications to the County's fiscal management practices, impact assessment and contracting practices. The scope of this committee would include realigning Board of Supervisors policies and County Administrative Codes that oversee these functions.

RECOMMENDATION(S) SUPERVISOR NATHAN FLETCHER AND SUPERVISOR TERRA LAWSON-REMER

- 1.) Establish an Advisory Committee to review, assess and recommend modifications to County's fiscal management approach and budget strategy, including but not limited to, realigning Board of Supervisors policies and County Administrative Code related to financial management practices, impact assessment and contracting using state and national best practices as a guide;
- 2.) Appoint Supervisor Fletcher and Supervisor Lawson-Remer to the committee;

SUBJECT: FRAMEWORK FOR OUR FUTURE: REALIGNING POLICIES THAT GOVERN COUNTY RESOURCES AND CONTRACTING (DISTRICTS: ALL)

- 3.) Direct the Chief Administrative Officer to provide staffing to support the committee;
- 4.) Report back to the Board of Supervisors regularly with progress reports and return with a final report and recommended changes in 180 days.

FISCAL IMPACT

There is no fiscal impact associated with this action. There may be future fiscal impacts associated with the final recommendations proposed by the Advisory Committee. Any such recommendations would need to return and be approved by the Board.

BUSINESS IMPACT STATEMENT

N/A

ADVISORY BOARD STATEMENT

N/A

BACKGROUND

It is incumbent on us to reset goals and expectations reflecting the new leadership at the County, including realigning policies and practices that govern the allocation of precious government resources. As such, we are recommending an Advisory Committee made up of two Board members be created with county staff support, to review, assess and recommend modifications to the County's fiscal management practices, use of impact data and contracting processes. The committee's scope would include realigning Board of Supervisors policies and County Administrative Code sections that direct these functions.

This process will be informed and guided by state and national best practices for local government financial management practices, impact assessment and contracting processes, internal and external subject matter experts and community stakeholders.

Reforms pursued by this Advisory Committee should adhere to, but not be limited to, the following guidelines:

- Increasing the focus on practices such as performance management to promote efficiency, effectiveness, and equity using measurable data-driven results to inform budget priorities and decision-making.
- Contracting considerations that do not strictly default to outsourcing but allow for more discretion by departments to determine when it's more beneficial to expand internal subject matter expertise and workforce as opposed to contracting out.
- A competitive procurement process that is transparent, including easily accessible documents about requests for proposals, bidders and awards.
- Considering budget impact analysis and impact assessment to provide greater transparency, flexibility, and program clarity.

SUBJECT: FRAMEWORK FOR OUR FUTURE: REALIGNING POLICIES THAT GOVERN COUNTY RESOURCES AND CONTRACTING (DISTRICTS: ALL)

• A risk mitigation policy that ensures healthy reserves to meet future financial obligations as well as unexpected costs in priority areas and considers setting aside reserves based on categories of risk as opposed to a percentage of total general fund expenditures.

The County's fiscal management strategy was founded over 20 years ago in response to an inherited county operation that was on the verge of bankruptcy. In response, the Board conducted a mass overhaul of its fiscal stewardship based on conservative ideologies that centered on risk aversion. Such practices led to a decrease in the role of government delivering services, promoting outsourcing whenever feasible, and maintaining questionably massive levels of reserves. Over time, this approach became more and more conservative, in some instances beyond best fiscal practices.

This new Board has an opportunity to course correct and bring fiscal management and budgeting practices in-line with our new Board and community priorities, improve transparency and trust while also maintaining good fiscal stewardship of County resources. We are confident by making adjustments to these functions we will be more effective and far reaching in our pursuit of healthy, safe and thriving communities. It is a win-win for the community and our employees.

As such, we strongly urge your support for creating an Advisory Committee with the above mentioned scope of work, appointing both of us to tackle this work, directing the CAO to assign county staff to support, and report back to the Board in 180 days with recommended changes to County's fiscal management practices and contracting policies.

LINKAGE TO THE COUNTY OF SAN DIEGO STRATEGIC PLAN

Today's proposed actions support the Strategic Initiatives of Building Better Health, Living Safely, Sustainable Environments/Thriving and Operational Excellence in the County of San Diego's Strategic Plan by ensuring that policies and practices related to County resources and contracting meet the highest priority needs of residents.

Respectfully submitted,

NATHAN FLETCHER
Supervisor Fourth District

Supervisor, Fourth District

TERRA LAWSON-REMER Supervisor, Third District

ATTACHMENT(S) N/A 2021 JAN -8 AM 8: 48
CLERK OF THE STARD
OF SUPERVISORS



SUPERVISOR, FOURTH DISTRICT
SAN DIEGO COUNTY BOARD OF SUPERVISORS

AGENDA ITEM

DATE:

January 12, 2021

12

TO:

Board of Supervisors

SUBJECT

FRAMEWORK FOR OUR FUTURE: REFORMING THE COUNTY LEGISLATIVE AGENDA (DISTRICTS: ALL)

OVERVIEW

The County's Legislative Agenda is the basis on which the Office of Strategy and Intergovernmental Affairs (OSIA) advocates on the County's behalf for local, state and federal legislation and related actions. The Legislative Agenda is made up of 1) the Legislative Program which is approved by the Board of Supervisors annually; 2) Board Legislative Policies, as outlined in Section M of the Board of Supervisors Policy Manual; and 3) any additional specific Board direction. The Legislative Agenda should reflect the values and priorities of the Board of Supervisors.

On October 27, 2020, the Board of Supervisors approved the 2021 Legislative Program. A week later, San Diegans voted in three new members of the Board of Supervisors. The voters of San Diego County have spoken, and a majority of Supervisors on the Board now represent different priorities and values than the Board of the last few decades.

The existing Legislative Agenda is made up of unwieldy documents that prioritize outdated policy initiatives that do not reflect the ideologies of the majority of the current Board of Supervisors. The Legislative Agenda should be re-framed to emphasize priorities of inclusion, equity, and fairness for all and allow staff to advocate efficiently for the County in these areas.

If approved, the recommendations in this board letter would direct the Chief Administrative Officer to suspend the 2021 Legislative Program; draft a new 2021 Legislative Agenda based on guidelines and priorities outlined in this board letter; review and calibrate the roles and responsibilities of OSIA staff and functions; modify BOS Policy M-1 and M-2 accordingly; and work with OSIA to create an annual process to review the County's future legislative programs, with a community-involved process component.

SUBJECT:

FRAMEWORK FOR OUR FUTURE: REFORMING THE COUNTY

LEGISLATIVE AGENDA (DISTRICTS: ALL)

RECOMMENDATION(S) SUPERVISOR NATHAN FLETCHER

1.) Suspend 2021 Legislative Guidelines, Priorities, and Board Legislative Policies (M-3- M-61).

- 2.) Direct the Chief Administrative Officer (CAO) to draft abbreviated guiding principles and key legislative initiatives based on priorities outlined in this board letter to serve as a new 2021 Legislative Agenda and return to the Board with the Draft Legislative Agenda for approval at the January 26, 2020 Board meeting.
- 3.) Direct the CAO to review and calibrate the roles and responsibilities of the Office of Strategy and Intergovernmental Affairs staff and functions according to the new legislative program approach focused on proactive action and nimble advocacy of adopted guiding principles and legislative priorities. These changes should be reflected in the modification of BOS Policy M-1 and M-2 and brought to the Board for approval at the next board meeting on January 26, 2020.
- 4.) Direct the CAO to work with the Office of Strategy and Intergovernmental Affairs to create an annual process to review the County's legislative program, with a component that includes a community-involved process for feedback and input and return to the Board with an updated process within 90 days.

FISCAL IMPACT

There is no fiscal impact associated with the proposed action. There will be no change in net General Fund costs and no additional staff years.

BUSINESS IMPACT STATEMENT

N/A

ADVISORY BOARD STATEMENT

N/A

BACKGROUND

The Office of Strategy and Intergovernmental Affairs (OSIA) responds to federal, state, and local legislation and related actions that may impact the County and advocates on behalf of the County for or against such actions. The roles of the OSIA are outlined in Sections M-1 and M-2 of the Board of Supervisors Policy Manual. OSIA exists within the Finance and General Government Group of the County of San Diego and under the authority of the Chief Administrative Officer (CAO). OSIA's authority to advocate is guided by the Board of Supervisors, specifically through three avenues that make up the County's Legislative Agenda. These three components are:

1. The Legislative Program (made of Sponsorship Proposals, Priority Issues, and Policy Guidelines), approved by the Board of Supervisors annually.

SUBJECT: FRAMEWORK FOR OUR FUTURE: REFORMING THE COUNTY LEGISLATIVE AGENDA (DISTRICTS: ALL)

- 2. Board Legislative Policies, Section M of the Board of Supervisors Policy Manual, which outlines legislative priorities.
- 3. Specific Board Direction, if the Board directs the OSIA to advocate on an issue.

Each year, the Board of Supervisors adopts a Legislative Program containing statements and guidance that allows the County, through the OSIA, to take positions and advocate in response to potential local, state, and federal action that could impact the County. The Legislative Program contains a legislative sponsorship platform, state and federal legislative priorities, and policy guidelines for the upcoming calendar year. These components reflect the values and policy priorities of the Supervisors.

Two of the documents included within the Legislative Program are cumulative in nature and have grown to unwieldy documents. The documents that make up the 2021 Legislative Program total 118 pages, which does not even include the Board Legislative Policies, Section M of the Board of Supervisors Policy Manual. The Legislative Program is meant to allow OSIA to respond quickly to actions that may impact the County; instead, the size and nature of these documents make it difficult for OSIA to act quickly and know what legislative priorities should take precedence.

Additionally, the existing Legislative Program has accumulated policy priorities over the past thirty years that are now outdated and reflect ideologies that are antithetical to the views of the majority of the Board of Supervisors. These policies include promoting extreme fiscal conservatism, creating higher barriers to voting, interfering with the sovereignty of local tribes, anti-state rhetoric, and excluding individuals from county services to protect against mostly unfounded fears of fraud and abuse. These policies have been the playbook for county staff to use when developing procedures, programs, and services.

On October 27, 2020, the Board of Supervisors approved the 2021 Legislative Program. A week later, San Diegans voted in three new members of the Board of Supervisors. The voters of San Diego County have spoken, and a majority of Supervisors on the Board now represent different priorities and values than the Board of the last few decades. Supervisors who had served for decades have now been replaced with new voices and perspectives on the issues.

The County's Legislative Agenda should reflect the values and priorities of the policymakers elected to govern and be the voice of the people, who, in turn, give authority to OSIA to advocate on the County's behalf. As such, it is appropriate to rethink and restructure legislative documents to reflect the Board's new direction.

While the old documents on which OSIA's authority stems are convoluted and unwieldy, instead, we should base all legislative priorities on clear and concise directives reflecting the values and priorities of the Board. These documents will act as a more efficient tool for OSIA staff to act quickly in response to legislative action that could impact the County.

If the recommendations in this Board Letter are approved, I strongly recommend including the following priorities and guiding principles in an updated Legislative Agenda.

SUBJECT:

FRAMEWORK FOR OUR FUTURE: REFORMING THE COUNTY

LEGISLATIVE AGENDA (DISTRICTS: ALL)

Statement of Values and Purpose:

The County of San Diego will actively engage in advocacy efforts in the following areas at the local, state, federal, and international levels to ensure that legislation and related actions benefit the constituents we serve while maintaining County operations.

Priorities: Direct OSIA to Act on These Priorities

- COVID-19 Response and Recovery
- Behavioral Health Services
- Homelessness
- Affordable Housing
- Environmental Justice and Protection
- Equity and Racial Justice
- Public Health Infrastructure
- Data Infrastructure
- Habitat Conservation and Climate Adaptation
- Transit Infrastructure and Low-Carbon Transportation Options

Guidelines: Overarching Principles

- Partnering Collaboratively with the State
- Work Collaboratively with the 18 Incorporated Cities
- Respect the Sovereignty of, and Work Collaboratively with, the Tribal Nations within San Diego County
- Work Collaboratively on Issues of Binational Concern with the City of Tijuana, the State of Baja California Norte, and the Country of Mexico
- Protect Fiscal Integrity of the County
- Equity in All Policies and Resource Allocation
- Community-Based Approach to Public Safety
- Government Transparency and Access to Information for All San Diegans

If approved, the recommendations in this board letter would Direct the CAO to 1) suspend the 2021 Legislative Program; 2) draft guiding principles and key legislative initiatives based on priorities outlined in this board letter to serve as a new 2021 Legislative Agenda and return to the board for approval; 3) review and calibrate the roles and responsibilities of OSIA staff and functions according to the new approach and modify BOS Policy M 1 and M 2 accordingly; and 4) work with the Office of Strategy and Intergovernmental Affairs to create an annual process to review the County's future legislative programs, with a component that includes a community-involved process for feedback and input.

The Legislative Agenda should work for the people of the county of San Diego. I urge your support to rethink and re-frame our legislative priorities to emphasize the importance of inclusion, equity and fairness for all and make staff able to advocate on the County's behalf in these areas.



COUNTY OF SAN DIEGO

BOARD OF SUPERVISORS NORA VARGAS First District

First District

JOEL ANDERSON Second District

TERRA LAWSON-REMER Third District

NATHAN FLETCHER Fourth District

JIM DESMOND

AGENDA ITEM

DATE: January 26, 2021

09

TO: Board of Supervisors

SUBJECT

ADOPT A RESOLUTION OF THE BOARD OF SUPERVISORS OF THE COUNTY OF SAN DIEGO ACCEPTING A GRANT FROM THE CALIFORNIA HEALTH FACILITIES FINANCING AUTHORITY INVESTMENT IN MENTAL HEALTH WELLNESS GRANT PROGRAM FOR CHILDREN AND YOUTH AND DESIGNATING FRED FINCH YOUTH AND FAMILY SERVICES AS CO-APPLICANT (DISTRICTS: ALL)

OVERVIEW

In 2016, Senate Bill 833 (Section 20) expanded the Investment in Mental Health Wellness Act to address a continuum of crisis services for children and youth, 21 years of age and younger. Under the Mental Health Wellness Grant Program for Children and Youth (CY Grant Program), funding is available to develop mental health services in four distinct areas, including crisis residential treatment, crisis stabilization, mobile crisis support teams and family respite care.

The California Health Facilities Financing Authority (CHFFA) is responsible for awarding and administering the CY Grant Program. Eligible applicants include California counties who apply individually or jointly with other counties, or a county that applies jointly with a nonprofit or public agency designee. Interested counties must apply as the lead grantee and may designate a private nonprofit corporation or public agency to be a co-applicant and a designated grantee. Funding can be used to support costs associated with purchase of real property, construction and renovation, furnishing and equipment, information technology, limited start-up costs, mobile crisis support team vehicles and mobile crisis support team personnel funding. Under the CY Grant program, approximately \$36.7 million of capital funding and \$2.7 million of personnel funding is available, subject to the availability of funding, and there is no maximum award amount.

Fred Finch Youth & Family Services (Fred Finch), a community-based provider and a designated private nonprofit corporation, has requested that the County of San Diego (County) Health and Human Services Agency (HHSA) apply for the CY Grant Program to purchase and renovate a 25-acre campus in an unincorporated area of El Cajon that would be dedicated to comprehensive mental health programming for youth and families. Today's actions request the San Diego County Board of Supervisors to authorize the County HHSA to jointly apply for, and if awarded, accept CY Grant Program funding of approximately \$8.4 million on behalf of the co-applicant and designated grantee, Fred Finch, to acquire and renovate the proposed property. Additionally, it

COUNTY OF SAN DIEGO ACCEPTING A GRANT FROM THE CALIFORNIA HEALTH FACILITIES FINANCING AUTHORITY

INVESTMENT IN MENTAL HEALTH WELLNESS GRANT PROGRAM FOR CHILDREN AND YOUTH AND DESIGNATING FRED FINCH YOUTH AND FAMILY SERVICES AS CO-APPLICANT (DISTRICTS:

ALL)

would result in the adoption of a resolution titled, A Resolution of the Board of Supervisors of the County of San Diego Accepting a Grant from the California Health Facilities Financing Authority Investment in Mental Health Wellness Grant Program for Children and Youth and Designating Fred Finch Youth and Family Services as Co-Applicant, and grant the County authority to enter into a Memorandum of Agreement with Fred Finch outlining requirements related to the CY Grant Program.

This action complements the ongoing work across systems to provide optimal behavioral health resources that are regionally distributed and coordinated, thereby supporting the County's *Live Well San Diego* vision for a region where all residents have the opportunity to build better health, live safely, and thrive.

RECOMMENDATION(S) CHIEF ADMINISTRATIVE OFFICER

- 1. Find that the proposed project is exempt from the California Environmental Quality Act (CEQA) pursuant to Section 15061(b)(3) of the State CEQA Guidelines and require that any future approvals be contingent upon CEQA compliance.
- 2. Waive the requirement in Board Policy B-29 requiring that grant applications be presented to the Board 15 days before they are due.
- 3. Authorize the Agency Director, Health and Human Services Agency or their designee, to apply for, and if awarded, accept a grant from the California Health Facilities Financing Authority Investment in Mental Health Wellness for Children and Youth, in partnership with the co-applicant and designated Grantee, Fred Finch, in the amount of approximately \$8.4 million.
- 4. Adopt a resolution entitled:
 - A RESOLUTION OF THE BOARD OF SUPERVISORS OF THE COUNTY OF SAN DIEGO ACCEPTING A GRANT FROM THE CALIFORNIA HEALTH FACILITIES FINANCING AUTHORITY INVESTMENT IN MENTAL HEALTH WELLNESS GRANT PROGRAM FOR CHILDREN AND YOUTH AND DESIGNATING FRED FINCH YOUTH AND FAMILY SERVICES AS COAPPLICANT.
- 5. Authorize the Agency Director, Health and Human Services Agency or their designee, to act on the County of San Diego's behalf respective to the grant and, upon successful negotiation, to sign certifications, Standard Agreements with the State of California, related documents, forms, reports, and amendments, and to take any other action required for administration and implementation of the grant.

SUBJECT: ADOPT A RESOLUTION OF THE BOARD OF SUPERVISORS OF THE COUNTY OF SAN DIEGO ACCEPTING A GRANT FROM THE CALIFORNIA HEALTH FACILITIES FINANCING AUTHORITY INVESTMENT IN MENTAL HEALTH WELLNESS GRANT PROGRAM FOR CHILDREN AND YOUTH AND DESIGNATING FRED FINCH

FOR CHILDREN AND YOUTH AND DESIGNATING FRED FINCH YOUTH AND FAMILY SERVICES AS CO-APPLICANT (DISTRICTS:

ALL)

6. Authorize the Agency Director, Health and Human Services Agency or their designee, upon successful negotiations and in consultation with the Department of General Services, to execute a Memorandum of Agreement (MOA) between the County of San Diego and Fred Finch Youth and Family Services to implement the CHFFA program, and to amend the agreement subject to changing service needs and funding requirements, subject to the approval of the Agency Director, Health and Human Services Agency.

FISCAL IMPACT

There is no fiscal impact associated with this action as the entire grant will go to the co-applicant and designated Grantee, Fred Finch Youth & Family Services (Fred Finch), in the amount of approximately \$8.4 million. The one-time grant funding totaling approximately \$8.4 million will be used by Fred Finch for capital costs, including the purchase of the property estimated at \$7.5 million, renovations estimated at \$0.4 million and start-up costs estimated at \$0.5 million. There will be no change in net General Fund cost and no additional staff years.

BUSINESS IMPACT STATEMENT

N/A

ADVISORY BOARD STATEMENT

This item was presented to the Behavioral Health Advisory Board as an informational item on January 7, 2021. This item was presented to the Child and Family Strengthening Advisory Board as an informational item on January 8, 2021.

BACKGROUND

In 2016, Senate Bill 833 (Section 20) expanded the Investment in Mental Health Wellness Act to address a continuum of crisis services for children and youth, 21 years of age and younger. Under the Mental Health Wellness Grant Program for Children and Youth (CY Grant Program) funding is available to develop mental health services in four distinct areas, including crisis residential treatment, crisis stabilization, mobile crisis support teams and family respite care.

The California Health Facilities Financing Authority (CHFFA) is responsible for awarding and administering the CY Grant Program. Eligible applicants include California counties who apply individually or jointly with other counties, or a county that applies jointly with a nonprofit or public agency designee. Interested counties must apply as the lead grantee and may designate a private nonprofit corporation or public agency to be a co-applicant and a designated grantee. Funding can be used to support costs associated with purchase of real property, construction and renovation, furnishing and equipment, information technology, limited start-up costs, mobile crisis support team vehicles and mobile crisis support team personnel funding. Under the CY Grant program, approximately \$36.7 million of capital funding and \$2.7 million of personnel funding is available, subject to the availability of funding, and there is no maximum award amount.

COUNTY OF SAN DIEGO ACCEPTING A GRANT FROM THE CALIFORNIA HEALTH FACILITIES FINANCING AUTHORITY INVESTMENT IN MENTAL HEALTH WELLNESS GRANT PROGRAM

FOR CHILDREN AND YOUTH AND DESIGNATING FRED FINCH YOUTH AND FAMILY SERVICES AS CO-APPLICANT (DISTRICTS:

ALL)

Fred Finch Youth & Family Services (Fred Finch), a community-based provider and a designated private nonprofit corporation, has requested that the County of San Diego (County) Health and Human Services Agency (HHSA) apply for CY Grant Program to purchase and renovate a 25-acre campus, originally constructed as a residential treatment facility, in an unincorporated area of El Cajon that would be dedicated to comprehensive mental health programming for youth and families. The proposed property includes 33,000 square feet of building space, encompassing one administrative building, additional buildings for educational and recreational activities, and five residential domiciles. The residential domiciles will be converted into three crisis residential treatment units each housing four to six clients at a time, with the remaining two housing an existing short-term residential therapeutic program which will be expanded from 12 to 16 beds. As required by the CY Grant Program, the County is required to apply as the lead grantee and Fred Finch would serve as the designated grantee and co-applicant. Fred Finch provides a variety of services countywide that support the behavioral health continuum of care, including programming for youth and families impacted by intellectual disability and serious emotional disturbance. Additionally, Fred Finch currently partners with HHSA Child Welfare Services, Behavioral Health Services, and the County Probation department as a provider for the child and family team facilitation services.

If awarded, the CY Grant would provide capital funding for Fred Finch to develop a safe, secure, crisis residential treatment center to address immediate behavioral health stressors and symptoms that youth and their families experience. Additionally, Fred Finch will develop robust aftercare and follow-up protocols to ensure youth are served in the least restrictive clinical setting. The goal would be to provide youth who are in crisis with behavioral stabilization services to ensure they are able to quickly return to their natural caregiver environments.

Establishing a crisis residential treatment center for youth is anticipated to reduce the current level of acuity, alleviate crisis, and utilize accurate diagnostic information to inform short-term behavioral intervention plans and discharge planning in order to reduce crisis recurrence, successfully transition youth to a lower level of care, and reduce subsequent need for intensive levels of care. The campus would provide comprehensive assessment, evaluation, and continued care planning for youth with intellectual and developmental disabilities, psychiatric and behavioral health conditions, and complex care needs. Today's actions request the San Diego County Board of Supervisors to authorize the County HHSA to apply for and, if awarded, accept CY Grant Program funding of approximately \$8.4 million on behalf of the co-applicant and designated grantee, Fred Finch, to acquire and renovate the proposed property. Additionally, it would grant the County authority to enter into a Memorandum of Agreement with Fred Finch, outlining requirements related to the CY Grant Program.

COUNTY OF SAN DIEGO ACCEPTING A GRANT FROM THE CALIFORNIA HEALTH FACILITIES FINANCING AUTHORITY

INVESTMENT IN MENTAL HEALTH WELLNESS GRANT PROGRAM FOR CHILDREN AND YOUTH AND DESIGNATING FRED FINCH YOUTH AND FAMILY SERVICES AS CO-APPLICANT (DISTRICTS:

ALL)

This action complements the ongoing work across systems to provide optimal behavioral health resources that are regionally distributed and coordinated, thereby supporting the County's *Live Well San Diego* vision for a region where all residents have the opportunity to build better health, live safely, and thrive.

ENVIRONMENTAL STATEMENT

The request for approval to apply for and accept grant funding is exempt from the California Environmental Quality Act (CEQA) pursuant to Section 15061(b)(3) of the CEQA Guidelines. Section 15061(b)(3) of the CEQA Guidelines provides that a project is exempt from CEQA review where "it can be seen with certainty that there is no possibility the activity in question may have a significant effect on the environment...". The proposed action seeks to authorize application for and acceptance of CHFFA grant funds to offset costs to develop and implement a future project. Since the action involves delegation of authority to seek and accept grant funding, which is an administrative activity, the action is exempt from CEQA review because it can be seen with certainty that the activity will not have a significant effect on the environment. If funded, the project will be required to comply with CEQA prior to project implementation. CEQA analysis for the site to be acquired and refurbished by Fred Finch Youth & Family Services, as may be necessary, will not be complete prior to deadline for submitting the grant application.

LINKAGE TO THE COUNTY OF SAN DIEGO STRATEGIC PLAN

Today's proposed actions support the Building Better Health and Living Safely Initiatives in the County of San Diego's 2021-2026 Strategic Plan as well as the County's *Live Well San Diego* vision, by ensuring that vulnerable populations of individuals with mental illness and substance use disorders continue to have access to a comprehensive continuum of behavioral health services administered through accessible behavioral health programs.

Respectfully submitted,

HELEN N. ROBBINS-MEYER Chief Administrative Officer

ATTACHMENT(S)

Attachment A - A Resolution of the Board of Supervisors of The County of San Diego Accepting a Grant from the California Health Facilities Financing Authority Investment in Mental Health Wellness Grant Program for Children and Youth and Designating Fred Finch Youth and Family Services as Co-Applicant

COUNTY OF SAN DIEGO ACCEPTING A GRANT FROM THE CALIFORNIA HEALTH FACILITIES FINANCING AUTHORITY

INVESTMENT IN MENTAL HEALTH WELLNESS GRANT PROGRAM FOR CHILDREN AND YOUTH AND DESIGNATING FRED FINCH YOUTH AND FAMILY SERVICES AS CO-APPLICANT (DISTRICTS:

ALL)

E-mail

AGENDA ITEM INFORMATION SHEET

REQUIRES FOUR VOTES:		Yes	\boxtimes	No		
WRITTEN DISCLOSURE PER © ☐ Yes ⊠ No	COUN	ТҮ СН	ARTE	R SECTION 1000.1 REQUIRED		
PREVIOUS RELEVANT BOAF	RD AC	TIONS	•			
BOARD POLICIES APPLICAE N/A	BLE:					
	the Din	pursuing	g even	oral Health Services, certifies that the if funding were not available because need.		
	l Finch	olicable	to the l	ly Services will pursue this program in Investment in Mental Health Wellness		
ORACLE AWARD NUMBER(S NUMBER(S): N/A	S) ANI	O CONT	TRACT	AND/OR REQUISITION		
ORIGINATING DEPARTMEN	T: Hea	alth and	Human	Services Agency		
OTHER CONCURRENCE(S): Department of General Services						
CONTACT PERSON(S):						
Dr. Luke Bergmann			Kimb	erly Giardina		
Name			Name			
(619) 563-2765				616-5815		
Phone			Phone			
Luke.Bergmann@sdcounty.ca.gov			Kımb	erly.Giardina@sdcounty.ca.gov		

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E-mail

Resolution No. Meeting Date: 01/26/21

A RESOLUTION OF THE BOARD OF SUPERVISORS OF THE COUNTY OF SAN DIEGO ACCEPTING A GRANT FROM THE CALIFORNIA HEALTH FACILITIES FINANCING AUTHORITY INVESTMENT IN MENTAL HEALTH WELLNESS GRANT PROGRAM FOR CHILDREN AND YOUTH AND DESIGNATING FRED FINCH YOUTH AND FAMILY SERVICES AS CO-APPLICANT

WHEREAS, The County of San Diego Behavioral Health Services (BHS) provides integrated mental health and alcohol and other drug services to children, youth, adults, and older adults; and

WHEREAS, crisis services are provided by BHS and are extremely important for avoiding hospitalization, maintaining clients in the least restrictive environment, and reducing pressure on emergency rooms and law enforcement; and

WHEREAS, the shortage of these services in a centralized location represent a service gap in the county; and

WHEREAS, Fred Finch Youth and Family Services is a nonprofit community-based service organization providing services to youth with mental and intellectual disabilities; and

WHEREAS, in 2013, the California State Legislature passed the Investment in Mental Health Wellness Act, under the auspices of which the California Health Facilities Financing Authority (CHFFA) established a new grant program to disburse funds to California Counties for the purpose of developing mental health crisis support programs; and

WHEREAS, in January 2021, BHS will submit an application along with Fred Finch Youth and Family Services for grant funds for the purpose of acquiring and refurbishing property to develop a facility to care for children with mental and intellectual disabilities and will seek nearly \$8.5 million.

ATTACHMENT A

NOW, THEREFORE, IT IS HEREBY RESOLVED that the Board of Supervisors of the

County of San Diego authorizes the Director, Health and Human Services Agency or

designee to apply with designated nonprofit organization Fred Finch Youth and Family

Services for a grant from CHFFA, and to accept or participate with Fred Finch Youth and

Family Services in accepting funding if awarded acceptance of funding in an amount not to

exceed \$8.5 million;

IT IS FURTHER RESOLVED, that the Agency Director, Health and Human Services

Agency or his designee is authorized to act on the County's behalf respective to the grant

and to sign upon successful negotiations related certifications, memoranda of understanding,

documents, forms, reports, or to take any other action required for administration and

implementation of the grant.

IT IS FURTHER RESOLVED, that Fred Finch must comply with all federal, state,

and local laws, including any requirements under the California Environmental Quality Act

or associated regulations as necessary.

APPROVED AS TO FORM AND LEGALITY

COUNTY COUNSEL

By: David Stotland, Senior Deputy County Counsel

37



COUNTY OF SAN DIEGO

BOARD OF SUPERVISORS NORA VARGAS First District

First District

JOEL ANDERSON Second District

TERRA LAWSON-REMER Third District

NATHAN FLETCHER Fourth District

JIM DESMOND

AGENDA ITEM

DATE: January 26, 2021

10

TO: Board of Supervisors

SUBJECT

AUTHORIZE PROCUREMENT OF A SINGLE SOURCE CONTRACT WITH ICF INTERNATIONAL FOR FAMILY FIRST PREVENTION SERVICES ACT (FFPSA) IMPLEMENTATION AND CAPACITY BUILDING TECHNICAL ASSISTANCE SERVICES (DISTRICTS: ALL)

OVERVIEW

On February 9, 2018, the Family First Prevention Services Act (FFPSA) was signed into law as part of Public Law (P.L.) 115-123. FFPSA paves the way for a family strengthening, prevention-focused infrastructure intended to enhance supportive services for families to help keep children safely at home, reduce the reliance on and use of congregate care, and expand the capacity and use of kinship care and family-based settings to support children and families. FFPSA significantly changed the methodology and practice of the federal funding distribution of Title IV-E and Title IV-B of the Social Security Act. For the first time, child welfare systems can utilize Title IV-E funding to pay for services to prevent children from entering or re-entering foster care. Child welfare systems must ensure alignment with the new FFPSA federal child welfare requirements prior to receiving federal prevention funding.

ICF International (ICF) provides FFPSA capacity building services nationally, to all states, on behalf of the Children's Bureau. In November 2019, ICF International (ICF) was awarded a 5-year contract through a competitive procurement from the Department of Health and Human Services, Administration for Children and Families. The resources provided by ICF will assist in service development relevant to the specific requirements of FFPSA and direct technical support to states, territories, and local jurisdictions in planning for FFPSA implementation. ICF technical assistance services include but are not limited to:

- Web-based trainings and audio and visual presentations;
- Access to products, tools, and publications for improving practice and performance;
- Peer networking activities; and
- Tailored consultations and evaluations.

ICF is uniquely positioned to provide the same services at the local level to the County of San Diego (County) Health and Human Services Agency, Child Welfare Services (CWS). If approved,

SUBJECT: AUTHORIZE PROCUREMENT OF A SINGLE SOURCE CONTRACT

WITH ICF INTERNATIONAL FOR FAMILY FIRST PREVENTION SERVICES ACT (FFPSA) IMPLEMENTATION AND CAPACITY BUILDING TECHNICAL ASSISTANCE SERVICES (DISTRICTS: ALL)

today's action will authorize the Director of Purchasing and Contracting to enter into negotiations, on behalf of CWS, with ICF for direct implementation and capacity building technical assistance to ensure alignment with the new FFPSA federal child welfare requirements and achieve better outcomes for children, youth and families in San Diego County. This action supports the County's *Live Well San Diego* vision by furthering efforts to support the well-being of vulnerable children by delivering strategies that improve the safety, permanency, and well-being of children, youth, and families.

RECOMMENDATION(S) CHIEF ADMINISTRATIVE OFFICER

In accordance with Board Policy A-87, Competitive Procurement, and Administrative Code section 401, approve and authorize the Director, Department of Purchasing and Contracting to enter into negotiations with ICF, and subject to successful negotiations and a determination of fair and reasonable price, award a contract for the Family First Prevention Services Act implementation and capacity building technical assistance services, for the period of up to one year and up to four option years, and up to six additional months if needed, pending availability of funds, and to amend the contract as needed to reflect changes in services and funding.

FISCAL IMPACT

Funds for this request are not included in the Fiscal Year 2020-22 Operational Plan in the Health and Human Services Agency (HHSA). If approved, this request will result in costs and revenue of approximately \$190,000 in Fiscal Year 2020-21, costs and revenue of approximately \$460,000 in Fiscal Year 2021-22, and costs and revenue of approximately \$225,000 in Fiscal Year 2022-23 with an overall agreement of approximately \$1,000,000 through Fiscal Year 2023-24. HHSA will use existing available appropriations. The funding sources are Social Services Administrative Revenues, Realignment, and Family First Transition Act funding once received. There will be no change in net General Fund cost and no additional staff years.

BUSINESS IMPACT STATEMENT

N/A

ADVISORY BOARD STATEMENT

This item was presented to the Child and Family Strengthening Advisory Board as an informational item on November 13, 2020.

BACKGROUND

On February 9, 2018, the Family First Prevention Services Act (FFPSA) was signed into law as part of Public Law (P.L.) 115-123. FFPSA paves the way for a family strengthening, prevention-focused infrastructure intended to enhance supportive services for families to help keep children safely at home, reduce the reliance on and use of congregate care, and expand the capacity and use of kinship care and family-based settings to support children and families. FFPSA significantly changed the methodology and practice of federal funding distribution of Title IV-E and Title IV-B of the Social Security Act. For the first time, child welfare systems can utilize Title IV-E funding to pay for mental health, substance abuse, or parenting services to prevent children from entering

SUBJECT: AUTHORIZE PROCUREMENT OF A SINGLE SOURCE CONTRACT WITH ICF INTERNATIONAL FOR FAMILY FIRST PREVENTION SERVICES ACT (FFPSA) IMPLEMENTATION AND CAPACITY BUILDING TECHNICAL ASSISTANCE SERVICES (DISTRICTS: ALL)

or re-entering foster care. Prior to FFPSA, Title IV-E funds could only be used to help with the cost of foster care maintenance payments for eligible children, administration expenses to manage the program, training for staff and caregivers, adoption assistance, and kinship guardianship assistance.

The expanded services available under FFPSA helps to prevent children from entering or reentering the foster care system. Services can be provided to parents, caregivers, and children/youth. Under FFPSA, services provided must be evidence-based and be approved by a Federal Clearinghouse, an organization that reviews and rates the research and effectiveness of programs and services in support of the FFPSA purpose. In addition to expanding funding for prevention services, FFPSA also places new requirements on reducing congregate care placements and increasing supports for children in foster care to live in kinship and community family settings. To maximize the revenue available for prevention services, child welfare systems must be able to ensure alignment with the new FFPSA federal child welfare requirements. The alignment with the FFPSA federal child welfare requirements must be met prior to receiving federal prevention funding.

One of the key priorities for the Children's Bureau, an Office of the Department of Health and Human Services, Administration for Children and Families (ACF) is FFPSA implementation assistance. In November 2019, ICF International (ICF) was awarded a contract from the Children's Bureau through a competitive procurement process to develop the first-ever national Child Welfare Capacity Building Center for States. ICF is a global consulting and technology services company that works with governments and nonprofits to help strengthen communities, families, and citizens by delivering evidence-based solutions with measurable impact. ICF offers an array of resources, events, and services designed to help jurisdictions meet federal laws and requirements, achieve their goals, and improve child welfare practice. The new Child Welfare Capacity Building Center for States offers a comprehensive array of training, technical support, and implementation services to state and territorial child welfare systems that focus on improving the practice and administration of agency programs. ICF helps jurisdictions deepen their understanding of organizational performance and delivers effective strategies that improve the safety, permanency, and well-being of children, youth and families. ICF has already delivered these unique capacity building services to fifty-four jurisdictions. ICF technical assistance services include but are not limited to:

- Web-based trainings and audio and visual presentations;
- Access to products, tools, and publications for improving practice and performance;
- Peer networking activities; and
- Tailored consultations and evaluations.

Today's action requests the San Diego County Board of Supervisors (Board) to authorize an exception to competitive procurement for FFPSA implementation and capacity building technical assistance, in accordance with Board Policy A-87, Competitive Procurement, and to award a contract to ICF for up to one year and up to four option years and an additional six months if needed, and to amend the contract as needed to reflect changes in services and funding, subject to

SUBJECT: AUTHORIZE PROCUREMENT OF A SINGLE SOURCE CONTRACT WITH ICF INTERNATIONAL FOR FAMILY FIRST PREVENTION SERVICES ACT (FFPSA) IMPLEMENTATION AND CAPACITY

BUILDING TECHNICAL ASSISTANCE SERVICES (DISTRICTS: ALL)

the availability of funds and subject to approval of the Agency Director, Health and Human Services Agency (HHSA).

ICF's working relationship with the federal ACF and exclusive role as the national service provider for the Child Welfare Capacity Building Center for States uniquely positions them to assist in the implementation of FFPSA in San Diego County. ICF's expertise in federal regulations is especially critical for San Diego County as it seeks to successfully implement FFPSA. This qualifies as an Exception to the Competitive Procurement Board Policy A-87 Section D.3, "Single Source: The procurement is for services from a provider with unique knowledge, skill, or ability not available from other sources."

If approved, ICF will deliver the following services to HHSA, applicable county departments, and Child Welfare Services contracted community providers who will be eligible to receive FFPSA funding for services provided to children in foster care or who are candidates for foster care, and their families:

- Strategic planning and consultation for FFPSA alignment to federal child welfare requirements;
- FFPSA countywide plan development and implementation; and
- Coaching and training on evidence-based solutions and effective prevention and family strengthening strategies.

FFPSA has provided an unprecedented opportunity to transform child welfare systems and accelerate efforts in the establishment of a prevention-focused infrastructure to help children and families. Entering into negotiations with ICF for direct implementation and capacity building technical assistance will ensure that services are provided in a manner that will maximize draw down of available federal revenue to support child and family programs and ensure alignment with the new FFPSA federal child welfare requirements.

The amount of the contract is approximately \$1,000,000 from Fiscal Year 2020-21 through 2023-24. Pricing is determined fair and reasonable based on current public policy implementation assistance provided at the state and local level and compared with an analysis of costs if the County of San Diego were to provide these services. The anticipated start date of the contract is March 1, 2021, subject to successful negotiations and a determination of fair and reasonable price.

LINKAGE TO THE COUNTY OF SAN DIEGO STRATEGIC PLAN

This action supports the Building Better Health and Living Safely initiatives in the County of San Diego's 2021-2026 Strategic Plan by ensuring families are provided with family strengthening services and supports, and that all children and families are healthy, safe, and thriving.



COUNTY OF SAN DIEGO

BOARD OF SUPERVISORS NORA VARGAS

JOEL ANDERSON Second District

TERRA LAWSON-REMER Third District

NATHAN FLETCHER Fourth District

> JIM DESMOND Fifth District

AGENDA ITEM

DATE: **January 26, 2021** 11

TO: **Board of Supervisors**

SUBJECT

AUTHORIZE COMPETITIVE SOLICITATIONS AND AMENDMENTS TO EXTEND EXISTING BEHAVIORAL HEALTH SERVICES CONTRACTS, AUTHORIZE A REQUEST FOR STATEMENT OF QUALIFICATIONS, SINGLE SOURCE PROCUREMENTS AND AMENDMENTS FOR AUGMENTED SERVICES PROGRAMS, AUTHORIZE EXECUTION OF REVENUE AGREEMENT WITH THE STATE DEPARTMENT OF REHABILITATION, AND RATIFY BEHAVIORAL HEALTH SERVICES PERFORMANCE CONTRACT AGREEMENT WITH THE **STATE (DISTRICTS: ALL)**

OVERVIEW

In a series of actions since 1999, the San Diego County Board of Supervisors (Board) approved initiatives to redesign and implement an expanded continuum of comprehensive behavioral health care for children, adolescents, transition age youth, adults, older adults, and families. The County of San Diego (County) Health and Human Services Agency (HHSA) Behavioral Health Services (BHS) department provides a comprehensive array of community-based mental health and substance use disorder services through contracts with local public and private agencies to vulnerable populations, including individuals who are experiencing homelessness, individuals with justice involvement, and children and youth with complex behavioral health conditions. In pursuit of these initiatives, the Board previously approved the procurement of these critical services.

As the County continues to evaluate and address the impact of the novel coronavirus (COVID-19), BHS remains focused on maintaining continuity of critical mental health and substance use disorder services to the most vulnerable individuals and families within the community. BHS is committed to delivering impactful and equitably distributed essential services throughout the region, through enhanced data governance and integration of data systems which support the measurement of impactful, evidence-based outcomes, and responsible fiscal stewardship.

Approval of today's recommended actions authorizes competitive solicitations and amendments to extend existing behavioral health services contracts, including single source contracts, to sustain critical behavioral health services. Approval of today's recommended actions will also authorize a Request for Statement of Qualifications (RFSQ) and to subsequently award contracts to expand augmented services program (ASP) capacity; and in support of COVID-19 surge

capacity needs, authorize one or more single source procurements for ASPs, and amendments to existing ASP contracts to expand ASP capacity.

Additionally, today's action request the Board authorize a revenue agreement with the State of California, Department of Rehabilitation for mental health employment services. Also, today's action request the Board authorize ratification of the Fiscal Year (FY) 2020-21 Performance Contract Agreement with the California Department of Health Care Services to provide public mental health services throughout the county. These recommended actions support the continuation of critical work to advance the Behavioral Health Continuum of Care in alignment with Board direction.

Today's action supports the County's *Live Well San Diego* vision by ensuring access to services, promoting health and well-being in children, adults, and families, and encouraging self-sufficiency, which together promote a region which is building better health, living safely, and thriving.

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 behavioral health services including clubhouse services, housing support services, assisted outpatient treatment and evaluation services, outpatient mental health services, onsite care coordination and case management, and homeless outreach workers services, and upon successful negotiations and determination of a fair and reasonable price, award contracts for an initial term of up to one year, with one to four option years, 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 Agency Director, Health and Human Services Agency.
- 2. In accordance with Board Policy A-87, Competitive Procurement, and Administrative Code Section 401, authorize the Director, Department of Purchasing and Contracting, subject to successful negotiations and a determination of a fair and reasonable price, to amend the contracts listed in Attachment A, Table 1 extending the contract term up to June 30, 2022, and up to an additional six months if needed; expand services, subject to the availability of funds; and amend the contracts as required in order to reflect changes to services and funding allocations, subject to the approval of the Agency Director, Health and Human Services Agency.

- 3. In accordance with Board Policy A-87, Competitive Procurement, and Administrative Code Section 401, authorize the Director, Department of Purchasing and Contracting, subject to successful negotiations and a determination of a fair and reasonable price, to amend the single source contracts listed in Attachment A, Table 2 extending the contract term up to June 30, 2022, and up to an additional six months if needed; expand services, subject to the availability of funds; and amend the contracts as required in order to reflect changes to services and funding allocations, subject to the approval of the Agency Director, Health and Human Services Agency.
- 4. In accordance with Section 401, Article XXIII of County Administrative Code, Authorize the Director, Department of Purchasing to issue a Request for Statement of Qualifications (RFSQ) for augmented services programs (ASPs) and re-release the RFSQ, as needed, and upon successful negotiations and determination of fair and reasonable price, award contracts for a term of one year with up to four option years, and 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 Agency Director, Health and Human Services Agency.
- 5. Authorize the expansion of augmented services programs (ASPs) to support COVID-19 surge capacity needs, through the following actions:
 - a. In accordance with Board Policy A-87, Competitive Procurement, approve and authorize the Director, Department of Purchasing and Contracting, enter into negotiations with ASP providers, and subject to successful negotiations and determination of a fair and reasonable price, enter into one or more single source contracts for an initial term of up to one year, with up to four option years, 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 Agency Director, Health and Human Services Agency.
 - b. In accordance with Board Policy A-87, Competitive Procurement, and Administrative Code Section 401, authorize the Director, Department of Purchasing and Contracting, subject to successful negotiations and a determination of a fair and reasonable price, to amend existing ASP contracts listed in Attachment A Table 3, if needed, to reflect changes in program, funding or service requirements, subject to the availability of funds and approval of the Agency Director, Health and Human Services Agency.

- 6. In accordance with Board Policy B-29, authorize the Director, Health and Human Services Agency, upon receipt, to execute the Cooperative Agreement with the State Department of Rehabilitation for mental health employment services for Fiscal Years 2021-22 through 2023-24, amendments thereto, and in agreements and amendments in future years, provided terms, conditions, program services and funding are not materially impacted or altered.
- 7. Approve and authorize the Clerk of the Board to ratify the Fiscal Year 2020-21 Performance Contract Agreement with the California Department of Health Care Services, amendments thereto, and future years' Agreement and amendments, provided terms, conditions, and funding are not materially impacted, subject to the approval of the Director, Health and Human Services Agency.

FISCAL IMPACT

Funds for this request are included in the Fiscal Year 2020-22 Operational Plan in the Health and Human Services Agency. If approved, today's recommendations will result in approximate costs and revenue of \$0.9 to \$1.3 million in Fiscal Year 2020-21 and \$175.2 to \$183.3 million in Fiscal year 2021-22. There will be no change in net General Fund cost and no additional staff years.

Recommendation #1: Authorization to Issue Competitive Solicitations

If approved, this request will result in estimated costs and revenue ranging from \$20.9 to \$27.9 million in Fiscal Year 2021-22 and \$21.2 to \$28.2 million in Fiscal Year 2022-23. The funding sources are Short-Doyle Medi-Cal, Drug Medi-Cal, Projects for Assistance in Transition from Homelessness (PATH), State General Funds, Mental Health Services Act (MHSA) and Realignment. There will be no change in net General Fund cost and no additional staff years.

Recommendations #2 & #3: Authorization to Extend and Amend Contracts

If approved, this request will result in estimated costs and revenue of \$150.3 million in Fiscal Year 2021-22. The funding sources are, Short-Doyle Medi-Cal, Drug Medi-Cal, Substance Abuse Block Grant (SABG), State General Funds, Mental Health Services Act (MHSA) and Realignment. There will be no change in net General Fund cost and no additional staff years.

Recommendation #4: Authorization to Issue a Request for Statement of Qualifications and Award Contracts for Augmented Services Programs

If approved, this request will result in estimated costs and revenue ranging from \$1.4 to \$1.8 million in Fiscal Year 2021-22. The funding sources are Mental Health Services Act (MHSA) and Realignment. There will be no change in net General Fund cost and no additional staff years.

SUBJECT:

AUTHORIZE COMPETITIVE SOLICITATIONS AND AMENDMENTS TO EXTEND EXISTING BEHAVIORAL HEALTH SERVICES CONTRACTS, AUTHORIZE A REQUEST FOR STATEMENT OF QUALIFICATIONS, SINGLE SOURCE PROCUREMENTS AND AMENDMENTS FOR AUGMENTED SERVICES PROGRAMS, AUTHORIZE EXECUTION OF REVENUE AGREEMENT WITH THE STATE DEPARTMENT OF REHABILITATION, AND RATIFY BEHAVIORAL HEALTH SERVICES PERFORMANCE CONTRACT AGREEMENT WITH THE STATE (DISTRICTS: ALL)

Recommendations #5 a & b: Authorization to Execute Single Source Contracts and Amend Existing Augmented Services Program Contracts to Expand Capacity in Support COVID-19 Surge Needs

If approved, this request will result in estimated costs and revenue ranging from \$0.9 to \$1.3 million in Fiscal Year 2020-21 and \$2.2 - 2.9 million in Fiscal Year 2021-22. The funding sources are Mental Health Services Act (MHSA) and Realignment. There will be no change in net General Fund cost and no additional staff years.

Recommendation #6: Execute a Cooperative Agreement with the State Department of Rehabilitation for Mental Health Employment Services

If approved, this request will result in estimated costs and revenue of \$0.4 million in Fiscal Year 2021-22. The funding source is Realignment. There will be no change in net General Fund cost and no additional staff years.

Recommendation #7: Ratify the Performance Contract Agreement with the State Department of Health Care Services

There is no fiscal impact from this action. There will be no change in net General Fund cost and no additional staff years.

BUSINESS IMPACT STATEMENT

N/A

ADVISORY BOARD STATEMENT

At their meeting on January 7, 2021, the Behavioral Health Advisory Board voted to support these recommendations.

BACKGROUND

In a series of actions since 1999, the San Diego County Board of Supervisors (Board) approved initiatives to redesign and implement an expanded continuum of comprehensive behavioral health care for children, adolescents, transition age youth, adults, older adults, and families. The County of San Diego (County), Health and Human Services Agency (HHSA) Behavioral Health Services (BHS) department provides a comprehensive array of community-based mental health and substance use disorder (SUD) services through contracts with local public and private agencies to vulnerable populations, including individuals who are experiencing homelessness, individuals with justice involvement, and children and youth with complex behavioral health conditions. In pursuit of these initiatives, the Board approved the procurement of these critical services.

As the County continues to evaluate and address the impact of the novel coronavirus (COVID-19), BHS remains focused on maintaining continuity of essential mental health and substance use disorder services to the most vulnerable individuals and families within the community. BHS is committed to delivering impactful and equitably distributed essential services throughout the region, through enhanced data governance and integration of data systems which support the measurement of impactful, evidence-based outcomes, and responsible fiscal stewardship.

Approval of today's recommended actions authorizes competitive solicitations and amendments to extend existing behavioral health services contracts, including single source contracts, to sustain critical behavioral health services. Additionally, approval of today's recommended actions will also authorize a Request for Statement of Qualifications (RFSQ) and to subsequently award contracts to expand augmented services program (ASP) capacity; and in support of COVID-19 surge capacity needs, authorize one or more single source procurements for ASPs, and amendments to existing ASP contracts to expand ASP capacity.

Also, today's action will authorize a revenue agreement with the State of California, Department of Rehabilitation for mental health employment services. Additionally, today's action authorizes the ratification of the Fiscal Year (FY) 2020-21 Performance Contract Agreement with the California Department of Health Care Services to provide public mental health services throughout the county.

These recommended actions support the continuation of critical work to advance the Behavioral Health Continuum of Care in alignment with Board direction. All contracts are contingent upon the availability of funding, successful negotiations, and determination of a fair and reasonable price.

Recommendation #1: Authorization to Issue Competitive Solicitations

If this recommendation is approved, competitive solicitations will be issued and contracts will be awarded for the critical behavioral health services, as outlined below:

a. Clubhouse Services – (Approximate Cost: \$2.2 - \$3.0 million)

On January 13, 2004 (5), December 13, 2005 (1), September 23, 2008 (8), and January 7, 2014 (9) the Board authorized the competitive solicitation of countywide clubhouse services. Clubhouses provide member-driven rehabilitation and recovery programs for adults with serious mental illness (SMI), including individuals who may have a co-occurring SUD. Clubhouses provide skill development, social rehabilitation, and symptom management. Services assist members in maximizing their recovery by increasing their rehabilitation and social skills, reducing social isolation, identifying areas of personal, cultural, vocational, intellectual, and recreational interest, increasing

independent functioning, increasing employment and education, and improving quality of life.

In FY 2019-20, 2,449 unduplicated clients were served through all clubhouses countywide, with a total of 55,072 annual member visits. The combined total annual cost for the clubhouses included within this request is estimated to range from \$2.2 - \$3.0 million. Today's action would authorize a competitive solicitation for clubhouse services, resulting in the award of up to five total contracts in the North Inland, North Coastal, Central, and South Regions for an initial term of up to one year, with up to four option years, and up to an additional six months, if needed.

b. Housing Support Services (Countywide) – (Approximate Cost: \$1.5 - \$2.0 million)

On June 20, 2017 (13), the Board authorized a competitive solicitation for housing support services through the tenant peer support program. The program provides housing navigation services and peer support services to assist clients in identifying, securing, and maintaining safe and affordable housing. The program supports clients referred to housing units funded by No Place Like Home (NPLH) and the Mental Health Services Act (MHSA). To complement the tenant peer support program, the home finder program provides outreach and engagement, housing navigation and location, and tenant support services, to identify and secure safe and affordable housing for individuals with SMI who are experiencing homelessness. To ensure optimal and centralized support to existing eligible clients and to meet the needs of new clients who will be housed in units funded by NPLH, the tenant peer support program will merge with the home finder program as a larger housing supportive services program to serve clients countywide.

In FY 2019-20, the tenant peer support services and home finder programs collectively served a total of 586 unduplicated clients. The annual cost of this program typically ranges from \$1.5 - \$2.0 million. Today's action would authorize the procurement of a housing support services program, inclusive of tenant peer support and home finder services, for an initial term of up to one year, with up to four option years, and up to an additional six months, if needed.

c. Assisted Outpatient Treatment Outreach and Evaluation Services (Countywide) - (Approximate Cost: \$3.3 - \$4.4 million)

On April 21, 2015 (4), the Board approved the implementation of Assisted Outpatient Treatment (AOT), also known as Laura's Law. On September 27, 2011 (7), the Board approved the implementation of the In-Home Outreach Team (IHOT) program, and on July 30, 2013 (6) the Board authorized the expansion of IHOT services countywide. AOT may be voluntary or court-ordered, providing services that include outreach, engagement,

mental health treatment, case management, housing, and rehabilitative services for individuals with SMI. The AOT service continuum also includes IHOT, which provides services to engage individuals and families, and evaluation services to conduct client, family and staff focus groups, evaluate services and outcome data, and prepare and submit findings and recommendations to the County and State.

In FY 2018-19, IHOT served 643 unduplicated clients and provided services to 319 unique family members. The annual cost of the IHOT, AOT and program evaluation services typically ranges from \$3.3 - \$4.4 million. Today's action would authorize the competitive solicitation for IHOT, AOT and program evaluation services countywide, for an initial term of up to one year, with up to four option years, and up to an additional six months, if needed.

d. Outpatient Mental Health Services for Adults (North Coastal, North Inland, North Central, Central Regions and Countywide Specialty Services) – (Approximate Cost: \$8.9 – \$11.8 million)

On October 29, 2019 (8), the Board authorized competitive solicitations for biopsychosocial rehabilitation (BPSR) mental health outpatient services in the North Inland, North Coastal, North Central, and Central Regions. Additional BPSR services are provided throughout the county, including a countywide program that provides BPSR services to individuals of all ages who have experienced trauma and torture. BPSR programs provide evidence-based and comprehensive outpatient mental health services, which include rehabilitation services, medication management, care coordination, recovery services, and employment support. BPSR programs provide culturally competent, age and developmentally appropriate mental health services that incorporate best practice techniques for psychiatric, vocational, nursing, social skill and illness management. BPSR services increase clinical stability, decrease functional impairment, facilitate independence and sufficiency, improve employment options, and enhance psychiatric and social rehabilitation, and recovery. A wide range of BPSR services are available through these programs to meet the needs of the community, including geriatric, crisis, urgent, walk-in, primary care collaboration, and co-occurring mental health and SUD services.

For FYs 2017-18 through 2019-20, 4,899 unduplicated clients on average were served annually by all regions, inclusive of the program that serves victims of trauma and torture. The combined total annual cost of services for the five BPSR programs included in this request is estimated to range from \$8.9 - \$11.8 million. Today's action would authorize a competitive solicitation for BPSR programs in the North Inland, North Coastal, Central, and North Central Regions, including a Countywide program that

serves survivors of trauma and torture, resulting in the award of five contracts, with an initial term of up to one year, with up to four option years, and up to an additional six months, if needed.

e. Outpatient Mental Health Services for Children and Youth (Approximate Cost: \$1.1 - \$1.5 million)

i. Behavioral Crisis Center and Mobile Assessment Team Services in North Regions (Approximate Cost: \$0.5 - \$0.7 million)

On August 4, 2015 (4), the Board authorized a competitive solicitation for outpatient services provided through a walk-in crisis center and mobile assessment team. The program provides assessment services for children and youth who are experiencing a mental health crisis or have an urgent need for mental health services. The mobile assessment team provides crisis intervention services to focus on reducing unnecessary utilization of emergency and inpatient services for children and youth. Services include case management, mental health, and psychiatric services to stabilize immediate crisis while linking to appropriate ongoing outpatient services.

In FY 2019-20, the program served 243 unduplicated clients. The annual cost of this program typically ranges from \$0.5 - \$0.7 million. Today's action would authorize a competitive solicitation for walk-in crisis and mobile assessment team services in the North Regions of San Diego County for an initial term of up to one year, with up to four option years, and up to an additional six months, if needed.

ii. Mental Health Developmental Evaluation Services (Countywide) - (Approximate Cost: \$0.6 - \$0.8 million)

On May 22, 2007 (8), and August 4, 2015 (4), the Board authorized the negotiation of a contract for specialized mental health developmental evaluation services for children. These services are provided by licensed psychologists with specialized training and experience in the diagnosis and treatment of children with developmental disabilities. Interdisciplinary teams provide comprehensive evaluations of young children presenting with suspected developmental delays and other concerns. The program provides culturally and developmentally appropriate evaluations of each child's functioning, makes referrals, and consults with caregivers to improve the child's functioning.

In FY 2019-20, the program served 914 unduplicated clients. The annual cost of this program typically ranges from \$0.6 - \$0.8 million. Today's action would authorize a competitive solicitation for mental health developmental evaluation

services for an initial term of up to one year, with up to four option years, and up to an additional six months, if needed.

f. Onsite Care Coordination and Case Management Services (Central Region) - (Approximate Cost: \$2.0 - \$2.7 million)

On August 25, 2020 (2), the Board approved funding for onsite care coordination and behavioral health services at new housing projects in the Central Region. The program will serve residents living at two new San Diego Housing Commission (SDHC) housing developments with the goal of increasing housing stability and retention, and linking residents to ongoing behavioral health services. Services include outreach and engagement, screening, behavioral health assessment, case management, crisis intervention, care coordination and linkage to ongoing behavioral health services as appropriate. The services provided by this program align with current services provided at the San Diego Convention Center and temporary County lodging for COVID-19 patients.

The annual cost of this new program is estimated to range from \$2.0 - \$2.7 million. Today's action would authorize a competitive solicitation for onsite care coordination services for an initial term of up to one year, with up to one option year, and up to an additional six months, if needed.

g. Homeless Outreach Worker Services (Countywide) - (Approximate Cost: \$1.9 - \$2.5 million)

BHS provides homeless outreach through mental health outpatient treatment programs. In FY 2016-17, BHS further enhanced services by adding homeless outreach workers (HOWs) in SUD outpatient treatment programs. HOW services include outreach and screening for mental health, physical health, and SUD, along with linkage to external services, which may include a warm handoff with community providers to ensure connection. HOWs often outreach to individuals who are underserved in non-traditional settings to link them to services with the goal of improving their physical and mental health and social functioning and engage them into services.

In FY 2019-20, HOWs in the substance use disorder outpatient treatment programs conducted 4,317 homeless outreach contacts across all regions. The annual cost of this program typically ranges from 1.9 - 2.5 million. Today's action would authorize a competitive solicitation for homeless outreach worker services for an initial term of up to one year, with up to four option years, and up to an additional six months, if needed.

Recommendation #2: Authorization to Extend and Amend Contracts

The Board authorized the competitive solicitation for the programs listed in Attachment A, Table 1. All of the current contracts listed in Attachment A, Table 1 are set to expire by the end of FY 2020-21 and need to be amended and extended in order to ensure continuity of these critical services.

If approved, today's actions would authorize an amendment and extension of these programs up to June 30, 2022, and up to an additional six months, if needed. Additional details of these programs can be found in Attachment A, Table 1.

Recommendation #3: Authorization to Extend and Amend Single Source Contracts

The Board authorized the single source procurement of the programs listed in Attachment A, Table 2. The majority of the current contracts listed in Attachment A, Table 2 will expire at the end of FY 2020-21 and need to be amended and extended in order to ensure continuity of these critical services.

If approved, today's actions would authorize an amendment and extension of these programs up to June 30, 2022, and up to an additional six months, if needed. The Director of the Department of Purchasing and Contracting awarded the contracts listed in Attachment A, Table 2 based on one of the following Board Policy A-87, Competitive Procurement exemptions:

- Section 1.D.3: the procurement is for services from a provider with unique knowledge, skill, or ability not available from other sources.
- Section 2.I, categorical exemption from competitive procurement for medical or surgical equipment or supplies or professional services for use by a County facility.

Recommendation #4: Authorize a Request for Statement of Qualifications (RFSQ) and to Award Contracts to Expand Augmented Services Program Capacity (Approximate Cost: \$1.4 - \$1.8 million)

Augmented Services Programs (ASPs) supplement basic State licensed board and care services to adults who are experiencing SMI and in need of a higher level of residential care. ASPs include supportive, supervisory, and rehabilitative services to prevent adults who are experiencing SMI from being placed in more restrictive settings such as state hospitals, locked long-term care facilities, or skilled nursing facilities.

In Fiscal Year 2019-20, existing ASPs served 205 unduplicated clients countywide. The annual cost to expand ASP capacity will range from \$1.4 – \$1.8 million. If approved, today's action would authorize a Request for Statement of Qualifications (RFSQ) and to subsequently award

one or more contracts for an initial term of up to one year, with up to four option years, and up to an additional six months, if needed, to expand augmented services program (ASP) capacity.

Recommendation #5 a & b: Authorize Single Source Procurements for Augmented Services Programs (ASPs) and Execute Amendments to Existing ASP Contracts to Expand Services in Support of COVID-19 Surge Capacity Needs (Approximate Cost: \$2.2 - 2.9 million)

In addition to the previously planned expansion in recommendation #4, further increases are recommended to address capacity needs resulting from the COVID-19 pandemic. Due to the COVID-19 pandemic, hospital emergency departments are facing patient surges, including an increased number of patients experiencing psychiatric or behavioral health crises. As a result, inpatient psychiatric units are experiencing a backlog of patients who are utilizing admin days, inpatient stay days for recipients who no longer require acute hospital care, while awaiting discharge to an appropriate level of care. To alleviate this pressure and reduce the number of admin days being utilized, augmented services program (ASP) capacity will be expanded to ensure clinically appropriate care is available to cohorts of low clinical risk patients within inpatient psychiatric care.

The annual cost of this program is estimated to range from \$2.2 – \$2.9 million. If approved, today's action would authorize the award of one or more single source procurements for ASPs for an initial term of up to one year, with up to four option years, and up to an additional six months, if needed, subject to the availability of funding, and authorize amendments to existing ASP contracts listed in Attachment A, Table 3, if needed, subject to the availability of funding, to support of COVID-19 surge capacity needs. The single source contracts will be awarded based on following Board Policy A-87, Competitive Procurement exemption:

• Section 3.D.4: in cases of emergency, as defined in Section 402 of the County Code of Administrative Ordinances, the Chief Administrative Officer or the department heads may approve Single Source procurements over \$100,000 without prior Board of Supervisors' approval.

Recommendation #6: Execute a Cooperative Agreement with the State Department of Rehabilitation for Mental Health Employment Services

On October 16, 2001 (4), the Board authorized the execution of an amendment to the Cooperative Agreement with the State Department of Rehabilitation (DOR). The program provides vocational services for adults experiencing SMI to support them in achieving placement in competitive employment. Services are provided through a contracted provider countywide and include client assessment, short-term support services, and employment services. In FY 2018-19,

the program served 182 unduplicated clients, with a success ratio of 50 percent, exceeding the Statewide program success ratio of 41 percent.

Today's action would authorize execution of a revenue agreement, upon receipt, with DOR for the employment services program for the period of July 1, 2021 through June 30, 2024, with an increase in revenue match dollars not to exceed \$0.4 million annually, and any amendments thereto, and future years' Agreements and amendments, provided terms, conditions, program services and funding are not materially impacted or altered. The current annual County cost for this program is \$240,948, a 21.3 percent revenue match that leverages State funding of \$1,131,210. The agreement will be enhanced to include the individual placement and support model of supported employment for individuals experiencing SMI.

Recommendation #7: Ratify the Performance Contract Agreement with the State Department of Health Care Services

Under Section 5650(a) and 5847 of the California Welfare and Institutions Code, and Title 9, California Code of Regulations (CCR), section 3310, the California Department of Health Care Services (DHCS) enters into an agreement with the County of San Diego through a performance contract to provide public mental health services. DHCS is responsible for the administration of the Mental Health Services Act (MHSA), Substance Abuse Block Grant (SABG), Projects for Assistance in Transition from Homelessness (PATH) and Community Mental Health Services Grant (MHBG) programs, in addition to each county's provision of community mental health services provided with realignment funds.

The performance contract establishes the County's responsibility to provide an integrated and coordinated range of services appropriate to meet the needs of clients and to implement systemwide performance outcome measurements in San Diego County. In alignment with previous years, DHCS sends forward the annual performance contract agreement for approval after the beginning of the fiscal year; therefore, ratification during or after the contract term is required.

Today's action, if approved, authorizes the Clerk of the Board to ratify the FY 2020-21 Performance Contract Agreement with the California Department of Health Care Services, amendments thereto, and future years' Agreement and amendments, subject to the approval of the Director, Health and Human Services Agency.

SUBJECT:

AUTHORIZE COMPETITIVE SOLICITATIONS AND AMENDMENTS TO EXTEND EXISTING BEHAVIORAL HEALTH SERVICES CONTRACTS, AUTHORIZE A REQUEST FOR STATEMENT OF QUALIFICATIONS, SINGLE SOURCE PROCUREMENTS AND AMENDMENTS FOR AUGMENTED SERVICES PROGRAMS, AUTHORIZE EXECUTION OF REVENUE AGREEMENT WITH THE STATE DEPARTMENT OF REHABILITATION, AND RATIFY BEHAVIORAL HEALTH SERVICES PERFORMANCE CONTRACT AGREEMENT WITH THE STATE (DISTRICTS: ALL)

LINKAGE TO THE COUNTY OF SAN DIEGO STRATEGIC PLAN

Today's proposed actions support the Building Better Health and Living Safely Initiatives in the County of San Diego's (County) 2021-2026 Strategic Plan as well as the County's Live Well San Diego vision, by ensuring that vulnerable populations of individuals with mental illness and substance use disorders continue to have access to a comprehensive continuum of behavioral health services administered through accessible behavioral health programs.

Respectfully submitted,

HELEN N. ROBBINS-MEYER Chief Administrative Officer

ATTACHMENT(S)

Attachment A - Behavioral Health Services List of Contracts

SUBJECT:

AUTHORIZE COMPETITIVE SOLICITATIONS AND AMENDMENTS TO EXTEND EXISTING BEHAVIORAL HEALTH SERVICES CONTRACTS, AUTHORIZE A REQUEST FOR STATEMENT OF QUALIFICATIONS, SINGLE SOURCE PROCUREMENTS AND AMENDMENTS FOR AUGMENTED SERVICES PROGRAMS, AUTHORIZE EXECUTION OF REVENUE AGREEMENT WITH THE STATE DEPARTMENT OF REHABILITATION, AND RATIFY BEHAVIORAL HEALTH SERVICES PERFORMANCE CONTRACT AGREEMENT WITH THE STATE (DISTRICTS: ALL)

AGENDA ITEM INFORMATION SHEET

REQU	IRES	FOUR	VOTES	S:		Y	es	\boxtimes	No			
WRIT	TEN I	DISCLO	SURE	PER	COU	NTY	СНА	RTER	SECTION	1000.1	REQUI	RED
	Yes	\boxtimes	No									

PREVIOUS RELEVANT BOARD ACTIONS:

August 25, 2020 (2), County of San Diego Fiscal Year 2022-21 Adopted Budget Resolution for County Family of Funds, Enterprise Funds and Internal Service Funds; May 5, 2020 (3), Authorization for Amendments to Extend Existing Behavioral Health Services Contracts; November 13, 2018 (12), Behavioral Health Services Authorization for Competitive Solicitations, Amendment of Contracts, and a Single Source Procurement; June 19, 2018 (9), Behavioral Health Services Authorization for Competitive Solicitations and Amendment of October 29, 2019 (8), Authorization for Competitive Solicitations and the Amendment of an Existing Contract for Behavioral Health Services; November 13, 2018 (11), Mental Health Services Act - Statewide Early Psychosis Learning Health Care Network Innovation Project; April 24, 2018 (3), Temporary Professional Staffing for Psychiatric and Physician Services; March 27, 2018 (2), Authorization to Implement Drug Medi-Cal Organization Delivery System; June 20, 2017 (13), Behavioral Health Services Authorization for Competitive Solicitations, Amendment of Contracts and Single Source Procurements; Authorization for Term Extension of the California Mental Health Services Authority (CALMHSA) Memorandum of Understanding and Authorization of Annual Payments; January 24, 2017 (2) Authorization for Single Source Procurements for School-Based and Residential/Placement Behavioral Health Resources; October 4, 2016 (1), Health and Human Services Agency Authorization for Competitive Solicitations, Extension of Contracts, and Single Source Procurements; June 21, 2016 (9), Behavioral Health Services Authorization for Competitive Solicitations and Amendment of Existing Contracts; August 4, 2015 (4), Behavioral Health Services Authorization for Competitive Solicitations, Extension of Contracts, and Single Source Procurements; April 21, 2015 (4), Implementation of California Welfare and Institutions Code Sections 5345 ET SEQ., Laura's Law, to Provide Assisted Outpatient Treatment to Persons with Serious Mental Illness; September 23, 2014 (9), Behavioral Health Services Authorization for Competitive Solicitations and Extension of Contracts; March 11, 2014 (10), Behavioral Health Services Authorization for Sole Source Procurements for Prevention and Early Intervention Services for Native Americans; January 7, 2014 (9), Behavioral Health Services Authorization for Competitive Solicitations and Extension of Contracts; July 30, 2013 (6), Review of Services for Individuals with Serious Mental Illness who are Resistant to Treatment; September 25, 2012 (6), Behavioral Health Services Authorization for Competitive Solicitations and Extensions of Contracts; September 27, 2011 (7), Mental Health Services Act – Competitive

PERFORMANCE CONTRACT AGREEMENT WITH

THE

Solicitations and Contract and Sole Source Authorizations for Innovation and Community Services and Supports Components; May 24, 2011 (12), Low Income Health Program; February 24, 2009 (8), Children's Mental Health Services Authorization for Extension of Early and Periodic Screening, Diagnosis, and Treatment Contracts; September 23, 2008 (8), Mental Health Services – Competitive Solicitations for South Region; October 16, 2007 (4), MHSA Workforce, Education and Training; May 22, 2007 (8), Mental Health Services Contract Authorization for Developmental Evaluation Services; December 12, 2006 (7), Mental Health Services Authorization for Competitive Solicitations and Extensions of Contracts; December 13, 2005 (1), Mental Health Services Act Community Services and Supports Program and Expenditure Plan; November 30, 2004 (8), Children's Mental Health Services Authorization for Competitive Solicitations and Extension of Contracts; January 13, 2004 (5), Adult and Older Adult Mental Health Services Authorization for Competitive Solicitations and Extension of Contracts; October 16, 2001 (4), State Department of Rehabilitation Cooperative Program for Mental Health Employment Services; July 31, 2001 (1), San Pasqual Academy Opening.

BOARD POLICIES APPLICABLE:

(DISTRICTS: ALL)

A-87 – Competitive Procurement; B-29 – Fees, Grants, Revenue Contracts

BOARD POLICY STATEMENTS:

Board Policy A-87, Competitive Procurement: Exception to the Competitive Procurement requirement of Board Policy A-87 is requested for Opioid Treatment Programs, Outpatient School-Based Mental Health Services, Star View Adolescent Center Psychiatric Health Facility, Para Las Familias, Childnet Incredible Years, Medi-Cal Managed Care Psychiatric Inpatient Hospital Services, Native American Prevention and Early Intervention Services, Locum Tenens Psychiatric Services, and Infection Control Consultation Services.

MANDATORY COMPLIANCE:

N/A

ORACLE AWARD NUMBER(S) AND CONTRACT AND/OR REQUISITION NUMBER(S):

554929, 552667, 553806, 554588, 547210, 547212, 548930, 551670, 554861, 554862, 554863, 554864, 556408, 554326, 554305, 549938, 555095, 554865, 554708, 554707, 548915, 548913, 548929, 549560, 553070, 554043, 554303, 553996, 553994, 554047, 554048, 45369, 554896, 554895, 554897, 554898, 554899, 551401, 553785, 553791, 553789, 553787, 552662, 553950, 549460, 553898, 553476, 548907, 548909, 550200, 554578, 553242, 558012, 555192, 562384, 555089, 555088, 535466, 518710, 44781, 544703, 535558, 529538, 552664, 45766, 529605, 553737,558605, 558603, 559906, 558607, 558601, 558604, 548015, 548014, 548017, 515362, 530382, 520878, 555127, 553656; 560378; 560381; 560382; 560379; 560380, 562384





BEHAVIORAL HEALTH SERVICES LIST OF CONTRACTS January 26, 2021

Table 1: Behavioral Health Services Contract Extensions in Accordance with Recommendation #2

Service Description	Contract Number	Population Served	Contractor Name	Program Name	Annual Budget*	Previous Authority	Contract End Date				
1. Behavioral Health Support Services											
Behavioral health support services complement and enhance treatment service and person-centered care plans. Support services include therapeutic, recovery and rehabilitation	554929	Adults and Older Adults	Mental Health Systems Inc.	Serial Inebriate Program (SIP)	\$1.5 million	Approved for procurement by Board of Supervisors (BOS) via Board Letter on 06/20/17 (13)	6/30/2021				
services and support, support for adults, with a focus on addressing individualized social and environmental barriers to treatment. Services are intended to facilitate independence, sufficiency, and promote recovery, resiliency, and community tenure.	552667		McAlister Institute for Treatment and Recovery	Inebriate Sobering Services	\$1.0 million	Approved for procurement under Admin Code 401 which authorizes the Department of Purchasing and Contracting (DPC) to execute competitively procured contracts valued up to \$1.0 million	6/30/2021				
	553806		NAMI San Diego	Payee Case Management Services	\$0.1 million	Authorized for procurement under Admin Code 401 which authorizes DPC to execute competitively procured contracts valued up to \$1.0 million	6/30/2021				
	554588		Recovery Innovations, Inc.	Peer Specialist Training Program	\$0.2 million	Approved for procurement by BOS via Board Letter on 10/16/07 (4)	6/30/2021				
	547210		Recovery Innovations, Inc.	Client Liaison Services	\$0.4 million	Approved for procurement by BOS via Board Letter on 09/25/12 (6)	6/30/2021				
	547212		Recovery Innovations, Inc.	Client Operated Peer Support Services	\$0.8 million	Approved for procurement by BOS via Board Letter on 09/25/12 (6)	6/30/2021				
	548930		Neighborhood House Association	Project In-Reach	\$1.3 million	Approved for procurement by BOS via Board Letter on 01/07/14 (9), and 06/21/16 (9)	6/30/2021				

^{*} Budget amounts rounded to the nearest hundred thousand

Service Description	Contract Number	Population Served	Contractor Name	Program Name	Annual Budget*	Previous Authority	Contract End Date
2. Collaborative Services							
Collaborative services provide behavioral health services and treatment supports for adults, in collaboration with cross-sector partners.	551670	Adults and Older Adults	Telecare Corp.	Behavioral Health Court	\$2.8 million	Approved for procurement by BOS via Board Letter on 09/23/14 (9)	6/30/2021
Services may be diversionary and include collaborative court services for individuals with behavioral health conditions. Services offered	554861		Mental Health Systems Inc.	North County Center for Change	\$1.6 million	Approved for procurement by BOS via Board Letter on 09/23/14 (9)	6/30/2021
include screening, service connection, coordination and collaboration, clinical case management, and ancillary services, as appropriate.	554862		Mental Health Systems Inc.	South County Center for Change	\$1.6 million	Approved for procurement by BOS via Board Letter on 09/23/14 (9)	6/30/2021
	554863 554864	Mental Health Systems Inc.	East County Center for Change	\$1.6 million	Approved for procurement by BOS via Board Letter on 09/23/14 (9)	6/30/2021	
			Mental Health Systems Inc.	San Diego Center for Change	\$1.6 million	Approved for procurement by BOS via Board Letter on 09/23/14 (9)	6/30/2021
	556408		San Diego Second Chance Program	Adult Re-Entry Court	\$1.1 million	Approved for procurement by BOS via Board Letter on 09/23/14 (9), and 10/04/16 (1)	6/30/2021
3. Integration Services							
Integration Services increase access to behavioral health services for individuals through partnership and collaboration with physical health providers. Integrated Services include psychiatric and addiction consultation for primary care, pediatric and obstetric	554326	All Ages	Vista Hill Foundation	Psychiatric Consultation and Family Support Program	\$1.0 million	Approved for procurement by BOS via Board Letter on 08/04/15 (4)	6/30/2021
providers, and integrated behavioral health services for individuals with Medi-Cal or who are uninsured, including prevention and early intervention services. Screening, brief intervention, referrals, and case management are provided by mental health clinicians, substance use counselors, and peer support specialists.	health or who and early brief ment are abstance		Vista Hill Foundation	Integrated Behavioral Health and Primary Care Services in Rural communities	\$1.5 million	Approved for procurement by BOS via Board Letter on 08/04/15 (4)	6/30/2021
	549938		NAMI-SD	Integrated Peer Professional and Family Engagement Program	\$3.0 million	Approved for procurement by BOS via Board Letter on 01/07/14 (9)	6/30/2021

^{*} Budget amounts rounded to the nearest hundred thousand

Service Description	Contract Number	Population Served	Contractor Name	Program Name	Annual Budget*	Previous Authority	Contract End Date
4. Outpatient Mental Health Treatn	nent Service	s					
Assertive Community Treatment (ACT) programs provide intensive treatment services to individuals who are experiencing serious mental illness (SMI), including individuals who may have a substance use disorder (SUD).	555095	Adults and Older Adults	Mental Health Systems Inc.	Action East	\$4.3 million	Approved for procurement by BOS via Board Letter on 08/04/15 (4)	6/30/2021
may have a substance use disorder (SUD). Services include medication management, individual therapy, outpatient substance abuse treatment, case management, medication assisted treatment, employment support, peer counseling and support, and housing services.	554865		Mental Health Systems Inc.	Action Central	\$2.0 million	Approved for procurement by BOS via Board Letter on 08/04/15 (4)	6/30/2021
	554708		Telecare Corp	Transition Team	\$0.7 million	Approved for procurement by BOS via Board Letter on 08/04/15 (4)	6/30/2021
	554707		Telecare Corp	Gateway to Recovery	\$4.3 million	Approved for procurement by BOS via Board Letter on 08/04/15 (4)	6/30/2021
Outpatient mental health services provide outpatient treatment to adults who are experiencing SMI, including those who may have a co-occurring SUD. Strengths-Based Case Management (SBCM) services include clinical case management brokerage and focus	548915	Adults and Older Adults	Community Research Foundation	Bio-Psychosocial Rehabilitation (BPSR) Wellness Recovery Center	\$2.7 million	Approved for procurement by BOS via Board Letter on 01/07/14 (9)	6/30/2021
on connection to community services and supports.	548913		Community Research Foundation	Bio-Psychosocial Rehabilitation (BPSR) Wellness Recovery Center	\$2.7 million	Approved for procurement by BOS via Board Letter on 01/07/14 (9)	6/30/2021
	548929		Neighborhood House Association	Project Enable	\$2.4 million	Approved for procurement by BOS via Board Letter on 01/07/14 (9)	6/30/2021
	549560		Exodus Recovery Inc.	Bio-Psychosocial Rehabilitation (BPSR) Wellness Recovery Center	\$1.6 million	Approved for procurement by BOS via Board Letter on 01/07/14 (9)	6/30/2021
	553070		San Ysidro Health Center Inc.	Chaldean and Middle Eastern Social Services	\$0.5 million	Approved for procurement by BOS via Board Letter on 01/07/14 (9)	6/30/2021

^{*} Budget amounts rounded to the nearest hundred thousand

Service Description	Contract Number	Population Served	Contractor Name	Program Name	Annual Budget*	Previous Authority	Contract End Date
School-based prevention and early intervention (PEI) programs provide services to children, youth, and families. Programs provide early intervention services utilizing a family-focused approach and evidence-based curriculum to provide social-emotional groups	554043	Children, Youth and Families	South Bay Community Services	School Based Prevention and Early Intervention (PEI) Services - South	\$1.4 million	Approved for procurement by BOS via Board Letter on 08/04/15 (4)	6/30/2021
to parents and children as well as identified classrooms in designated public schools.	554303		San Diego Youth Services	School Based Prevention and Early Intervention (PEI) Services - East	\$1.4 million	Approved for procurement by BOS via Board Letter on 08/04/15 (4)	6/30/2021
	553996		San Diego Unified School District	School Based Prevention and Early Intervention (PEI) Services – Central Southeastern	\$1.2 million	Approved for procurement by BOS via Board Letter on 08/04/15 (4)	6/30/2021
	553994		San Diego Unified School District	School Based Prevention and Early Intervention (PEI) Services – Central & North Central	\$1.1 million	Approved for procurement by BOS via Board Letter on 08/04/15 (4)	6/30/2021
	554047		Vista Hill Foundation	School Based Prevention and Early Intervention (PEI) Services – North Inland	\$0.9 million	Approved for procurement by BOS via Board Letter on 08/04/15 (4)	6/30/2021
	554048		Palomar Family Counseling Services Inc.	School Based Prevention and Early Intervention (PEI) Services – North Coastal	\$0.9 million	Approved for procurement by BOS via Board Letter on 08/04/15 (4)	6/30/2021
The day treatment early and periodic screening, diagnostic and treatment (EPSDT) intervention program provides day rehabilitative services, individual, group, and family treatment, case management and rehabilitative services, intensive care coordination, intensive home-based services, crisis intervention, medication management, and outreach at schools and in the community.	45369	Children, Youth and Families	New Alternatives Inc.	San Pasqual Academy Children's Mental Health Services	\$2.5 million	Approved for procurement by BOS via Board Letter on 07/31/01 (1)	9/30/2021

^{*} Budget amounts rounded to the nearest hundred thousand

Service Description	Contract	Population	Contractor Name	Program Name	Annual Budget*	Previous Authority	Contract End	
	Number	Served					Date	
5. Outpatient Substance Use Disord	er Treatmei	nt Services						
Outpatient substance use disorder (SUD) treatment programs provide treatment services to all ages. Services include individual and group treatment services, case management,	554896	Adults and Older Adults	McAlister Institute for Treatment and Education	Regional Recovery Center East	\$8.8 million	Approved for procurement by BOS via Board Letter on 09/23/14 (9), and 03/27/18 (2)	6/30/2021	
recovery, and ancillary services to adults with a SUD diagnosis, including those with co-occurring mental health conditions. Perinatal programs serve pregnant and parenting women age 15 and older and include therapeutic services for children.	554895		McAlister Institute for Treatment and Education	Regional Recovery Center South	\$7.0 million	Approved for procurement by BOS via Board Letter on 09/23/14 (9), and 03/27/18 (2)	6/30/2021	
services for children.	554897	554897 554898 554899 551401 Children, Youth and Families 553791	McAlister Institute for Treatment and Education	Regional Recovery Center North Coastal	\$6.4 million	Approved for procurement by BOS via Board Letter on 09/23/14 (9), and 03/27/18 (2)	6/30/2021	
	554898		Episcopal Community Services	Regional Recovery Center Central	\$3.7 million	Approved for procurement by BOS via Board Letter on 09/23/14 (9), and 03/27/18 (2)	6/30/2021	
	554899		Family Health Centers of San Diego Inc.	Solutions for Recovery Center	\$1.4 million	Authorized for procurement under Admin Code 401 which authorizes DPC to execute competitively procured contracts valued up to \$1.0 million	6/30/2021	
	551401		Union of Pan Asian Communities	SUD Outpatient Recovery Center	\$1.7 million	Approved for procurement by BOS via Board Letter on 09/23/14 (9), and 03/27/18 (2)	6/30/2021	
	553785		McAlister Institute for Treatment and Education	South Bay Women's Recovery Center	\$3.6 million	Approved for procurement by BOS via Board Letter on 09/23/14 (9), and 03/27/18 (2)	6/30/2021	
				McAlister Institute for Treatment and Education	North Inland Women's Adolescent Recovery Center	\$2.1 million	Approved for procurement by BOS via Board Letter on 09/23/14 (9), and 03/27/18 (2)	6/30/2021
			Vista Hill Foundation	Parent Care East	\$3.2 million	Approved for procurement by BOS via Board Letter on 09/23/14 (9)	6/30/2021	
	553787		Vista Hill Foundation	Parent Care Central	\$1.7 million	Approved for procurement by BOS via Board Letter on 09/23/14 (9)	6/30/2021	

^{*} Budget amounts rounded to the nearest hundred thousand

Service Description	Contract Number	Population Served	Contractor Name	Program Name	Annual Budget*	Previous Authority	Contract End Date	
6. Prevention and Early Interventio	n Services							
Prevention and early intervention (PEI) programs are designed to prevent the onset of mental illness or provide early intervention to decrease severity of symptoms. PEI programs	552662	Adults and Older Adults	Pathways Community Services, LLC	Prevention and Early Intervention of Psychosis (Kickstart)	\$2.2 million	Approved for procurement by BOS via Board Letter on 11/13/18 (11), and 01/07/14 (9)	6/30/2021	
serve all ages and focus on reducing the stigma associated with mental illness, preventing suicide, and addressing the early signs of psychosis.	553950	All Ages, Special Populations	San Diego Youth Services	HERE Now	\$1.8 million	Approved for procurement by BOS via Board Letter on 06/21/16 (9)	6/30/2021	
	549460 553898 553476 548907		Mental Health Systems Inc.	Veterans Peer Support and Helpline	\$1.3 million	Approved for procurement by BOS via Board Letter on 01/07/14 (9)	6/30/2021	
			Jewish Family Service of San Diego	Positive Parenting Program	\$1.1 million	Approved for procurement by BOS via Board Letter on 08/04/15 (4)	6/30/2021	
			Southern Caregivers Resource Center	Reach II	\$1.1 million	Approved for procurement by BOS via Board Letter on 08/04/15 (4)	6/30/2021	
			Union of Pan Asian Communities	Elder Multi-cultural Access and Support Services (EMASS)	\$0.6 million	Authorized for procurement under Admin Code 401 which authorizes DPC to execute competitively procured contracts valued up to \$1.0 million	6/30/2021	
				Union of Pan Asian Communities	Positive Solutions	\$0.6 million	Authorized for procurement under Admin Code 401 which authorizes DPC to execute competitively procured contracts valued up to \$1.0 million	6/30/2021
	550200		Mental Health America of San Diego	Mental Health First Aid (MHFA)	\$0.5 million	Approved for procurement by BOS via Board Letter on 09/25/12 (6)	6/30/2021	
	554578		Community Health Improvement Partners (CHIP)	Suicide Prevention Action Plan	\$0.5 million	Authorized for procurement under Admin Code 401 which authorizes DPC to execute competitively procured contracts valued up to \$1.0 million	6/30/2021	

^{*} Budget amounts rounded to the nearest hundred thousand

Service Description	Contract Number	Population Served	Contractor Name	Program Name	Annual Budget*	Previous Authority	Contract End Date			
7. Residential Services										
Residential programs offer 24-hour crisis residences that provide acute mental healthcare services to adults who are experiencing a crisis as a step down or alternative to inpatient hospitalization. Services include psychiatric evaluation, medication where indicated, individual and group therapy, discharge planning, and psychosocial rehabilitation.										
8. Staffing and Consultant Services										
The Joint Commission consultant provides Joint Commission and Centers for Medicare & Medicaid Services survey compliance consultation and documentation to the San Diego County Psychiatric Hospital.	558012	San Diego County Psychiatric Hospital	Steven B. Miller	Joint Commission Consultation Services	\$0.002 million	Approved for procurement under Admin Code 401 which authorizes DPC to execute competitively procured contracts valued up to \$1.0 million	6/30/2021			
9. Training										
The behavioral health training curriculum program provides behavioral health training to contracted behavioral health providers and County Behavioral Health Services employees.	555192	Contracted Providers, County Staff	San Diego State University Research Foundation	Behavioral Health Training Curriculum	\$1.6 million	Approved for procurement by BOS via Board Letter on 08/04/15 (4)	6/30/2021			
Total Estimated Cost			\$104.2 million							

^{*} Budget amounts rounded to the nearest hundred thousand

Table 2: Behavioral Health Services Single Source Contract Extensions in Accordance with Recommendation #3

Service Description	Contract Number	Population Served	Contractor Name	Program Name	Annual Budget*	Previous Authority	Contract End Date	Exception to BOS Competitive Procurement Policy (A-87)
1. Behavioral Health Suppor	t Services							
Augmented Services Programs (ASP) provide additional services to individuals with serious mental illness in licensed residential care facilities, also referred to as board and care facilities, to help them maintain or improve functioning in the community and to prevent or minimize institutionalization. These services are available at licensed board and care facilities, with the primary goal of stepping down to a lower level of care. The services were awarded as single source due to urgent need for ASP slots, which surpassed the existing system capacity. This was caused by the closure of other contracted locations.	562384	Adults and Older Adults	Casa El Cajon	Casa El Cajon	\$0.1 million	Authorized under A-87 which grants the County CAO authority to approve single source procurements up to \$100,000.	4/30/2021	The procurement is for services from a provider with unique knowledge, skill, or ability not available from other sources for a specific region in the County (A-87, section 1.D.3)
2. Inpatient Services								
Acute psychiatric inpatient treatment services are provided to adults within a 24-hour secure, medically staffed facility and use a multidisciplinary approach. These services were awarded as single source contracts due to the unique	555089	Adults and Older Adults	Sharp HealthCare	Medi-Cal Managed Care Psychiatric Inpatient Hospital	Hospital Bed Rate	Approved for procurement by BOS through Board Letter request for Single Source Authority 12/12/06 (7)	6/30/2021	The procurement is for services from a provider with unique knowledge, skill, or ability not available from other sources for a specific region in the County (A-87, section 1.D.3)
capabilities to deliver the required acute hospital-based services, with regional coverage considerations.	555088		Sharp HealthCare	Medi-Cal Managed Care Psychiatric Inpatient Hospital	Hospital Bed Rate	Approved for procurement by BOS through Board Letter request for Single Source Authority 12/12/06 (7)	6/30/2021	The procurement is for services from a provider with unique knowledge, skill, or ability not available from other sources for a specific region in the County (A-87, section 1.D.3)
	535466		Regents of the University of California, UCSD	Medi-Cal Managed Care Psychiatric Inpatient Hospital	Hospital Bed Rate	Approved for procurement by BOS through Board Letter request for Single Source Authority 11/13/18 (12)	12/31/2021	The procurement is for services from a provider with unique knowledge, skill, or ability not available from other sources for a specific region in the County (A-87, section 1.D.3)

^{*} Budget amounts rounded to the nearest hundred thousand

Service Description	Contract Number	Population Served	Contractor Name	Program Name	Annual Budget*	Previous Authority	Contract End Date	Exception to BOS Competitive Procurement Policy (A-87)
	518710		Prime Healthcare Paradise Valley LLC	Medi-Cal Managed Care Psychiatric Inpatient Hospital	Hospital Bed Rate	Approved for procurement by BOS through Board Letter request for Single Source Authority 11/13/18 (12)	12/31/2021	The procurement is for services from a provider with unique knowledge, skill, or ability not available from other sources for a specific region in the County (A-87, section 1.D.3)
3. Outpatient Mental Health Tr	eatment Se	rvices						
Early childhood programs provide outpatient treatment services to children up to 6 years of age. These services to pre-school children were awarded as single source	44781	Children, Youth and Families	Episcopal Community Services	Para Las Familias	\$0.5 million	Approved for procurement by BOS through Board Letter request for Single Source Authority 01/24/17 (2)	6/30/2021	The procurement is for services from a provider with unique knowledge, skill, or ability not available from other sources (A-87, section 1.D.3)
contracts due to unique nature of the services, which are school-based, and providers are selected by school districts/pre-schools and in accordance with County contracting and funding stream requirements	544703		Palomar Family Counseling Services, Inc.	Childnet Incredible Years	\$0.5 million	Approved for procurement by BOS through Board Letter request for Single Source Authority 01/24/17 (2)	6/30/2021	The procurement is for services from a provider with unique knowledge, skill, or ability not available from other sources (A-87, section 1.D.3)
The school-based programs provide outpatient mental health services to children and adolescents with serious emotional disturbance (SED), up to age 21. These services to school aged children	535558	Children Youth and Families	Family Health Centers of San Diego Inc.	Community Circle Central & East Outpatient School-Based Mental Health Services	\$1.5 million	Approved for procurement by BOS through Board Letter request for Single Source Authority 02/24/09 (8)	6/30/2021	The procurement is for services from a provider with unique knowledge, skill, or ability not available from other sources (A-87, section 1.D.3)
were awarded as single source contracts due to unique nature of the services, which are school based, and providers are selected by school districts and in accordance with County contracting and funding stream	529538		San Diego Center for Children	East County Outpatient School-Based Mental Health Services	\$1.3 million	Approved for procurement by BOS through Board Letter request for Single Source Authority 02/24/09 (8)	6/30/2021	The procurement is for services from a provider with unique knowledge, skill, or ability not available from other sources (A-87, section 1.D.3)
requirements.	552664		Pathways Community Services, LLC	Cornerstone Outpatient School-Based Mental Health Services	\$0.8 million	Approved for procurement by BOS through Board Letter request for Single Source Authority 02/24/09 (8)	6/30/2021	The procurement is for services from a provider with unique knowledge, skill, or ability not available from other sources (A-87, section 1.D.3)
	45766		YMCA of San Diego County	TIDES Outpatient School-Based Mental Health Services	\$0.7 million	Approved for procurement by BOS through Board Letter request for Single Source Authority 05/05/20 (3), and 02/24/09 (8)	6/30/2021	The procurement is for services from a provider with unique knowledge, skill, or ability not available from other sources (A-87, section 1.D.3)

^{*} Budget amounts rounded to the nearest hundred thousand

Service Description	Contract Number	Population Served	Contractor Name	Program Name	Annual Budget*	Previous Authority	Contract End Date	Exception to BOS Competitive Procurement Policy (A-87)	
	529605		New Alternatives Inc.	North Inland Outpatient School-Based Mental Health Services	\$0.7 million	Approved for procurement by BOS through Board Letter request for Single Source Authority 02/24/09 (8)	6/30/2021	The procurement is for services from a provider with unique knowledge, skill, or ability not available from other sources (A-87, section 1.D.3)	
	553737			Sweetwater Union High School District	Sweetwater Outpatient School-Based Mental Health Services	\$0.3 million	Approved for procurement by BOS through Board Letter request for Single Source Authority 01/24/17 (2)	6/30/2021	The procurement is for services from a provider with unique knowledge, skill, or ability not available from other sources (A-87, section 1.D.3)
4. Outpatient Substance Use	Disorder (SUD) Treat	ment Services						
Outpatient SUD opioid treatment programs provide evidence-based treatment to adults with SUD who are diagnosed with opiate use disorder. Programs provide medication assisted treatment services, including	558605	Adult and Older Adults	San Diego Health Alliance, Inc.	Opioid Treatment Program (OTP)	\$10.2 million	Approved for procurement by BOS through Board Letter request for Single Source Authority 03/27/18 (2)	6/30/2021	The procurement is for services from a provider with unique knowledge, skill, or ability not available from other sources (A-87, section 1.D.3)	
counseling and medications for addiction. The BOS approved the single source extension of contracts for the initial implementation of the required Drug Med-Cal Organized Delivery System	558603		Mission Treatment Services, Inc.	Opioid Treatment Program (OTP)	\$4.0 million	Approved for procurement by BOS through Board Letter request for Single Source Authority 03/27/18 (2)	6/30/2021	The procurement is for services from a provider with unique knowledge, skill, or ability not available from other sources (A-87, section 1.D.3)	
(MC-ODS) services and coverage. Future contracts are anticipated to be awarded through a competitive procurement process.	559906		Soap Mat, LLC.	Opioid Treatment Program (OTP)	\$4.0 million	Approved for procurement by BOS through Board Letter request for Single Source Authority 03/27/18 (2)	6/30/2021	The procurement is for services from a provider with unique knowledge, skill, or ability not available from other sources (A-87, section 1.D.3)	
	558607	El Dorado Community Service Center	Opioid Treatment Program (OTP)	\$3.6 million	Approved for procurement by BOS through Board Letter request for Single Source Authority 03/27/18 (2)	6/30/2021	The procurement is for services from a provider with unique knowledge, skill, or ability not available from other sources (A-87, section 1.D.3)		
	558601		Progressive Medical Specialists, Inc.	Opioid Treatment Program (OTP)	\$1.8 million	Approved for procurement by BOS through Board Letter request for Single Source Authority 03/27/18 (2)	6/30/2021	The procurement is for services from a provider with unique knowledge, skill, or ability not available from other sources (A-87, section 1.D.3)	

^{*} Budget amounts rounded to the nearest hundred thousand

Service Description	Contract Number	Population Served	Contractor Name	Program Name	Annual Budget*	Previous Authority	Contract End Date	Exception to BOS Competitive Procurement Policy (A-87)
	558604		San Diego Treatment Services, LLC.	Opioid Treatment Program (OTP)	\$1.0 million	Approved for procurement by BOS through Board Letter request for Single Source Authority 03/27/18 (2)	6/30/2021	The procurement is for services from a provider with unique knowledge, skill, or ability not available from other sources (A-87, section 1.D.3)
5. Prevention and Early Inte	rvention S	ervices						
Prevention and early intervention (PEI) programs are designed to prevent the onset of mental illness or provide early intervention to decrease severity of symptoms. PEI programs serve all ages and focus on reducing the stigma associated with mental illness, preventing suicide, and	548015	All Ages, Special Populations	Indian Health Council Inc.	Native American Prevention & Early Intervention (Dreamweaver)	\$0.9 million	Approved for procurement by BOS through Board Letter request for Single Source Authority 03/11/14 (10)	6/30/2021	The procurement is for services from a provider with unique knowledge, skill, or ability not available from other sources (A-87, section 1.D.3)
addressing the early signs of psychosis. These are services to the Native American community; the selected single source providers have unique knowledge and skills to best meet the needs of this community.	548014		Southern Indian Health Council	Native American Prevention & Early Intervention (Dreamweaver)	\$0.8 million	Approved for procurement by BOS through Board Letter request for Single Source Authority 03/11/14 (10)	6/30/2021	The procurement is for services from a provider with unique knowledge, skill, or ability not available from other sources (A-87, section 1.D.3)
	548017		San Diego American Indian Health Center	Native American Prevention & Early Intervention (Dreamweaver)	\$0.4 million	Approved for procurement by BOS through Board Letter request for Single Source Authority 03/11/14 (10)	6/30/2021	The procurement is for services from a provider with unique knowledge, skill, or ability not available from other sources (A-87, section 1.D.3)
6. Residential Services								
Residential services provide services in a community treatment facility to adolescents who meet placement criteria and medical necessity. This contract for mental health services was awarded as a single source contract to the residential facility at which eligible children are placed.	515362	Children, Youth and Families	Star View Adolescent Center Inc.	Star View Adolescent Center Psychiatric Health Facility	\$0.8 million	Approved for procurement by BOS through Board Letter request for Single Source Authority 11/30/04 (8)	6/30/2021	The procurement is for services from a provider with unique knowledge, skill, or ability not available from other sources (A-87, section 1.D.3)

^{*} Budget amounts rounded to the nearest hundred thousand

Service Description	Contract Number	Population Served	Contractor Name	Program Name	Annual Budget*	Previous Authority	Contract End Date	Exception to BOS Competitive Procurement Policy (A-87)					
7. Staffing and Consultant Services													
Locum Tenens psychiatric services provide temporary physician staffing within the San Diego County Psychiatric Hospital to support patients who are experiencing SMI. These medical services are categorically exempt from the A-87 requirement for Competitive Procurement.	530382	San Diego County Psychiatric Hospital	Interim Physicians, LLC	Locum Tenens Psychiatric Services	\$5.3 million	Approved for procurement by BOS through Board Letter request for Single Source Authority 05/05/20 (3), and 04/24/18 (3)	6/30/2021	Categorical Exemption for Medical or Surgical Equipment, Supplies or Professional Services (A-87, Section 2. I)					
	520878		Jackson & Coker, LLC	Locum Tenens Psychiatric Services	\$4.3 million	Approved for procurement by BOS through Board Letter request for Single Source Authority 05/05/20 (3), and 04/24/18 (3)	6/30/2021	Categorical Exemption for Medical or Surgical Equipment, Supplies or Professional Services (A-87, Section 2. I)					
	555127		GMS Medical Staffing, Inc.	Locum Tenens Psychiatric Services	\$2.5 million	Approved for procurement by BOS through Board Letter request for Single Source Authority 05/05/20 (3), and 04/24/18 (3)	6/30/2021	Categorical Exemption for Medical or Surgical Equipment, Supplies or Professional Services (A-87, Section 2. I)					
The infection control consultant provides analysis, recommendations, and other support to ensure adequate infection control policies and procedures are in place, inclusive of coronavirus (COVID-19), at various County facilities, which may include the Convention Center and the Public Health Hotel. These medical services are categorically exempt from the A-87 requirement for Competitive Procurement.	553656	San Diego County Psychiatric Hospital	Steven Hirsch and Associates	Infection Control Consultation Services	\$0.1 million	Authorized under A-87 which grants the DPC Director authority to approve sole source procurements up to \$50,000.	6/30/2021	Categorical Exemption for Medical or Surgical Equipment, Supplies or Professional Services (A-87, Section 2. I)					
Total Estimated Annual Budget					\$46.1 million*	*excludes inpatient services which varies based on actual bed utilization							

^{*} Budget amounts rounded to the nearest hundred thousand

Table 3: Behavioral Health Services Contract Amendments in Accordance with Recommendation #5b

Service Description	Contract Number	Population Served	Contractor Name	Program Name	Annual Budget*	Previous Authority	Contract End Date						
1. Augmented Services Programs													
Augmented Services Programs (ASP) provide additional services to individuals with serious mental illness in licensed residential care facilities, also referred to as board and care facilities, to help them maintain or improve functioning in the community and to prevent or minimize institutionalization. These services are available at licensed board and care facilities, with the primary goal of stepping down to a lower level of care. Due to the COVID-19 pandemic, hospital emergency departments are facing patient surges, including an increased number of patients with psychiatric presentations and who are experiencing behavioral health crises. This is resulting in an increased number of patients who are utilizing admin days and backlog of patients waiting to step down to lower levels of care. To alleviate this issue and to support surge capacity, existing augmented services programs (ASPs) may be expanded.	560378	Adults and Older Adults	Casa De Oro Residential Care aka Anthem Compassionate Care	Casa De Oro ASP	\$0.1 million	Approved for procurement by Board of Supervisors (BOS) via Board Letter on 06/19/18 (9)	6/30/2024						
	560381		Carroll's Community Care	Carroll's Community Care ASP	\$0.2 million	Approved for procurement by Board of Supervisors (BOS) via Board Letter on 06/19/18 (9)	6/30/2024						
	560382		Carroll's Residential Care	Carroll's Residential Care ASP	\$0.2 million	Approved for procurement by Board of Supervisors (BOS) via Board Letter on 06/19/18 (9)	6/30/2024						
	560379		Fancor Guest House	Fancor Guest House ASP	\$0.3 million	Approved for procurement by Board of Supervisors (BOS) via Board Letter on 06/19/18 (9)	6/30/2024						
	560380		Orlando Residential Care	Orlando Residential Care ASP	\$0.2 million	Approved for procurement by Board of Supervisors (BOS) via Board Letter on 06/19/18 (9)	6/30/2024						
	562384		Casa El Cajon	Casa El Cajon	\$0.1 million	Authorized under A-87 which grants the County CAO authority to approve single source procurements up to \$100,000.	4/30/2021+						
Total Estimated Annual Budget		\$1.1 million	*Included in Table #2 above for extension										

^{*} Budget amounts rounded to the nearest hundred thousand



Dr. Luke Bergmann, Director, Behavioral Health Services
Health and Human Services Agency

January 26, 2021



Continuity of Behavioral Health Services





Actions Taken to Maintain Community-Based Behavioral Health Services Across San Diego County

- Contract Procurements
- Contract Extensions

Services Impacted by Recommended Actions:

- Assisted Outpatient Treatment
- Augmented Services Programs
- Homeless Outreach
- Integration Services
- Inpatient Services
- Prevention & Early Intervention
- Clubhouses
- Residential
- Care Coordination & Case Management
- Support Services, including Housing Support
- Outpatient Mental Health & Substance Use Treatment

Costs Associated with Recommended Actions:

Approximately \$175.2 - 183.3 million in FY 2021-22

71

Recommended Actions





Recommendation #1:

- Issue competitive solicitations and award 21 contracts
- Service areas include: housing support services, homeless outreach workers, case management services, outpatient mental health services, clubhouse services, etc.
- FY 2021-22 Total Estimated Cost: \$27.9M

Recommendation #2:

- Amend and extend 54 existing competitively procured contracts
- **Service areas include:** outpatient mental health & substance use services, prevention services, residential services, training, etc.
- FY 2021-22 Total Estimated Cost: \$104.2M

Recommendation #3:

- Amend and extend 27 existing single source contracts
- **Service areas include:** inpatient services, residential services, behavioral health support services, etc.
- FY 2021-22 Total Estimated Cost: \$46.1M

Recommended Actions





Recommendation #4:

- Issue a Request for Statement of Qualifications and award contracts for Augmented Services Programs (ASP)
- FY 2021-22 Total Estimated Cost: \$1.8M

Recommendation #5 a & b:

- Expand Augmented Services Program (ASP) capacity in support of COVID-19 surge needs through the a) execution of single source contracts, and b) by amending existing ASP contracts
- FY 2021-22 Total Estimated Cost: \$2.9M

Recommended Actions





Recommendation #6:

- Execute the Cooperative Agreement with the State Department of Rehabilitation for mental health employment services for FYs 2021-22 through 2023-24.
- FY 2021-22 Total Estimated Cost: \$0.4M

Recommendation #7:

Ratify the FY 2020-21 Performance Contract Agreement with the California Department of Health Care Services, which establishes the County's responsibility to provide integrated and coordinated public mental health services and will result in no estimated costs.



ITEM 11: AUTHORIZE COMPETITIVE SOLICITATIONS AND AMENDMENTS TO EXTEND EXISTING BEHAVIORAL HEALTH SERVICES CONTRACTS, AUTHORIZE A REQUEST FOR STATEMENT OF QUALIFICATIONS, SINGLE SOURCE PROCUREMENTS, AND AMENDMENTS FOR AUGMENTED SERVICES PROGRAMS, AUTHORIZE EXECUTION OF REVENUE AGREEMENT WITH THE STATE DEPARTMENT OF REHABILIATION, AND RATIFY BEHAVIORAL HEALTH SERVICES PERFORMANCE **CONTRACT AGREEMENT WITH THE STATE**

> Dr. Luke Bergmann, Director, Behavioral Health Services Health and Human Services Agency

> > January 26, 2021





AGENDA ITEM

DATE:

January 26, 2021

13

TO:

Board of Supervisors

SUBJECT

FRAMEWORK FOR THE FUTURE: SAVING LIVES AND IMPROVING HEALTH OUTCOMES THROUGH COMPREHENSIVE HARM REDUCTION APPROACH (DISTRICTS: ALL)

OVERVIEW

One of the most challenging illnesses facing our society is chronic substance use disorder (SUD). People Who Inject Drugs (PWID) are a subset of substance users that are the most marginalized and have poor health. This is due to the high risk of overdosing due to isolation and contracting blood-borne viruses such as Human Immunodeficiency Virus (HIV) and Hepatitis C Virus (HCV) through sharing needles.

If we are going to overcome this public health crisis, achieve local goals the County has set to end the HIV and HCV epidemics and save lives, we must implement best practices and include all tools in our County toolbox.

The Health and Human Services Agency submitted a memo to the Board on January 14, 2021, with findings based on an environmental assessment in San Diego of PWID and recommendations rooted in academic research led by San Diego State University Institute of Public Health (SDSU-IPH) and Family Health Centers of San Diego. The memo clearly demonstrate that injection drug use of both opioids and other substances is a serious growing problem in San Diego County, and that there is an urgent need for evidence-based interventions, including Syringe Services Programs (SSP) and other harm reduction strategies to be expanded and barriers to care removed.

Today, I am recommending that our Board direct the Chief Administrative Officer (CAO) to establish an action plan to realize a Syringe Services Program to meet current needs as well as a comprehensive County Substance Use Harm Reduction Strategy that broadens the existing "Opioid and Prescription Drug Misuse" strategy to bring a harm reduction approach to all substance use interventions across the County with the aim of saving lives and improving health outcomes.

SUBJECT: FRAMEWORK FOR THE FUTURE: SAVING LIVES AND IMPROVING

HEALTH OUTCOMES THROUGH COMPREHENSIVE HARM

REDUCTION APPROACH (DISTRICTS: ALL)

RECOMMENDATION(S) CHAIR NATHAN FLETCHER

1.) Find that any prior Board direction opposing harm reduction programs, including the December 9, 1997 resolution entitled "Resolution to Oppose Needle Exchange Programs" (No. 97-381) shall no longer be in effect.

- 2.) Direct the Chief Administrative Officer (CAO) to create an Action Plan to realize a Syringe Services Program to meet the needs of San Diego County's population, including identification of necessary resources, and program partnerships in accordance with findings and recommendations in the January 14, 2021, HHSA memo and accompanied SDSU- IPH study, Environmental Assessment on People Who Inject Drugs, and report back to the Board with regular updates.
- 3.) Direct the CAO to return within 90 days to the Board with a comprehensive County Substance Use Harm Reduction Strategy including immediate, intermediate and long-term actions that broadens the existing "Opioid and Prescription Drug Misuse" strategy to bring a harm reduction approach to all substance use interventions across the County.

FISCAL IMPACT

There is no fiscal impact associated with this board action.

BUSINESS IMPACT STATEMENT

N/A

ADVISORY BOARD STATEMENT

At the January 7, 2021, Behavioral Health Advisory Board (BHAB) meeting, the Director of Behavioral Health Services presented on the work to date of an Ad Hoc Committee created by the Board to conduct a needs assessment to establish a Syringe Services Program (SSP). The BHAB members expressed support in concept of the findings, recommendations and moving forward with integrating harm reduction strategies, including SSP, into the County's continuum of services.

BACKGROUND

One of the most challenging illnesses facing our society is chronic substance use disorder (SUD). This ailment often leads to poor health, premature and accidental death, unemployment, homelessness, and shattered lives of individual users and their families. Access to services to treat individuals with SUD is sparse compared to other behavioral health and physical health disorders. People Who Inject Drugs (PWID) are a subset of substance users that are the most marginalized and have poor health. This is due to the high risk of overdosing due to isolation and contracting blood-borne viruses such as Human Immunodeficiency Virus (HIV) and Hepatitis C Virus (HCV).

In an effort to overcome this public health crisis and gain momentum in our County initiatives to end the HIV and HCV epidemics, I brought a proposal forward on March 10, 2020, to enable

SUBJECT: FRAMEWORK FOR THE FUTURE: SAVING LIVES AND IMPROVING

HEALTH OUTCOMES THROUGH COMPREHENSIVE HARM

REDUCTION APPROACH (DISTRICTS: ALL)

County Health and Human Services Agency to pursue Syringe Services Programs (SSP) and seek state and federal funding to support implementation. The action included updating the Board's position opposing SSP as documented in the 1997 Board Resolution.

At the time, the Board postponed the proposal (including opposing the 1997 Board Resolution) and opted to create an Ad Hoc Committee made up of county staff, professionals and stakeholders to conduct a needs assessment and operational planning to establish an SSP and return to the Board for consideration.

In response, the Health and Human Services Agency submitted a memo to the Board on January 14, 2021, with findings based on needs assessment and recommendations rooted in academic research led by San Diego State University Institute of Public Health (SDSU-IPH) and Family Health Centers of San Diego. The memo and its findings clearly demonstrate that injection drug use of both opioids and other substances is a serious growing problem in San Diego County, and that there is an urgent need for evidence-based interventions, including SSPs and other harm reduction strategies to be expanded and barriers to care removed. The Ad Hoc Committee recommends that in order for these new services to be successfully realized, the County should work to improve organizational planning, expand services and education, and reduce stigma from community and professionals.

Today, I am recommending that our Board direct the Chief Administrative Officer (CAO) to establish an action plan to realize a Syringe Services Program to meet current needs as well as a comprehensive County Substance Use Harm Reduction Strategy that broadens the existing "Opioid and Prescription Drug Misuse" strategy to bring a harm reduction approach to all substance use interventions across the County with the aim of saving lives and improving health outcomes in our community.

There are numerous strategies that could be included in this approach. Due to stigma attached to SUD, community attitudes and perceptions as well as government policies have created barriers for access to treatment and support services. These barriers include overly burdensome permitting processes to site services, criminalizing the act of using, and barring eligibility for support programs like federal housing vouchers that are needed to help individuals recover and repair their lives.

As illustrated in my previous board letter, citations in multiple studies and the findings from the Ad Hoc Committee, SSPs and other harm reduction strategies are a proven strategy with over 30 years of academic research demonstrating effectiveness in preventing infectious disease, providing a bridge to services and substance use treatment and overdoses without increasing injection of drugs.

We must rise to the challenge and allow our County health professionals to adopt SSPs and other harm reduction strategies as a tool to connect with substance users with services and treatment to help them recover and improve their circumstances. If we do not take prompt action to reverse our position and allow our public health and behavioral health department to provide these services in our region as a part of our continuum, we could see an increase in deadly infectious diseases,

SUBJECT: FRAMEWORK FOR THE FUTURE: SAVING LIVES AND IMPROVING

HEALTH OUTCOMES THROUGH COMPREHENSIVE HARM

REDUCTION APPROACH (DISTRICTS: ALL)

overdose deaths and more lives compromised. We cannot allow another life to be lost on our watch when we know services are within reach to help.

I urge your support for the actions in this board letter to 1.) find that any prior Board direction opposing harm reduction programs shall no longer be in effect, 2.) direct the Chief Administrative Officer (CAO) to create an Action Plan to realize a Syringe Services Program, and 3.) create a comprehensive County Substance Use Harm Reduction Strategy that broadens the existing "Opioid and Prescription Drug Misuse" strategy to bring a harm reduction approach to all substance use interventions across the County and report back to the board with progress and a final report.

This policy aligns with our <u>Framework for the Future of San Diego County</u>. The Framework prioritizes communities and populations in San Diego that have been historically left behind. Through this Framework, we are fighting for: racial justice, health equity, economic opportunity, environmental protection, community-centered public safety, and fundamental changes to county operations.

LINKAGE TO THE COUNTY OF SAN DIEGO STRATEGIC PLAN

Today's proposed recommendation supports the Building Better Health and Living Safely initiatives in County of San Diego's 2021-2026 Strategic Plan.

Respectfully Bubmitted

NATHAN FLETCHER Chair, Fourth District

ATTACHMENT(S)

Attachment A: County Health and Human Services Agency Memo re: Report Back on Adopting Best Practices to Reduce Harm, Promote Recovery and Protect Public Health (January 14, 2021)

Attachment B: March 10, 2020 (3) Board Letter: Adopting Best Practices to Promote Recovery and Protect Public Health



COUNTY OF SAN DIEGO

BOARD OF SUPERVISORS NORA VARGAS

JOEL ANDERSON Second District

TERRA LAWSON-REMER Third District

NATHAN FLETCHER Fourth District

JIM DESMOND

AGENDA ITEM

DATE: **January 26, 2021** 14

TO: **Board of Supervisors**

SUBJECT: 2021 LEGISLATIVE PROGRAM REVISION (DISTRICTS: ALL)

OVERVIEW

On January 12, 2021, your Board paused the authority of the 2021 Legislative Program adopted on October 27, 2020 and directed the Chief Administrative Officer (CAO) to draft a new 2021 Legislative Program that includes abbreviated guiding principles and key legislative initiatives and priorities. Your Board also directed the CAO to review and calibrate the roles and responsibilities of the Office of Strategy and Intergovernmental Affairs staff and functions according to the new legislative program approach focused on proactive action and nimble advocacy of adopted guiding principles and legislative priorities and to have these changes reflected in Board of Supervisors Policies M-1 and M-2. In addition, your Board also suspended the authority of Board of Supervisors Policies M-3 through M-61.

Today's action, for your Board's consideration, includes a new 2021 Legislative Program, recommendations to permanently sunset Board of Supervisors Policies M-3 through M-61, and revisions to Board Policies M-1 and M-2. The goal of all of these actions is to provide the Office of Strategy and Intergovernmental Affairs and the County's representatives in Sacramento and Washington, D.C. with the ability to proactively advocate and engage in conversations to more effectively move forward with legislation that meets the Board's priorities and the operational needs of the County of San Diego.

RECOMMENDATION(S) CHIEF ADMINISTRATIVE OFFICER

- 1) Approve the revised 2021 Legislative Program Priority Issues (Attachment A) and Guidelines (Attachment B).
- 2) Permanently sunset Board of Supervisors Policies M-3 through M-61.
- 3) Approve the revisions to Board of Supervisors Policies M-1 and M-2 (Attachment C and D).

FISCAL IMPACT

There is no fiscal impact associated with these recommendations. No additional staff years are required.

SUBJECT: 2021 LEGISLATIVE PROGRAM REVISION (DISTRICTS: ALL)

BUSINESS IMPACT STATEMENT

N/A

ADVISORY BOARD STATEMENT

N/A

BACKGROUND

The Board of Supervisor's (Board) Legislative Program provides policy direction to staff and to the County's Sacramento and Washington, D.C. representatives regarding advocacy efforts on the County's behalf. This direction allows timely input regarding legislation and issues of interest to the County. Previous versions of the Legislative Program have included statements and Board directions going back more than a decade and have resulted in a combined document that is more than 100 pages. In addition, there have been standalone Board Policies that comprise Section M of the Board Policy Manual, that are each reviewed every seven years, and sometimes contain outdated or duplicative statements to the Legislative Program. In addition, many of the topics of the M Policies are not consistent with the newly established priority areas outlined by the Board action on January 12, 2021. Prior to the Board's January action, staff in the Office of Strategy and Intergovernmental Affairs (OSIA) had conducted an analysis of the utilization of the County's Legislative Program for the last 5 years and reviewed the Legislative Programs of other counties in California, as well as other local municipalities. The revisions before you today reflect the Board's direction and the analysis done by OSIA and are broken into three areas: the Legislative Program Priorities, the Legislative Program Guidelines, and the Board of Supervisors M Policies.

Legislative Program- Priorities

The Legislative Program has traditionally included a Priority Issues section that has encompassed information regarding anticipated state and federal legislative priorities, Board determined priorities, and operational concerns. Each priority section was accompanied by statements authorizing specific advocacy in these topic areas. Although considered "new" each year, with the addition of Board Priorities throughout the years, that section of the document had grown to 49 pages. The revised version before you today has one action statement at the beginning of the document that directs staff to engage in a few very focused priority areas. This revised version gives the County more flexibility to influence the very targeted areas we most want to impact. The Priority Issues section is Attachment A.

Legislative Program- Guidelines

There are a number of proposals of interest to the County that may be introduced or sponsored by legislators in Sacramento or Washington, D.C. or by other interest groups and associations. The previous version of the Policy Guidelines section authorized staff to support or oppose legislation on these policy issues as introduced by someone else. This traditionally had been a very reactive response, and limited staff's ability to weigh in on legislation until after a bill had been introduced. In addition, this section was built upon year after year with statements that were extremely specific, and sometimes trivial, losing sight of the broader intent and relevance.

The revised version of the Policy Guidelines has removed all statements that were inconsistent with the Board's January 12, 2021 direction; combined any needed remaining statements in broad

SUBJECT: 2021 LEGISLATIVE PROGRAM REVISION (DISTRICTS: ALL)

subject matter statements to allow for more advocacy on issues; and added verbs like "engage" and "ensure" rather than just "support" and "oppose" so that OSIA staff and our County representatives may take the most appropriate action to benefit the County. The Policy Guidelines is Attachment B.

Board of Supervisors Policies

M-3 through M-61

Board of Supervisors Policies, Section M (the M Policies) are a collection of policies that provide legislative direction to County Staff. Policies M-1 and M-2 establish the Legislative Program and advocacy authority, and policies M-3 through M-61 are focused on individual subject matters such as "Criminal Gang Activity," "Fraud Prevention in Public and Medical Assistance Programs," and "Illegal Immigration." These policies have several very limiting factors: first, there are many topics inconsistent with the Board's January direction; second, some of them were added as far back as the late 1970's and are no longer relevant; third, they contain both redundant and conflicting statements to the Legislative Program; and last, they are on a seven-year sunset review cycle which doesn't flow with the pace of changing legislative priorities. Due to all of these factors, the relevant and useful statements contained in these M policies have been moved to the revised version of the Legislative Program before you today so that they are now part of the package reviewed each year. These include statements regarding the advocacy for children and youth and statements related to homelessness. The recommendation before you today is to permanently sunset the remaining Board of Supervisors Policies M-3 through M-61.

M-1 and M-2

Board Policy M-1 establishes the creation and submission of Sponsorship Proposals. Minor revisions were made to this policy to add more inclusive and flexible language, as well as an additional paragraph that allows action on an item included in the Priority Issues or Guiding Principles. For example, if at some point during the legislative session an opportunity arises in the gut-and-amend process to have legislative action that benefits the County in the approved Priority areas, this new language allows us the ability to be proactive in that regard.

Board Policy M-2 establishes the policies for advocacy on behalf of the County. While any elected official can advocate their own position at any time, this policy details how an official County position is achieved. In addition, past procedures for communication to the Board on legislative positions or bills of interest were not included in this policy. Revisions to this policy include the addition of communication processes to the Board, significant changes to the intent to be proactive and nimble in our advocacy efforts as opposed to reactive, and added the authority to act cooperatively with other regional municipalities and entities to influence legislation that impacts the entire region.

LINKAGE TO THE COUNTY OF SAN DIEGO STRATEGIC PLAN

Today's proposed adoption of the 2021 Legislative Program supports the Building Better Health, Living Safely, Sustainable Environments/Thriving and Operational Excellence initiatives of the County of San Diego's 2021-2026 Strategic Plan by providing staff in the Office of Strategy and Intergovernmental Affairs, as well as the County's Sacramento and Washington, D.C.

SUBJECT: 2021 LEGISLATIVE PROGRAM REVISION (DISTRICTS: ALL)

representatives, guidance on advocacy efforts on behalf of the County at the state and federal levels. These advocacy efforts include seeking funding to sustain important programs or more flexibility in the delivery of services to the residents of this region.

Respectfully submitted,

HELEN N. ROBBINS-MEYER Chief Administrative Officer

ATTACHMENT(S)

Attachment A – Priority Issues

Attachment B – Policy Guidelines

Attachment C – Board Policy M-1

Attachment D – Board Policy M-2

Attachment E – Board Policy M-1 Informational version

Attachment F – Board Policy M-2 Informational version



County of San Diego PRIORITY ISSUES

The County of San Diego will actively engage in legislation in the following areas at the state and federal level to ensure such legislation benefits County operations and the clients, customers, and constituents we serve.

The County of San Diego will actively pursue all available funding to lift up and invest in our communities to ensure the San Diego region receives its fair share.

BEHAVIORAL HEALTH

The County of San Diego Health and Human Services Agency, Behavioral Health Services (BHS) provides services under three major categories: Alcohol and Drug Services, Inpatient Health Services, and Outpatient Mental Health Services. BHS provides a continuum of services for children, youth, families, adults, and older adults. BHS promotes recovery and well-being through prevention, treatment, and intervention, as well as integrated services for clients experiencing co-occurring mental illness and alcohol or substance use issues. For clients and patients who require a hospital setting, inpatient health services are offered at the San Diego County Psychiatric Hospital, Edgemoor Distinct Part Skilled Nursing facility, and other contracted facilities.

In San Diego County, the Behavioral Health Continuum of Care (Continuum of Care) has brought together diverse stakeholders, including justice partners, hospitals, community health centers, and other community-based providers, to create data-driven system-wide changes to help ensure individuals can quickly access behavioral health services to meet their immediate needs, and support their long-term journey to recovery. The vision of the Continuum of Care is: to achieve a transformational shift from a model of care driven by crises, to one driven by chronic or continuous care and prevention through the regional distribution and coordination of resources to keep people connected, stable, and healthy.

The County of San Diego will pursue funding opportunities to support the vision of the Continuum of Care and engage in legislation that promotes a robust Behavioral Health system of care for the San Diego region.

In addition, a critical component of providing Behavioral Health Services is the decriminalization of behavioral health. The County will actively engage in legislation that creates a supportive system of care for those with mental illness and substance use disorders.

CLIMATE CHANGE AND THE ENVIRONMENT

The County of San Diego will work with regional partners to advance efforts to reduce the impacts of Climate Change in San Diego County, including achieving zero carbon emissions by 2035. These

efforts include, but are not limited to, reducing greenhouse gas emissions, programs and policies that prioritize environmental justice and equity, and preservation of natural ecosystems to function for carbon sequestration. The County will also focus on additional key areas:

Wildfires

Due to the history of catastrophic wildfires in the region, the County of San Diego has continued to target reducing the risk of wildfires by improving local policies and codes and implementing innovative programs to help residents prepare for the next disaster. Wildfires are naturally occurring within the San Diego region and need to be managed as such. Climate change is making the wildfires in our region more destructive and more frequent, such that the fire season is nearly year-round. The County employs a comprehensive approach to fire protection, which includes areas of focus such as fire suppression (expanding coverage and purchasing equipment), fire and building codes, defensible space, land use planning, and community engagement through education and outreach. The County will engage in legislation and administrative action that address appropriate vegetation management and habitat restoration; the removal of dead, dying, and diseased trees; reduces community wildfire risk and/or strengthens community resiliency following a major wildfire; adopts land use changes to avoid building in high wildfire-prone areas; and addresses post-fire flood mitigation issues.

Water Quality

O Under the Beach and Bay Water Quality Monitoring Program, the County of San Diego Department of Environmental Health and Quality performs beach water quality sampling. When poor water quality is identified, the public is notified through a number of different outlets, including social media, a website, telephone hotline, press releases, and posted signs on affected beaches. Warnings of contaminated water are provided to the public at beaches impacted by sewage spills when monitoring indicates bacteria levels exceed state health standards, or during other events that may pose an imminent threat to public health. Additionally, as an international border county, local beaches in the South Bay may also be impacted by cross-border sewage flows, making binational and regional coordination and responsiveness to potential beach water quality impacts essential for public health protection. Funding to support local beach water quality monitoring and information-sharing is beneficial for public health authorities in the border region. The County will engage in legislation to support increased funding for beach water testing efforts, improved scientific methods for testing, and additional programs that may benefit the 70 miles of coastline beaches in San Diego County.

Habitat

There currently are more than 60 species in San Diego County listed as rare, threatened or endangered by the State and federal governments, and there are more species of concern in San Diego than in any other county in the continental United States. The implementation of multi-species Habitat Conservation Plans (HCPs), as well as Natural Community Conservation Plans (NCCPs), is critical to our conservation measures. The County will engage in legislation and pursue funding that protects habitats and species of concern across the region.

Environmental Justice and Protection

 Environmental justice is defined as the equal protection and meaningful involvement of all people regardless of race, color, national origin, or income with respect to the development, implementation, and enforcement of environmental laws, regulations, and policies. Historically, those most impacted by the effects of climate change, pollution and other environmental issues have come from low-income communities and communities of color. The County will engage in efforts to improve and maintain a clean and healthful environment that acknowledges the importance of environmental justice to ensure a healthy environment for all to live, learn, and work in.

DATA INFRASTRUCTURE

Data is essential to shaping public policy that is equitable, impactful, and appropriate. The County of San Diego interfaces with many data portals to administer programs funded by the State and Federal Government. The County will advocate that the data systems are interconnected and accurate and support legislation that provides funding and capability to enhance our own data efforts. Additionally, the County will advocate for, and support, legislation that removes barriers to data sharing between various programs and systems for the purposes of providing person-centered case management and support.

ENSURING SAFE COMMUNITIES

One of the most important roles of local government is ensuring the safety of the public. It is critical to keep all members of our community protected from crime and abuse. The aim of the County of San Diego is to advocate for policies that create a system that is equitable, fair, and just. It is vital not only that crime rates remain low, but that the community feels safe where they live, work, and play; and that includes fostering trust with members of the law enforcement community. Equally important is the County must have appropriate resources to respond to disasters and emergencies.

The County of San Diego will engage in legislation that protects the safety of those in our community; provides necessary resources to our justice partners to provide training and rehabilitative programming; and provides services and supports to victims of crime, disasters, and emergencies.

EQUITY AND JUSTICE

Recent events in our country have brought to light the systemic racism and racial inequities that have been created and sustained over time. This forced many difficult and necessary conversations around equity and racial justice within the County organization and to the people we serve. In 2020, there were steps to address disparities with the creation of the San Diego County Human Relations Commission and with the establishment of a new Office of Equity and Racial Justice. These entities will identify systemic bias within the County organization and will promote respect and integrity for all individuals. The County will engage in efforts that highlight and advance actions that address systemic racism and racial inequities to root out disparities and create a more just and equitable region.

HOMELESSNESS AND AFFORDABLE HOUSING

The County administers or delivers health and social services to the homeless in all incorporated cities as well as the unincorporated areas of the county. The County also secures, subject to available resources, housing and care coordination for homeless residents. Funds for these services come primarily from the federal and state governments, although County general funds are also contributed. The County takes the lead where appropriate to secure federal and state resources and

also works collaboratively with the non-profit community and participating cities in the completion of competitive grants from the U.S. Department of Housing and Urban Development (HUD) and state and federal agencies for funds that would assist families and people experiencing homelessness or at risk of homelessness.

The San Diego region needs more affordable housing. The demand for new affordable housing is greater than the number of units developed, and available housing is beyond the reach of many families to buy or rent. Reports continue to show that housing in San Diego County is among the most expensive in the nation and economic conditions have significantly impacted those that are most in need of affordable housing solutions.

The County of San Diego and cities in the region operate a number of programs to provide and develop affordable housing. These programs offer rental assistance, affordable housing opportunities for renters, financial assistance for first-time homebuyers, and resources for persons experiencing homelessness.

Homelessness touches more than housing and social services. The operations of County Parks, Public Works, Public Safety, and others are impacted by homelessness. By advocating for funding and appropriate programming and needed housing, not only will those clients experiencing homelessness be given the services they need, but the operations of the County will be able to focus their resources appropriately.

The County will engage in legislation at the state and federal level that provides necessary funding, programs, and support services for those experiencing and those at risk of homelessness. Additionally, the County will engage in efforts to increase the number of rental assistance vouchers available and enhance funding for rental assistance vouchers that support low-income and other vulnerable populations. The County will also work with local municipalities, community partners, the State, and the Federal Government to ensure legislation supports the creation of affordable housing in our region. This legislation should be flexible to administer in order to meet the specific needs of our region and funding should be at a level commensurate with the need.

PANDEMIC RESPONSE AND COVID-19

In February 2020, the County of San Diego declared a state of emergency due to a novel coronavirus (COVID-19). The virus spread rapidly across the globe, resulting in the World Health Organization declaring COVID-19 a pandemic in March 2020.

As with other areas throughout the nation, there is widespread community transmission of COVID-19 in San Diego County. The County has made significant efforts to mitigate the spread of the virus through testing, contact tracing and treatment, and by acquiring and providing Personal Protective Equipment (PPE) to first responders and healthcare workers on the frontlines. Additionally, now that an approved vaccine is available, the County is expanding its efforts to vaccinate the public. Maintaining sufficient levels of PPE and testing materials along with supply of the vaccine and appropriate staffing to administer the vaccine will be critical to overcoming this pandemic.

Pandemics are a rare event, as such there is a need for further state and federal action and resources to allow our County to prepare for and respond to the next pandemic or infectious disease that will impact our County. These include, but are not limited to: legislation that would allow for the administrative or temporary suspension of state and/or federal regulations that inhibit a region's ability to respond to a pandemic; legislation that provides resources or funding to proactively plan

and prepare and respond to a future pandemic by acquiring appropriate levels of PPE, testing supplies and materials, and/or vaccine supplies; legislation that allows flexibility of existing funding streams and disaster specific funding streams to meet the needs of our region; legislation that allows for flexibility of revenue backfills to County programs; legislation or administrative action to allow flexibility to adapt policies to continue to provide critical services.

The County of San Diego will engage in legislation introduced at the State and Federal level in response to the COVID-19 pandemic that will allow the County to adequately continue to respond to COVID-19, including but not limited to additional funds for response and economic recovery efforts. The County will also engage in legislation that bolsters public health infrastructure across all levels of government to adequately prepare for and respond to a future pandemic.

TRANSPORTATION

Improving the transportation network throughout San Diego, while maintaining environmental quality is a high priority for the County of San Diego. The County has seen an increased demand placed on the region's transportation system, which requires balancing the need for road maintenance projects and transit infrastructure to alleviate traffic congestion, environmental impacts, and the degradation of existing roadways. Additionally, increasing zero and low carbon transportation options is an important component for the future of transportation and mobility in the region as they improve fuel economy, lower fuel costs, and reduce emissions. The County will pursue funding opportunities and engage in legislation that provides the necessary resources for our region to maintain and/or improve its transportation network, along with efforts to reduce emissions through green technology.



County of San Diego POLICY GUIDELINES 2021 Legislative Program

GUIDING PRINCIPLES

- Work collaboratively with cities, the state, tribal nations, and binationally with the City of Tijuana, Baja California Norte, and the Country of México.
- Protect the fiscal integrity of the County by stabilizing local government financing to increase funding to local agencies in an equitable manner.
- Ensure equity, transparency, and access for all residents.
- Provide a system/continuum of care that is operationally feasible for the County and benefits the residents of our region.
- Streamline eligibility processes for state and federal programs that will assist with timely processing and ensure benefits get to the clients who need them.
- Support an equitable allocation and distribution of state and federal funding that allows for flexibility and the participation of all jurisdictions throughout California, including San Diego.
- Ensure equitable access to goods or services focused on providing needed resources and programs to underserved communities.
- Support the reauthorization of federal bills that benefit the county including, but not limited
 to, infrastructure, the Farm Bill (the Supplemental Nutrition Assistance Program), the
 Temporary Assistance for Needy Families program, the Older Americans Act, the
 Endangered Species Act and/or the Ryan White HIV/AIDS Treatment Extension Act of
 2009.
- Pursue sustainable grant funding at the state and federal level.
- Support a community-based approach to public safety.

POLICY GUIDELINES

I. GENERAL GOVERNMENT

- 1. Support legislation that allows local, state, or federal governments to streamline operations and business efficiency.
- 2. Support legislation that includes an equitable allocation and distribution of state and federal funding.
- Support legislation that recognizes the unique characteristics of border areas and the needs for related infrastructure such as ports and ports of entry, transportation related to goods movement, and air and water quality improvements related to cross border pollution.
- 4. Support legislation and administrative actions that provides consistency between California code of regulations and state statutes.
- 5. Support legislation that would eliminate financial and service level maintenance-of-effort requirements.
- 6. Support full funding of the Payment in Lieu of Taxes (PILT) program.
- 7. Support legislation that backfills counties' revenue losses and allows for flexibility of revenue backfills to County programs.
- 8. Support legislation that improves cross-system integration of funding sources.

A. Equity

- 1. Support legislation that would strengthen protections and remedies against employment discrimination.
- 2. Support legislation that would have a positive impact on equity for all.

B. Disaster

- 1. Support legislation that would provide flexibility and/or increased funding to the San Diego region to prepare, respond, and recover from a disaster or emergency.
- 2. Support legislation that ensures continued funding for local jurisdictions for emergency planning, training, drills, and response and recovery activities until all spent fuel is removed from the site of the decommissioned San Onofre Nuclear Generating Station.
- Support legislation that would remove and relocate outside of the San Diego region the spent nuclear fuel stored at the decommissioned San Onofre Nuclear Generating Station.

C. Economic and Workforce Development

- 1. Support legislation that would ensure availability and access to job training, education, and other services needed by individuals to assist them in obtaining, retaining, and advancing in employment to their maximum capacity.
- 2. Support legislation that facilitates the State's engagement with federal small business technical assistance grants.

D. Registrar of Voters

- 1. Support legislation that promotes a fair, equitable, and engaged voting process.
- 2. Support legislation that improves or enhances the County of San Diego's ability to send all voters a mail ballot.

E. Broadband

1. Support legislation to improve broadband accessibility and affordability in San Diego County and throughout California.

F. Employee and Labor Relations

- 1. Support full cost recovery for salary, benefits, and administration for all employee relationships.
- 2. Support legislative and administrative actions that provide adequate training and safety measures to County employees who administer programs.

G. Liability

1. Engage in legislation that protects the County from liability.

H. Local Public Meeting Procedure

1. Support legislation that would improve access to telephonic or remote participation in public meetings and policy making processes.

I. Military and Veterans Affairs

- 1. Support legislation that would provide adequate funding to the County of San Diego for programs targeted to San Diego County's military and veteran populations.
- 2. Support legislation that would ensure that appropriate benefits and services are provided to eligible military, veterans, and their dependents.

J. Project Delivery Authority

1. Support legislation that gives local governments and agencies greater flexibility to use alternative delivery methods for construction projects.

II. HEALTH AND HUMAN SERVICES

A. Behavioral Health

- 1. Support legislation that promotes funding flexibility in categorical funding for behavioral health services, including in the allocation of Mental Health Services Act (MHSA) funds and realignment funds, to be responsive to data-informed needs.
- 2. Support efforts to increase accessibility and funding for quality substance use and/or mental health services for children, adults, and families.
- 3. Support legislation that supports the expansion of Medi-Cal reimbursement for behavioral health services.
- 4. Support legislation to provide Institutions for Mental Disease appropriate reimbursement rates.
- 5. Support legislation that would provide additional funding and resources to caregivers.

B. Child Care and Development

1. Support measures that enhance the overall quality, affordability, capacity, accessibility, and safety of early care and education (childcare development) programs.

C. Children and Youth

- 1. Support legislation that increases and supports appropriate temporary shelter care, short- and long-term placements, services, and resource options for children, non-minor dependents, and former foster youth of or at risk of abuse, neglect, or exploitation.
- Support legislation that increases services and resources for caregivers of children, nonminor dependents, and former foster youth who are victims of or at risk of abuse, neglect, or exploitation.

D. Emergency Medical Services (EMS)

1. Support legislation and administrative actions to provide funding and policies to improve the EMS/trauma/specialty care systems and emergency department facilities.

E. First 5 Commission

Support legislation that is consistent with the principles of First 5 San Diego and furthers
the support and improvement of the early care and education system and school
readiness throughout the county.

F. Issues Affecting Older Adults

1. Support efforts to increase resources and services available to vulnerable adults who are unable to live independently, or are victims of, or are at risk of abuse or neglect, and the individuals who provide them with care.

- 2. Support legislation that promotes the sustainability of the In-Home Supportive Services Program through programmatic changes and appropriate cost sharing mechanisms between the State and counties.
- 3. Support legislation that would prohibit the Department of Motor Vehicles from releasing, with minor exceptions, the addresses and personal information of County employees who perform investigations in their personal vehicles.
- 4. Engage in efforts that would support programs to assist older adults to age where they choose, including but not limited to transportation access, housing retrofit, building assisted living support, assess to technology, and end of life care.
- 5. Engage in legislation that builds a care delivery system that provides effective, reliable, high-quality, and efficient services to frail, older adult residents who are living with a serious illness and/or disability.
- 6. Support legislation or administrative actions and funding for a Memory Care Unit at the Veterans Home of California in Chula Vista.

G. Maternal Child Health

- 1. Support legislation that would provide equitable funding in the Title V allocation to California.
- 2. Support legislation that would aid in the implementation of evidenced-based care coordination practices and systems for the whole child within California Children's Services.
- 3. Support legislation that would maintain or enhance appropriation of State General Fund to Maternal Child Health programs.

H. Medi-Cal

- 1. Engage in legislation and administrative actions that provides for a Medi-Cal Managed Care System that provides recipients in San Diego County the highest level of care in the least restrictive environment.
- 2. Engage in Medicaid Waiver applications and/or renewals that improve and build upon San Diego County programs and services.

I. Health Access

- 1. Support legislation that would expand access to, and provide adequate funding for, health coverage for the uninsured.
- 2. Support legislation that would simplify the administration of, application for, and enrollment and eligibility processes for health coverage programs.

J. Public Health

- 1. Engage in legislation to ensure Health Equity is a prioritized component of health-related policy.
- Support legislation that would increase state and federal funding to support public health services, including communicable disease control and prevention activities, and local public health surveillance activities.
- 3. Support legislation and administrative actions that restrict the sales of flavored tobacco products.
- 4. Support legislation that encourages the immunization of children, especially those within communities with low immunization rates.

K. Edgemoor

1. Engage in legislation that would provide funding and/or streamline regulations for Edgemoor.

L. 2-1-1 Services

1. Support legislation that would provide funding to assist in ongoing operation of a 2-1-1 referral system.

III. PLANNING AND LAND USE

A. General Plans and Land Use Planning

- 1. Support efforts to simplify, streamline, and improve land use planning, activities, and matters.
- 2. Protect local control over land-use decisions and flexibility over resources when it makes sense to maintain community character and does not limit housing options for the region. (For example: protecting local input into the citing of wireless cell towers)

B. Cooperation with Tribal Governments

1. Support legislation that recognizes tribal sovereignty and encourages mutually respectful relationships between tribal and local governments.

C. Regional Growth Management

1. Support legislation and funding that would ensure or promote socially, economically, and environmentally sustainable regional growth strategies and management.

IV. PUBLIC SAFETY

A. Animal Services

- 1. Engage in legislation that protects the general welfare and safety of animals.
- 2. Support legislation that would promote the spaying or neutering and/or microchip identification of animals.

B. Child Support Services

- 1. Support legislation, budget, or administrative action to adequately fund child support services.
- 2. Support legislation that promotes flexibility, efficiency, and modernization within the child support program.

C. Justice Programs

- Support legislation that would provide sufficient and sustainable funding from the state
 and federal governments to expand and maintain offender diversion and reentry
 collaborative programming, including behavioral health treatment services, service
 navigation, and housing support for criminal justice offenders with substance use, mental
 health or co-occurring disorders reentering California communities.
- 2. Support funding for programs that divert individuals from the criminal justice system.
- 3. Support efforts to decriminalize behavioral health.
- 4. Engage in legislation that provides resources and/or support to victims of crime.

V. RESOURCES AND ENVIRONMENT

A. Agricultural Services

- 1. Pest, Disease, and Weed Management
 - a. Support continued or increased funding for pest, disease and weed management, including research, regulatory pest exclusion, detection and eradication activities, and outreach to detect and limit the spread of invasive pests and weeds.
 - b. Support legislation that would simplify, streamline, and improve pest, disease and weed management, including improved coordination between federal, state and county programs.

2. Pesticide Regulation

a. Support continued or increased funding for pesticide regulation activities, including education, outreach, compliance assessment activities and data entry.

- b. Support efforts to improve, simplify and streamline pesticide regulation activities, and enforcement.
- 3. Agricultural Standards: Direct Marketing, Organic, Standardization and Eggs
 - a. Support continued or increased funding for regulatory, enforcement, and other activities related to agricultural standards programs that protect consumers and promote equity and quality in the marketplace.
 - b. Support legislation to improve, simplify and streamline regulatory, enforcement, and other activities related to agricultural standards programs that protect consumers and promote equity and quality in the marketplace.

4. Bees

a. Support legislation and funding for regulatory and other activities related to the protection of bees and the beekeeping industry.

B. Energy

1. Support efforts to achieve 100% renewable energy and a rapid transition of fuels toward electric and other low-carbon fuel sources.

C. Environmental Health

- Support legislation and funding that would improve, streamline and simplify waste management, including but not limited to hazardous, medical and universal waste, to ensure proper handling, emergency readiness, and the protection of natural resources and the public.
- 2. Support legislation and funding that would modernize, simplify, and streamline local beach water quality monitoring.
- 3. Support efforts to improve, streamline and simplify the California Retail Food Code and related food safety law to protect the public, provide flexibility to food facilities without compromising public health, and ensure effective regulation at the state and local level.
- 4. Support legislation that would improve health and safety at public spas and swimming pools and increase pool operator knowledge.
- 5. Support legislation that would improve health and safety at body art facilities.
- 6. Support legislation that would improve the County's ability to limit re-occupancy of a residence that has been determined to have been used in the manufacture of Methamphetamine or Fentanyl until such time as the property owner has performed the necessary clean-up and mitigation for hazardous byproducts.
- 7. Support legislation that would encourage accessibility to and promote the advantages of fishermen's markets and local fresh caught seafood.

- 8. Support legislation that would provide full cost recovery for local radiation health protection programs conducted under contract to assist the State.
- 9. Support legislation that provides funding for environmental reporting information systems and funding for the information exchange requirements or modifications that require local data systems to be modified to connect and transmit information to state's data systems.
- 10. Support state and federal funding and efforts to address and eliminate untreated sewage, trash, and sediment that originates from across the U.S.- Mexico border.
- 11. Support legislation that would provide funding for surveillance, control, or outreach to limit the spread of the invasive Aedes mosquitoes which are capable of transmitting diseases, such as Zika, dengue and chikungunya.
- 12. Support legislation that promotes training and funding for disaster preparedness, response, and recovery as it relates to hazardous waste identification, collection, and disposal assistance to local agencies.
- 13. Support legislation that directs increased State Office of Environmental Health Hazard Assessment testing of fish for the presence of contaminants in coastal and inland waterbodies and/or provides funding for local public notification when fish consumption is not safe.

D. Historical and Cultural Preservation

1. Support legislation and funding for the preservation of historical and cultural resources.

E. Land and Water Conservation Fund

1. Support continued or increased funding for the Land and Water Conservation Fund, including increases to the state and local share of funding.

F. Offshore Oil Drilling - Outer Continental Shelf

1. Oppose offshore oil drilling and/or efforts that would allow offshore drilling off the coast of California.

G. Parks and Recreation

- 1. Support legislation and funding that would promote and protect outdoor recreation, including but not limited to the development and maintenance of parks, construction of recreational facilities, implementation of recreation programming, and the preservation and restoration of natural resources.
- Support legislation that would expand the list of advisory panels established by the San Diego River Conservancy to administer the San Diego Rivers Watershed Consortium Program to include those watersheds not previously included.

H. Water Availability and Resources

- Support legislation and funding that would improve affordability, availability and reliability
 of water, potable reuse, and/or protect water resources in the region and throughout
 California.
- 2. Support legislation and funding for drought mitigation and response that would ensure flexible and effective implementation at the local level, if applicable.

I. Watershed Planning and Water Quality Management

- 1. Support legislation that would provide funding for drainage improvement, flood control and hazard mitigation projects, green stormwater infrastructure, and related programs to protect life and property from the impacts of flooding.
- 2. Engage in legislation and administrative actions that ensure water quality is protected, and that federal, state, and local regulations, requirements, and policies are aligned.

J. Wildlife Preservation - Habitat Protection

- 1. Support legislation and funding for preservation, conservation, and restoration efforts, including but not limited to land management, monitoring, and maintenance activities, that protect biological and wildlife resources.
- 2. Support efforts to develop, implement, and fund mitigation plans and/or projects to address the trash and debris flowing downstream into the Tijuana River Valley.

VI. TRANSPORTATION AND PUBLIC WORKS

A. Airports

1. Support legislation and funding for airport and aviation programs that promote safe, secure, and, efficient airport operations, air traffic control and aircraft piloting.

B. Regional Wastewater System Improvements

1. Support legislation and funding to improve, streamline, and simplify local wastewater systems, programs, projects, and related wastewater management activities.

C. Solid Waste

1. Support legislation and funding to improve, streamline, and simplify solid waste planning, disposal, diversion, and recycling activities.

D. Streambed Alteration Permits - Public Projects

1. Support legislation that would improve, streamline, and simplify the streambed alteration permit process.

E. Transportation

- 1. Support legislation to improve, streamline, and simplify local transportation planning, projects, and related activities, such as maintenance, rehabilitation and new construction.
- 2. Support legislation that provides flexible, sufficient, and equitable state or federal transportation funding, without affecting funding sources of other county projects, and/or protects existing state, federal and local transportation funding.
- 3. Support State efforts to prevent suicides on the Coronado bridge, as well as measures to address issues of speeding, debris, guardrails, and wrong-way accidents.

COUNTY OF SAN DIEGO, CALIFORNIA BOARD OF SUPERVISORS POLICY

Subject	Policy Number	Page	
Legislative Proposals – Sponsored by the Board of Supervisors	M-1	1 of 2	

Purpose

To establish the Board of Supervisors' policy regarding legislative sponsorship proposals, and the preparation and submission of such proposals.

Policy

It is the policy of the Board of Supervisors to limit its annual sponsorship of legislation to items that directly interest the County of San Diego. Those matters may also be of regional, statewide, or national interest.

The Office of Strategy and Intergovernmental Affairs shall coordinate preparing and submitting legislative proposals for County sponsorship. The Office of Strategy and Intergovernmental Affairs shall present each calendar year to the Board for its review and approval a proposed Legislative Program. The proposed Legislative Program shall be presented with sufficient time to maximize opportunities to secure State or federal legislators to author such proposals.

The Board may consider sponsorship proposals at any other time where State or federal legislative action is necessary. The Office of Strategy and Intergovernmental Affairs must review and concur with all legislative proposals that County departments submit for Board approval.

In preparing the annual Legislative Program, the Office of Strategy and Intergovernmental Affairs and County departments shall be aware of the practical requirement to limit the size of the program. Limiting the size of the sponsorship program maximizes the opportunities for advocacy on each proposal.

In addition to specific sponsorship proposals each year, it is the Board's intent that the County support legislation consistent with the priorities and guiding principles set forth in the Legislative Program.

Responsible Department

Chief Administrative Office Office of Strategy and Intergovernmental Affairs

Sunset Date

This policy will be reviewed for continuance by 12-31-24.

References

Board Action 11-7-56 (32)

CAO Letter 11-1-56

Board Action 6-23-69 (98)

Board Action 10-30-84 (83)

COUNTY OF SAN DIEGO, CALIFORNIA BOARD OF SUPERVISORS POLICY

Subject	Policy Number	Page	
Legislative Proposals – Sponsored by the Board of Supervisors	M-1	2 of 2	

Board Action 2-9-88 (4)

Board Action 6-16-98 (2)

Board Action 10-31-06 (14)

Board Action 12-09-08 (33)

Board Action 12-07-10 (27)

Board Action 11-14-17 (27)



2021 JAN 14 JAN: 51
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OF SUPERVIOUS

BOARD OF SUPERVISORS

1600 PACIFIC HIGHWAY, ROOM 335, SAN DIEGO, CALIFORNIA 92101-2470

AGENDA ITEM

DATE:

January 27, 2021

04

TO:

Board of Supervisors

SUBJECT

FRAMEWORK FOR OUR FUTURE: MEASURES TO PROVIDE ECONOMIC ACCESS AND EQUITY IN THE CANNABIS INDUSTRY (DISTRICTS: ALL)

OVERVIEW

Californians overwhelmingly voted to allow both adult use and medical cannabis, but the Board of Supervisors has blocked access. There is currently no pathway for adult use cannabis access in the unincorporated area, and the five existing medical cannabis facilities have been ordered to close by 2022. Under the current regime approved by the Board in 2017, no new permits for medical cannabis facilities can be issued. Without any process for obtaining a permit, illegal and unlicensed dispensaries have been in operation all throughout San Diego County. As a result, the San Diego County Sheriff's Department has been engaged in a continuing cycle of shutting down various storefronts, only for the same business to re-open the following week. We must make changes.

Cannabis represents a new economic opportunity for our communities and residents, which is necessary during the pandemic-induced recession. Cannabis industry provides new direct and indirect jobs, from farming and manufacturing to testing and retail sales. Cannabis also provides an opportunity to advance social equity in our communities. The overcriminalization of Black and Brown communities for cannabis crimes is an injustice that needs to be addressed in our region.

Our board letter proposes changes to bring our region in line with the will of San Diego voters. Today's action would direct Planning & Development Services to develop Zoning Ordinances that allow for a suite of uses, including retail, cultivation, manufacturing, distribution, testing, or a combination of these uses through a microbusiness license, as well as repeal County Zoning Ordinance Sections 6935 (Medical Marijuana Collective Facilities) and 6976 (Prohibition of Marijuana Facilities – Medical or Non-Medical).

We are also asking the Chief Administrative Officer to develop a new Cannabis Permitting Program for the County of San Diego that will include numerous elements to prioritize social

equity, access and business opportunities. A Social Equity Program will help rectify the injustices caused by the War on Drugs and be in place prior to the issuance of the first permit. To spur economic recovery, Labor Peace Agreements will be required for every tenth employee at a given cannabis facility. We have asked for ingestible cannabis products to be sold in the unincorporated area. Onsite consumption of cannabis products should be an allowable use. Staff will bring in an expert to research cannabis taxation opportunities and provide recommendations to the Board.

We can also look internally at County operations. Revisions to County hiring practices would remove cannabis as one of the drugs tested for during the pre-employment screening process for certain employee classes.

We are requesting that these components be developed concurrently to create a comprehensive cannabis program, with an initial report back in 90 days including any regulatory changes that can be implemented within that time, and return back to the Board with final ordinances and policies within 180 days.

RECOMMENDATION(S)

CHAIR NATHAN FLETCHER AND VICE CHAIR NORA VARGAS

- A. Find that the proposed actions are not subject to the California Environmental Quality Act (CEQA) as specified under Sections 15060(c)(3) and 15378 of the CEQA Guidelines.
- B. Direct the Chief Administrative Officer to:
 - 1. Develop Zoning Ordinances that would allow for the following:
 - a. Cannabis Retail allowed in areas zoned commercial and industrial.
 - b. Cannabis Cultivation allowed in areas zoned for agriculture.
 - c. Cannabis Manufacturing allowed in areas zoned for industrial.
 - d. Cannabis Distribution allowed in areas zoned for industrial.
 - e. Cannabis Testing allowed in areas zoned for industrial.
 - f. Cannabis Microbusiness license in areas zoned for agriculture, commercial or industrial.
 - g. Setbacks of 600 feet from a qualifying "sensitive use" as described in Section 5026 of the California Code of Regulations, Title 16, Division 42, or any successor or amended section, that is operational at the time of the application.
 - Repeal County Zoning Ordinance Sections 6935 (Medical Marijuana Collective Facilities) and 6976 (Prohibition of Marijuana Facilities – Medical or Non-Medical).
 - 2. Develop amendments to the County of San Diego Regulatory Code Sections 21.2501 and 21.2503 (a) and develop a new cannabis permitting system that:
 - a. Allows existing and new Medicinal and/or Adult Use cannabis facilities to obtain a County operating permit for one of the following permit categories: Retail (Storefront and/or Non-Storefront), Cultivation, Manufacturing, Distribution, and Testing; or a County operating permit for a Microbusiness license.
 - b. Contains a "Social Equity Program" that provides individuals with past cannabis arrests and/or convictions, and those that were low income and lived in high arrest communities or "Disproportionately Impacted Areas" by providing such individuals with greater opportunities to secure a County

operating permit, and is in place prior to the issuance of a County operating permit.

- c. Requires the issuance of Labor Peace Agreements for every tenth employee.
- d. Follows all applicable State laws and regulations.
- 3. Allow for the sale of ingestible cannabis products, including edible and drinkable products.
- 4. Allow for onsite consumption of cannabis products at specific cannabis facilities and at permitted events.
- 5. Engage a consultant to advise the County on cannabis tax options.
- 6. Conduct robust stakeholder outreach to help develop all recommendations, and explore program components such as the Social Equity Program, onsite consumption, and the permitting program, including engaging with social and racial justice advocates, farmers, and potential cannabis permit holders.
- 7. Provide any staffing necessary to support the issuance and management of the cannabis permits and the Social Equity Program.
- 8. Secure grant funding to support implementation of the Social Equity Program.
- C. Direct the Chief Administrative Officer to revise the County of San Diego Drug and Alcohol Use Policy (Policy C-25) to exclude cannabis from the medical pre-screening process under Section E "Applicants for County Employment," except for safety sensitive positions and employees covered under the Omnibus Transportation Employee Testing Act of 1991.
- D. Establish appropriations of \$485,000 in the Department of Planning & Development Services, Services & Supplies for consultant services for the ordinance and program development of a Cannabis Permitting Program based on available prior year General Fund fund balance. (4 VOTES)
- E. Report back to the Board in 90 days with an update including any regulatory changes that can be implemented within that time, and return back to the Board with final ordinances and policies within 180 days.

FISCAL IMPACT

Funds for this request are not included in the Fiscal Year (FY) 2020-21 Operational Plan in the Department of Planning & Development Services (PDS). If approved, this request will result in costs of \$485,000 in PDS for consultant services for the ordinance and program development of a Cannabis Permitting Program. The funding source is available prior year General Fund fund balance. Future on going costs of the program will be determined by future Board actions based on information and recommendations contained the report due in 180 days, including potential costs and revenue associated with implementation. County staff will return to the Board with estimates and recommended budget actions as necessary.

BUSINESS IMPACT STATEMENT

Today's action supports small businesses by allowing cannabis facilities to access permits to operate in the County and expand their businesses.

ADVISORY BOARD STATEMENT

N/A

BACKGROUND

In 2016, California voters legalized adult use cannabis for adults 21 and older by overwhelmingly supporting Proposition 64. More than 57% of San Diego voters supported legalization. Medical cannabis has been legal statewide since 1996, when more than 55% of voters supported Proposition 215. Since 2016, voters have approved measures that increase cannabis access and equity in the Cities of Chula Vista, Encinitas, La Mesa, Lemon Grove, Oceanside, San Diego and Vista.

However, there has never been a regulatory pathway to allow for adult use cannabis in the unincorporated county. Medical cannabis access has been constricted, as the Board of Supervisors in 2017 prohibited permits for new medical facilities, and the few existing medical cannabis facilities were directed to close shop in five years. Specifically, Section 6976 of the Zoning Ordinance prohibited the establishment, operation, enlargement or transfer of ownership of cannabis facilities. Section 6935 of the Zoning Ordinance established a sunset clause for medical cannabis facilities operating in the unincorporated area of the County. Businesses would need to cease operating by April 14, 2022, to comply. These steps were taken as other cities and counties across the state were expanding legal access to cannabis.

In San Diego County, we should support a safe, regulated, and legal cannabis industry. While we have a ban in place, unpermitted facilities are still operating in the unincorporated area despite law enforcement attempts to shut them down. The operation of unpermitted facilities has a negative impact on the five medical facilities operating legally in the unincorporated area and on cannabis facilities in other jurisdictions that are complying. The lack of a regulated pathway undermines legally compliant businesses, draws business away from entities that are following the regulations, and potentially exposes customers to unsafe products.

With today's backdrop of both the global COVID-19 pandemic-induced recession and the need for racial justice, it is only right that we repair the damages done by the overcriminalization of Black and Brown communities. Creating a Social Equity Program that is at the core of the County's permitting system will ensure progress toward racial justice. Increasing economic access and equity in the cannabis industry can help address these issues, and provide business investment and new employment opportunities.

We have proposed the following comprehensive changes to create a successful and equitable cannabis industry in San Diego County:

Zoning Ordinances

Today's action would pave the way for greater cannabis access and economic opportunity through development of new ordinances. Planning & Development Services (PDS) will develop replacement ordinances that would allow for new uses, including at a minimum cannabis retail allowed in areas zoned commercial and industrial, cannabis manufacturing allowed in areas zoned for industrial, cannabis cultivation allowed in areas zoned for agriculture, cannabis testing allowed in areas zoned for industrial, and cannabis distribution allowed in areas zoned for industrial. Cannabis microbusiness licenses (predefined by the Bureau of Cannabis Control) will be allowed in areas zoned for agriculture, commercial or industrial. Setbacks of 600 feet are proposed from a sensitive use, as defined by the state, that is operational at the time the facility is requesting an

application. A repeal of County Zoning Ordinance Sections 6935 (Medical Marijuana Collective Facilities) and 6976 (Prohibition of Marijuana Facilities – Medical or Non-Medical) is also proposed. Best practices from other jurisdictions and stakeholder input should be incorporated as part of the new zoning changes.

Permitting System

A permitting system would be put in place to ensure that existing and new cannabis facilities comply with local and state laws. Before any new permits are issued, a new Social Equity Program will need to be operational. Facilities could receive a permit for Retail (Storefront and/or Delivery), Cultivation, Distribution, or Manufacturing, Testing, or a Microbusiness license. Additional permitting guidelines should be based on other jurisdictions' best practices and stakeholder input.

A new requirement will be added for Labor Peace Agreements to be issued for the tenth employee at that facility (rather than the state requirement for every twentieth employee, per Assembly Bill 1291). This permitting requirement will allow for greater economic opportunities at cannabis facilities as this industry expands in the unincorporated area.

Permit conditions will also need to be devised to ensure that all applicable regulations from the Bureau of Cannabis Control are followed, and Code Enforcement would be leveraged to ensure adherence to County Code.

Social Equity Program

Right now, our region is embarking upon much-needed introspection on police policies and the unequal criminalization of anti-drug laws. A disproportionate number of Black and Brown residents remain in jail for low-level drug offenses as a result of the failed War on Drugs. A Social Equity Program is needed to guide the County's approach and rectify the devastating and disproportionate impact of the War on Drugs.

The Office of Equity and Racial Justice, along with PDS, can jointly develop the framework and strategy, including grant funding options, needed to launch a comprehensive Social Equity Program that is linked with the aforementioned Permitting System. Program objectives include reduced barriers to entry for cannabis facility ownership for those individuals with past cannabis arrests or convictions, and those who are low income and live in high arrest communities or "Disproportionately Impacted Areas." Individuals may be provided with a no or low-cost operating license, preferential access to permits, or other strategies that expand business opportunities for those who have been subject to the overcriminalization of cannabis. Best practices can be gleaned from the Bureau of Cannabis Control and other jurisdictions that have similar programs in place. Staff should secure grant funding from the Bureau of Cannabis Control to assist with development of this program.

Stakeholder engagement with racial and social justice advocates will be a critical component to ensure that the Social Equity Program will be successful in its mission. As part of this effort, County staff should also explore with stakeholders and interested jurisdictions the creation of a Regional Social Equity Program that would allow cities within the county to opt-in to such a program. The War on Drugs is a regional problem that can be addressed through regional solutions.

Edible Products and Onsite Consumption

Patients should be allowed to access alternate forms of cannabis consumption. County Ordinance will be modified to allow retailers to sell edible and drinkable cannabis products. As currently written, Section 21.2505 (Operating Requirements for Collective Facilities) prohibits food or drink containing cannabis. Onsite consumption of cannabis products should also be allowed at specific cannabis facilities and at permitted events.

Cannabis Taxing

If the County of San Diego wishes to impose a tax and place it on the ballot, state law requires that the Board of Supervisors specify the activities subject to the tax, the applicable rate or rates, the method of apportionment, if necessary, and the manner of collection of the tax. The tax may be imposed for general governmental purposes or for special purposes as proposed by the Board. The Board shall also specify whether the tax applies throughout the entire county or within the unincorporated area of the county, and whether to tax adult use cannabis businesses only, or include medical businesses, and any applicable exemptions (i.e. compassionate use).

Hiring a Cannabis taxation consultant would provide the expertise the County would need to prepare for the tax ballot, and other taxing, auditing and compliance requirements as needed. A Board policy could be crafted at a future date to guide allocation of any funding, including toward social equity, community benefits, and prevention programs.

County Hiring Process

Prospective employees with the County of San Diego are required to undergo a drug test as part of the County's medical pre-screening process, pursuant to Board Policy C-25, County of San Diego Drug and Alcohol Use Policy. Currently, cannabis is included as part of the drug test. But given the status of cannabis as a legal substance in the State of California, cannabis should be removed from the medical pre-screening process. This policy change removes unnecessary barriers in the County's attempt to recruit and hire a more diverse workforce. Exceptions to this policy are proposed for specific employee categories that need to comply with non-County regulations for employment, including safety sensitive positions and employees covered under the Omnibus Transportation Employee Testing Act of 1991.

We are requesting that these components be developed concurrently to create a comprehensive cannabis program, with an initial report back in 90 days including any regulatory changes that can be implemented within that time, and return back to the Board with final ordinances and policies within 180 days.

ENVIRONMENTAL STATEMENT

The proposed actions are not subject to the California Environmental Quality Act (CEQA) as specified under Section 15060(c)(3) and 15378 of the CEQA Guidelines because the direction is to return to the Board with future ordinances and regulatory actions and CEQA applicability will be reviewed at that time, and today's direction is administrative activities that will not result in direct or indirect impacts to the environment.

LINKAGE TO THE COUNTY OF SAN DIEGO STRATEGIC PLAN

Today's proposed action to repeal the County's prohibition on cannabis facilities supports the Living Safely and Operational Excellence Strategic Initiatives in the County of San Diego's 2021-2026 Strategic Plan by providing economic access and equity in the cannabis industry.

Respectfully submitted,

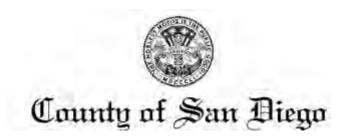
NATHAN FLETCHER Chair, Fourth District NORA VARGAS

Vice Chair, First District

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AGENDA ITEM INFORMATION SHEET

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NICK MACCHIONE, FACHE AGENCY DIRECTOR

HEALTH AND HUMAN SERVICES AGENCY

LUKE BERGMANN, Ph.D.
DIRECTOR, BEHAVIORAL HEALTH SERVICES

BEHAVIORAL HEALTH SERVICES
3255 CAMINO DEL RIO SOUTH, MAIL STOP P-531
SAN DIEGO, CA 92108-3806
(619) 563-2700 • FAX (619) 563-2705

January 28, 2021

TO: The Behavioral Health Advisory Board (BHAB)

FROM: Luke Bergmann, Ph.D., Director, Behavioral Health Services (BHS)

BEHAVIORAL HEALTH SERVICES DIRECTOR'S REPORT – February 2021

ACTION ITEM: ADOPTION OF BHAB 2021 STRATEGIC GOALS

The Behavioral Health Advisory Board (BHAB) met at their annual fall retreat, held on October 29, 2020, to discuss priority areas of focus for the 2021 calendar year. To more clearly define these areas of focus, BHAB Members were previously surveyed and facilitated discussions were held in BHAB's Continuum of Care (CoC) and Building a Better BHAB (BBB) workgroups. These collective actions resulted in the formation of strategic goals, with an emphasis on enhancing BHAB's value to the community, to be completed through the efforts of distinct workgroups.

The 2021 Strategic Goals and respective workgroups, are as follows:

Criminal Justice (CJ) CoC Workgroup – 2021 Strategic Goals

- Strategic Goal #1: Build BHAB's internal knowledge base by engaging with stakeholders and investigating the impact of behavioral health system of care disparities in the criminal justice system.
- <u>Strategic Goal #2</u>: Build BHAB's internal knowledge base by engaging with stakeholders and learning about evidence-based best practices surrounding community-based public safety programs utilizing the sequential intercept model.
- <u>Strategic Goal #3</u>: Build BHAB's internal knowledge base by exploring restorative and transformative programs with justice-involved people with behavioral health needs to better understand the spectrum of care while addressing disparities.

Alcohol and Other Drugs (AOD) CoC Workgroup – 2021 Strategic Goal

 <u>Strategic Goal #1</u>: Build BHAB's internal knowledge base to support BHS efforts to improve AOD services by serving as the bridge between the community and BHS, resulting in structured and synthesized feedback from the AOD system of care with a focus in the area of prevention.



Stakeholder Engagement Workgroup—2021 Strategic Goal

• <u>Strategic Goal #1</u>: Build BHAB Member and stakeholder knowledge and capabilities to make more timely and informed contributions to the San Diego County Board of Supervisors and BHS by becoming better informed on issues affecting the community, especially underserved populations, as well as issues of health equity, starting with the annual Community Planning Process (MHSA Three-Year Plan).

The following goal will fall within the purview of the BHAB Executive Committee, guiding the BHAB meeting structure and external engagement.

 <u>Strategic Goal #1</u>: Maximize BHAB Members' abilities to focus on BHAB's strategic goals by strengthening the diversity of stakeholder engagement to shape recommendations on meetings day and time, structure, content, presentations, and strong stakeholder feedback loops.

ACTION: Vote to adopt the 2021 Behavioral Health Advisory Board Strategic Goals and establish the Criminal Justice (CJ) and Alcohol and Other Drugs (AOD) continuum of care workgroups, as well as the Stakeholder Engagement workgroup.

ACTION ITEM: REVISIONS TO BHAB BYLAWS BOARD LETTER

The San Diego County Board of Supervisors (Board) established the Behavioral Health Advisory Board (BHAB) in 2014, by merging the County of San Diego (County) Alcohol and Drug Advisory Board with the County Mental Health Board. At that time, bylaws were adopted to govern your internal operations in accordance with Board Policy A-74, Citizen Participation in County Boards, Commissions and Committees, which oversees special citizen boards that advise the Board and County staff on issues of policy and serve as links to the community.

This action seeks Board approval to amend the BHAB bylaws to align with language in Assembly Bill (AB) 1352, which further defined the roles of County mental health boards in 2019.

The amended bylaws propose changes to:

- Ensure efficient BHAB operations by clarifying ambiguous language relating to terms of BHAB board members serving on BHAB's Executive Committee;
- Align with changes to membership criteria and composition requirements for BHAB, pursuant to AB 1352; and
- Conform with additional requirements in alignment with current California Welfare and Institutions Code, as modified by AB 1352.

If approved, this action would approve the amended bylaws of BHAB and would support the countywide *Live Well San Diego* vision by enhancing community involvement in the planning and provision of behavioral health services, supporting a region that is healthy, safe, and thriving.

It is THEREFORE, staff's recommendation that your Board vote to support the authorizations and approvals needed to advance the recommendation in this Board Letter.



LIVE WELL SAN DIEGO UPDATES / SPECIAL EVENTS

Love Your Heart 2021

The County of San Diego is celebrating ten years of Love Your Heart, an annual event in which organizations across the U.S. and Mexico join together to provide free blood pressure screenings to the public on or near Valentine's Day. This year's event will be held on Thursday, February 11 with extended dates for screenings and activities February 8-14. Due to COVID-19, there are fewer public-facing screening sites expected this year with a shift toward at-home screenings, increased education and promotion of heart-healthy activities, and information. High blood pressure is the most common underlying condition identified in San Diego County's COVID-associated deaths. All San Diegans are encouraged to join the Heart Health Movement with a blood pressure screening. To learn more, visit www.LoveYourHeartSD.org.

UPDATES FROM THE PREVENTION AND COMMUNITY ENGAGEMENT UNIT (PCE)

Substance Use Disorder (SUD) Prevention Initiative Updates

Binge & Underage Drinking Initiative (BUDI)

BUDI works to address the harmful effects of under-age and high-risk drinking behaviors in our communities by changing community policies, practices, and norms regarding the personal use of alcohol and consequences of over-consumption. https://alcoholpolicypanel.org/

During the past quarter, BUDI facilitated several meetings with training presentations including Alcohol Harm and COVID-19: Solutions That Can Reduce Both; Exploring the Relationship Between COVID-19, ACEs, and the Role of Alcohol; and Communities and Law Enforcement: How Prevention Can Be A Bridge During Uncertain Times.

Marijuana Prevention Initiative (MPI)

MPI focuses on reducing youth access and use of marijuana/cannabis products by changing community policies, practices, norms regarding the personal use of marijuana/cannabis including adverse impacts on developing brains, and consequences of over-consumption. https://www.ccrconsulting.org/mpi

During the past quarter, the Youth Access workgroup of MPI met several times to host presentations including Juvenile Marijuana Use in San Diego County; Friday Night Live "Tobacco Tuesdays" Discussion with Youth About Marijuana; and What is Medical Marijuana and What Do Doctors Think? Additionally, the program manager for MPI presented at the National Prevention Network Conference on the 2020 Marijuana Impact Report Findings.

Methamphetamine Strike Force (MSF)

MSF addresses the adverse personal, community, and environmental impacts of methamphetamine in our County by engaging public health and public safety sectors and the public to change community policies, practices, and norms regarding the illegal production, distribution, and use of methamphetamines. https://www.no2meth.org/

Included in the June 2020 MSF quarterly meeting were presentations about the Prosecution and Law Enforcement Assisted Diversion Services Program (PLEADS) program and a



Behavioral Health Services Director's Report – February 2021 Page 4

review of the history of sobering services in San Diego; the San Diego Misdemeanants At-Risk Track Program (SMART); and how these programs fit into the rest of the system of care.

Prescription Drug Abuse Task Force (PDATF)

PDATF addresses the over-use and misuse of prescription medications and the use of heroin and other illicit opiates by changing policies, practices, and norms regarding the inappropriate use of prescribed medications and other opioids. https://www.sandiegorxabusetaskforce.org/

Included in the November 2020 PDATF quarterly meeting was a presentation from the first Chief Medical Officer at the Office of National Drug Control Policy (ONDCP); a presentation on the San Diego Opioid Project campaign and a presentation on the Countywide Fentanyl Media Campaign.

May Is Mental Health Month (MIMHM) 2021

In support of mental health awareness, BHS staff have commenced planning for MIMHM 2021. Service providers and community or faith-based organizations are once again invited to submit activities planned in recognition of the month to be included in the events calendar which will be included on the MIMHM website, along with additional activities and resources. More information will be made available as plans are developed.

Driving Under the Influence Programs Pivot to Telehealth

There are four licensed driving under the influence (DUI) programs in San Diego County and over 400 programs across California. Licensed DUI programs do not receive public funds and are the only substance use disorder treatment services recognized by the California Department of Motor Vehicles to allow individuals to regain their driver's license after an arrest and/or conviction of a DUI. Licensed DUI programs help safeguard public safety by enabling all drivers to be lawfully licensed to drive, obtaining appropriate vehicle insurance, and counseling at-risk drivers of the dangers and risks of driving under the influence. The San Diego County programs are administered by Episcopal Community Services, The MAAC Project, SDSU Research Foundation, and Occupational Health Services.

Following public health orders related to COVID-19, these programs immediately pivoted to telehealth services beginning in April 2020 and are now providing services through telehealth platforms and limited in-person services. This shift in service delivery greatly increases accessibility to these services for individuals in San Diego County. Staff continue to monitor the waiver in place to allow this service delivery platform.

"Let's Talk About DUI/DUID" Prevention Rallies

Mental Health Systems' North Inland Substance Use Disorder Prevention program hosted a virtual community meeting on December 1, 2020 to educate residents on the dangers of driving under the influence of alcohol and drugs (DUI/DUID) and issued a call to action to prevent DUI during the holidays. The community meeting highlighted the work and experience of North County first responders and had speakers from the County Sheriff's office, California Highway Patrol and local fire/paramedics that respond to DUI/DUID crashes share their stories. The community meeting also included members of their youth advisory coalition and youth leaders highlighted efforts to reach peers with prevention messaging through social media and safe outdoor education rallies. Youth also assisted in designing posters used during rally points held at major



Behavioral Health Services Director's Report – February 2021 Page 5

traffic intersections. Over the past three years, outdoor DUI/DUID education rallies have been held in Escondido, Poway, San Marcos, and San Diego.

Masking Our Faces, Not Feelings Coping During COVID-19 Campaign

The Masking Our Faces, Not Feelings campaign launched in mid-November 2020 to show that even though San Diegans are wearing masks to protect themselves and communities during this pandemic, it doesn't mean they must hide their mental health challenges. Individuals representing various demographics and occupations are featured facing several challenges currently experienced by San Diego County residents. The campaign offers coping tips and directs the audience to the Coping During COVID-19 webpage on the *It's Up to Us* website which includes local resources and a link to the Access and Crisis Line.

The campaign was launched on various platforms including television commercials and digital streaming services, billboards and transit shelters, and paid digital and social media advertisements. As of the end of December, the campaign had delivered over 3.7 million messages which resulted in over 850 thousand audience engagements including those seeking help and information and those interacting online. More information on Coping During COVID-19 can be found on the *It's Up to Us* website at https://up2sd.org/.

Fire Captain Ryan J. Mitchell's First Responders Behavioral Health Support Program

A new program for local first responders launched in October 2020. The Fire Captain Ryan J. Mitchell's First Responders Behavioral Health Support Program provides an alternate, free, and confidential space for first responders to seek behavioral health services 24/7, 365 days a year. This program aims to increase awareness about local mental health resources and decrease the stigma and barriers associated with seeking behavioral health support services. It provides a supportive environment for every caller, connecting individuals to local mental health and substance use disorder providers, and offers in-service trainings to First Responders and First Responder organizations to increase awareness about mental health resources and reduce stigma. Help spread the word about this new program. The help line number is 1-833-YU-FIRST (1-833-983-4778). More information about the program can be found on their website at https://www.SDFirstRespondersProgram.org. You can also follow the program's Facebook page at https://m.facebook.com/SDFirstRespondersProgram.

<u>Community Voice – the Neighborhood Safety Perception Survey</u>

In a recent survey conducted in October 2020, residents of San Ysidro (South Bay) shared their concerns about marijuana use, underage drinking, public drunkenness, drug dealing and other alcohol and drug related issues since the onset of the COVID-19 pandemic. As the South Region's Substance Use Disorder Prevention Service provider, the Institute for Public Strategies (IPS), launched a Neighborhood Safety Perception Survey to receive feedback from residents of five apartment communities in San Ysidro, with more than 200 responses collected. Residents also responded to COVID-19 related questions included in the survey. Survey results provide the project with local data and perception information that will support the project's environmental prevention efforts in San Ysidro. Several media stories were published on the survey including an article by KPBS and a TV news story with Univision KBNT Channel 17. To read the KPBS news article visit https://www.kpbs.org/news/2020/dec/28/study-san-ysidro-residents-concerned-over-drug/.



Behavioral Health Services Director's Report – February 2021 Page 6

Mental Health Systems, Inc., Courage to Call

The Courage to Call program serves all veterans, retirees, active duty military including reservists, National Guard, and their families by providing Peer to Peer helpline support via 2-1-1 San Diego. Additional support provided includes clinical navigation, counseling services, community referrals and resources, as appropriate. On December 12th, Courage to Call hosted a food distribution event for nearly 300 eligible families and included distribution of disposable diapers as needed. Additionally, the program provided holiday meals for 16 families along with gifts, toiletries, and clothing, made possible by the generosity of community partners.

Father 2 Child Holiday Drive-Through Event

Mental Health America of San Diego's Father 2 Child program held a food and gifts drive-through event to usher in the holiday spirit for participating families. Father 2 Child is a MHSA Prevention and Early Intervention program focused on reducing mental health stigma among custodial and non-custodial fathers. The program strives to improve parenting and fathering skills among program participants in San Diego County's Central Region. The event was held in the agency's parking lot in North Park where program staff distributed gifts and food boxes to eager and excited children and their dads. The drive-through event reached 24 fathers and appropriately 30 children.

Fentanyl Awareness Campaign

Fentanyl is a synthetic prescription opioid similar to morphine that is used for surgeries and treatment for acute pain including end-of-life pain but can be 50 to 100 times more potent. Because of its potency, a few grains can cause a fatal overdose. The County of San Diego has been monitoring increases in fentanyl-related overdose deaths over the past five years. In 2020, there was a significant increase in fentanyl-related deaths compared to prior years. Illicit production and distribution are considered to be primary factors contributing to this increase.

Executive leadership for the Prescription Drug Abuse Task Force convened in September 2020 to discuss and collaboratively develop a countywide fentanyl awareness campaign. Two posters to inform the community regarding the dangers of fentanyl contamination and risk of death were created and disseminated in October 2020 throughout various networks including provider networks, community networks and social media platforms. Social media placements resulted in an estimated 1.3 million impressions and over 22,000 exploratory engagements. Billboard and transit shelter placements throughout San Diego communities continued in November and December 2020. Anticipated impressions from these out-of-home placements are estimated at 16 million. Fentanyl warning posters are available here: https://www.sandiegorxabusetaskforce.org/.

Respectfully submitted,

LUKE BERGMANN, Ph.D., Director Behavioral Health Services

Dean Arabatzis, Acting Agency Director
 Aurora Kiviat, Assistant Director and Chief Operations Officer
 Cecily Thornton-Stearns, Assistant Director and Chief Program Officer





Children, Youth and Families Behavioral Health System of Care Council Bylaws

Article One Name

The name of this organization shall be the CHILDREN, YOUTH AND FAMILIES BEHAVIORAL HEALTH SYSTEM OF CARE COUNCIL (also known as CYFBHSOCC or the Council).

Article Two Powers and Duties

The powers and duties of the Council shall be set forth by Behavioral Health Services (BHS) Administration, a division of the Health and Human Services Agency (HHSA). The Council reports to the Behavioral Health Services Director (BHS Director). The Council serves in an advisory capacity to the BHS Director. However, the Council, as needed, can brief the HHSA Director and/or staff on children's behavioral health developments/issues. The Council is charged by the BHS Director to perform the following functions:

- Provide community oversight for the integrity of all services and advancement of all aspects of the system
 of care:
- Provide advice and feedback related to the progress and future expansion of the CYFBHSOC; and
- Provide information and recommendations to the BHS Director.

Article Three Membership

Membership on the Council is via appointment by the BHS Director through recommendations of each sector. The Council provides an opportunity for all four sectors (Education, Family/Youth, Provider, Public) to have a voice in policy development and implementation of the System of Care. Members will be appointed from the following:

Constituencies	Seats
Behavioral Health Advisory Board	1
Behavioral Health Services	1
Public Safety Group/Probation	1
Child Welfare Services	1
HHSA Regions	1
Public Health	1
Juvenile Court	1
First 5 Commission	1
Special Education Local Plan Areas (SELPA)	1
Regular Education- Pupil Personnel Services	1
School Board	1
Special Education	1
San Diego Regional Center for Developmentally Disabled	1
Alcohol and Drug Services Provider Association (ADSPA)	2
Mental Health Contractors Association	2

1

S: BHS\CYF\ADD Meetings\CYFBHSOC Council\Bylaws

Revised 1.01.2021



Fee For Service Network	1
Healthcare/Pediatrician	1
Family and Youth Liaison	1
Caregiver of child/youth served by the public health system	1
Youth served by the public health system (age up to 26)	2
Managed Care Health Plan	1

Membership shall be limited to 24 voting members. Each member/sector will also designate an "alternate," a person to act on behalf of the regular member when the regular member is unavailable. Alternates retain voting privileges only when the regular member is not present. CYFBHSOCC members serve two-year terms, which may be renewed at the discretion of the BHS Director. Terms will begin in July, and be staggered with half of the membership rolling over one year, and the other half the next, to avoid enlisting an entirely new slate at one time.

Current CYFBHSOCC members and alternates shall have access to the trainings provided by the BHS training contractor. To gain access, a written request shall be submitted to Council staff for processing.

Council members from the Youth served by the public health system constituency, who complete an application for the annual California Mental Health Advocates for Children and Youth (CMHACY) conference scholarship, shall be given priority status for scholarship award.

Article Four Vacancies

Any vacancy in any seat on the Council shall be filled by appointment by the BHS Director. When a vacancy occurs, an analysis shall be conducted by the BHS Director as to the current composition of the Council and what constituency requires additional representation. The BHS Director shall recruit potential members from the constituency groups listed in Article Three, taking into consideration what is needed to represent demographics (gender, ethnicity, and age) of the County as a whole to the extent feasible. The Council should reflect the ethnic diversity of the client population in the county. The BHS Director formally appoint the member via letter to the member of the Council.

Article Five Quorum

A quorum shall be defined as one person more than one half of the appointed members. Alternates may be included in the quorum count if they are providing voting representation for the regular member. The definition of appointed members excludes unfilled positions and those vacated by resignation or removal.

Article Six Meetings

The CYFBHSOCC co-chairs will determine the frequency, times and locations for the Council meetings at the beginning of each committee year, July 1. Changes to the prevailing meeting schedule will be communicated to members no later than the meeting immediately preceding the changed meeting date. Meetings shall convene promptly at the scheduled time.

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S: BHS\CYF\ADD Meetings\CYFBHSOC Council\Bylaws

Revised 1.01.2021



Agendas: Agendas are prepared by the Executive Committee in consultation with the BHS Director or designee. Members advise the co-chairs in advance of the proposed agenda items. Agendas are forwarded to Council members, alternate and attendees in advance of the Council meeting to enable participants to decide if they want to attend.

Meeting Summary: -County aAdministrative staff record CYFBHSOCC meetings completes and maintains the Minute CYFBHSOCC Meeting Summary documentation. Book. Meeting summaries inutes are distributed to CYFBHSOCC members in advance of the next regularly scheduled meeting and shall be posted on the County website.

Article Seven Officers

The business of the Council is organized and managed through two co-chairs. The co-chairs are nominated by the sector responsible for chairing the upcoming serving term. The nominations are presented to the CYFBHSOCC at the April and May meetings; the co-chairs are formally elected by the CYFBHSOCC at the June meeting and start serving in the month of July.

The co-chairs are named from the four sector partnership of the System of Care – Education, Families/Youth, Providers, and Public Agencies, and should not represent the same constituency during any term. The co-chairs serve for two-year terms on a rotating basis, and alternating so there is always one serving their first and the other serving their second term year.

The co-chairs are responsible for the development and preparation of the meeting agendas and for obtaining briefings on progress and activities from the BHS Director. County Administrative staff provides support to the co-chairs and to activities of the Council, including meeting notices, minutes, and coordination.

Article Eight Sub-committees

The CYFBHSOCC has a "standing" sub-committee, the Executive Committee, tasked to follow up on current SOC principles and recommend a process to ensure relevancy to current realities and challenges which includes the development of sub-committees and task forces in order to complete its business, as well as the pausing or retirement of sub-committees that are no longer needed. Sub-committees are to submit a monthly written report to the CYFBHSOC Council.

Each sub-committee shall appoint or elect a chair or co-chairs. The chairs of the sub-committees are then members of the Executive Committee. The chairs of the sub-committees may be members of the Council, however if the individual serving in the capacity of chair or co-chair of a sub-committee is not a member of the Council, they become a member, ex officio (without vote), of the Council.

Article Nine Voting and Consensus

The CYFBHSOCC strives to achieve consensus on all decision matters. In the absence of full consensus, any item put to vote will be approved by a simple majority of those present. A quorum of the CYFBHSOCC must be present in order for a vote to be taken on any motion brought to the CYFBHSOCC.

3

S: BHS\CYF\ADD Meetings\CYFBHSOC Council\Bylaws

Revised 1.01.2021



Motions put to the CYFBHSOCC for vote should include the following information:

- Concise statement of the issue for vote;
- Purpose for the vote (e.g. recommendation to the Director, or change in bylaws); and
- Action to be taken pursuant to the vote.

The Council votes by show of hands on all action items brought before the Council for decision. The majority voice carrying the decisions is noted in the Minutes. Vote counts are not required.

Members opposing the outcome of a closely contested vote may request permission to submit a "minority opinion" into the record of the vote. Opposing members have two working days from the date of the vote to submit their minority opinion, in writing, to the co-chairs for inclusion in the official Minutes of the CYFBHSOCC.

Only members of the Council, or alternates attending in place of the delegated member, are eligible to vote. Alternates attending in addition to the regular member are not eligible to vote and do not count in the Quorum determination.

Article Ten Member Conduct

Conduct of members of the CYFBHSOCC is guided by these principles:

- Courtesy and respect for the customs and beliefs of others, consistent with the mission and philosophy of the System of Care and the Council;
- Respect for the confidential nature of information used by the CYFBHSOCC to conduct its business;
- Conduct in all relationships that ensures decisions are not compromised by any conflict of interest;
- Use of sound, ethical management practices in all CYFBHSOCC activities;
- Continuous striving to provide quality service to the CYFBHSOCC, the System of Care, and the children and families it serves.

Article Eleven Ratification and Amendments

These bylaws may be reviewed and updated annually by the CYFBHSOCC meeting.

Changes or amendments to these bylaws must be submitted in writing to the co-chairs and the BHS Director for review and consideration. The CYFBHSOCC co-chairs will have final determination if the amendment will be put to vote by the entire CYFBHSOCC. The Council may, by a two-thirds (2/3) vote, adopt amended bylaws at any CYFBHSOCC meeting provided notice has been given at the prior meeting or at least thirty (30) days written notice has been given to the CYFBHSOCC membership.

4

County of San Diego

Health and Human Services Agency Health Professionals Newsletter



Sending on behalf of Dr. Jennifer Tuteur,
Deputy Chief Medical Officer of the Medical Care Services Division and
Lead of the Healthcare Sector for Outreach and Education for the COVID-19 Response,
County of San Diego Health and Human Services Agency

Thursday, January 28, 2021

Greetings Healthcare Sector partners!

Please see below for important updates. Visit our <u>Health Professionals webpage</u> for new information and resources. Please send questions and suggestions to MCSDCallCenter.HHSA@sdcounty.ca.gov.

In this issue:

- Regional Stay at Home Order Lifted
- COVID-19 Vaccine Availability Expansion to Individuals 75 and Up
- CAHAN-SD Update
- COVID-19 Health Equity Projects

Updates shared during some of the previous telebriefings are also available:

- 1/14 Telebriefing Links
- 1/21 Telebriefing Links





Regional Stay at Home Order Lifted

The state has lifted the Regional Stay Home Order. San Diego County is now in Tier 1, or Purple Tier, of the state's <u>Blueprint for a Safer</u> <u>Economy</u>. The County's <u>Public Health Order</u> has been updated to reflect these changes, effective January 25. Please visit the <u>Safe Reopening</u> website for more information on business re-openings. NOTE: The <u>State Public Health Officer Order discussing hospital surge</u> is still in effect.

COVID-19 Watch

The County's weekly <u>COVID-19 Watch</u> is a surveillance report containing useful indicators of COVID-19 activity in the County. Data through the week ending January 23, indicates 227,195 total cases, 2,375 deaths, and 1,584 outbreaks. <u>Subscribe</u> to receive the COVID-19 Watch weekly.



COVID-19 FAQ One-Pager

The County of San Diego has released a <u>frequently asked questions</u> (FAQs) document about the COVID-19 vaccine, that may be shared with patients and staff. The FAQ's include answers related to COVID-19 vaccine safety, how the vaccine works, and possible side effects.

New England Journal of Medicine COVID-19 Vaccine FAQs

The New England Journal of Medicine has published a <u>frequently asked</u> <u>questions (FAQs) document</u> that provides answers to popular questions about the COVID-19 vaccine mechanism, efficacy, safety, availability, administration, second dose, and other important topics.

Abbott BinaxNOW POC Antigen Test Kits Available

Access to the Abbott BinaxNOW POC antigen test kits are now available in San Diego County for approved health care partners. These point-of-care (POC) antigen diagnostic tests detect the presence of the SARS-CoV-2 virus and can provide results in less than 20 minutes. Antigen tests have been added to the COVID-19 testing arena to meet the growing demand to identify COVID-19 positive individuals.

If you are interested in receiving these test kits, note a few of the following requirements which are listed in the attachment in further detail:

- UPDATES: Note that CDPH is now allowing organizations to receive and use BinaxNOW kits after the application is submitted (versus after its approved) under an emergency temporary allowance detailed here.
- Apply for a Clinical Laboratory Improvement Amendments (CLIA) waiver through CDPH Laboratory Field Services: <u>New Online Application</u>
- Read and acknowledge role and responsibilities in the BinaxNOW Antigen Test Kit Distribution Program
- Complete and sign the <u>Attestation and Trained Staff Table</u>
 (PDF has 2 pages) Organizational Checklist and Staffing List for the BinaxNOW Antigen Test Kits.

- Email and attach Proof of Clinical Laboratory Improvements (CLIA) waiver, or a copy of the application submission (with application number), along with the completed and signed PDF Checklist/Attestation, and the Trained Individual List to: LOGS.TESTING.HHSA@sdcounty.ca.gov
- After the Application is submitted, please follow up by sending the CLIA waiver when you receive it.
- Requests will be processed by the County's Testing Logistics team. Incomplete forms will delay delivery. Please allow 2-3 days for processing.

<u>More information</u> is available from California Department of Public Health (CDPH) regarding Temporary Allowance for Waived SARS-CoV-2 Antigen Testing.



COVID-19 VACCINE UPDATES



County Expands COVID-19 Vaccination Availability to Ages 65 and Up

Persons in Phase 1A, All Tiers and those 65 and older are eligible to receive the COVID-19 vaccine at any site, including the two new Vaccine
Super Station sites in South Bay. More information is available at coronavirus-sd.com/vaccine. COVID-19 vaccination appointments, including to schedule a second dose, can be made at waccinationsuperstationsd.com. Individuals who are 75 and older who do not have access to a computer can call 2-1-1 for assistance in scheduling an appointment.

What to Expect After Getting a COVID-19 Vaccine

The CDC has created a <u>webpage</u> that explains what to expect after receiving the COVID-19 vaccine.



CDC Interim Clinical Considerations for Use of mRNA COVID-19 Vaccines

The CDC Interim Clinical Considerations for Use of mRNA COVID-19 Vaccines Currently Authorized in the United States website contains guidance about the recommended time frame separations between receiving the COVID-19 vaccine and other vaccines, after completion of isolation, and after receiving a monoclonal antibody treatment. Time frame recommendations are also provided for receiving the second dose.

CAHAN-SD COVID-19 Updates

On January 21, a <u>California Health Alert Network – San Diego (CAHAN-SD)</u> was released announcing updates to the San Diego County COVID-19 vaccination phase plan, Moderna COVID-19 vaccine Lot 41L20A, and how to report vaccine-related adverse events.

V-safe Smartphone Application



<u>V-safe</u> is a smartphone-based tool that uses text messaging and web surveys to provide personalized health check-ins after an individual receives a COVID-19 vaccination. Through v-safe, individuals can quickly notify CDC if they have any side effects after getting the COVID-19 vaccine. V-safe adds an additional layer of safety monitoring, giving CDC and FDA the ability to evaluate COVID-19 vaccine safety in real time and make sure COVID-19 vaccines are as safe as possible.



HEALTH PROMOTION



Medical Reserve Corps Volunteers Needed to Administer Vaccine

Healthcare professionals interested in volunteering to administer the vaccine at COVID-19 vaccination sites may complete the Medical Reserve Corps online application at https://www.healthcarevolunteers.ca.gov. Additional information and instructions can be found here. Please note, applications are being processed as quickly as possible and will be acknowledged within 24-48 hours. Applicants will be contacted with volunteer assignments and are asked to not self-deploy to a site. There is a need for non-medical professional volunteers at vaccination sites as well. Administrative and non-medical professionals may register through UCSD's website.

COVID-19 Symptom Decision Trees

Refer to the COVID-19 Symptom Decision Trees

for <u>childcare</u> (<u>narrated</u>; <u>Spanish</u>), <u>K-12</u> (<u>Spanish</u>), and <u>institutes of higher education</u>, <u>trade</u>, <u>and vocational schools</u> to guide administrators when persons are not permitted on school campuses. Testing may be recommended for students, teachers, and staff exhibiting a single symptom, so please follow these guidelines for testing (either at your facility or by recommending they be tested at a county testing site). Additional resources are available, such as <u>Quarantine Timelines</u> based on the K-12 Decision Tree, <u>Quarantine Example Calendars</u>, <u>Isolation Timelines based on the K-12 Decision Tree</u>, <u>Isolation Example Calendars</u>, <u>Checking Temperatures for Parents</u>, and <u>COVID-19 Symptom Screening for Parents</u>.



Temporary Lodging Program

The County of San Diego has a Temporary Lodging Program for individuals affected by COVID-19 who do not have a place to safely quarantine or isolate. If a person requires temporary lodging for isolation, providers should call **858-715-2350** from **7:00am to 9:00pm, 7-days a week** to speak with a Placement Coordinator. To view the Temporary Lodging Program flyer that can be shared with patients, <u>click here</u>. To view the Temporary Lodging Program flyer for healthcare providers, <u>click here</u>.

San Diego Voice and Viewpoint Town Hall Meeting



San Diego Voice and Viewpoint is hosting a Town Hall meeting to learn about the importance of the vaccine and have a conversation with the County of San Diego's Nick Macchione, Director of the San Diego County Health and Human Services Agency, and Dr. Wilma Wooten, County Public Health Officer and Director of Public Health Services. The meeting will be held virtually on Zoom (passcode: 7x4zxz) on Tuesday, February 2, at 5:30pm.

Don't Hesitate to Vaccinate! Our Experts Tell You Why Webinar

Together Against COVID, in partnership with the County of San Diego, is hosting a webinar called *Don't Hesitate to Vaccinate! Our Experts Tell You Why* on **Thursday, January 28 at 5:30pm** to encourage the Black/African American community to get vaccinated. Webinar speakers include Dr. Jamal Gwathney, Clinical Director of the Metropolitan Correctional Center and San Diego Federal Bureau of Prisons and National Public Health Officer, Dr. Rodney Hood, President and Chairman of Multicultural Health Foundation and Tri-Chair of COVID-19 Vaccine Advisory Committee, and Dr. Wilma Wooten, County Public Health Officer and Director of Public Health Services of the County of San Diego. Advanced registration is required.

Second Application Round for Small Business COVID-19 Relief Grant Program

A second round of applications for the <u>Small Business COVID-19 Relief</u> <u>Grant Program</u> will open on **Tuesday, February 2 at 8:00am**, and will run through **Monday, February 8 at 6:00pm**. Applicants who submitted all necessary documents in the first round and met eligibility requirements, but did not receive a grant, do not need to reapply; their applications will be rolled over for consideration in the second round.

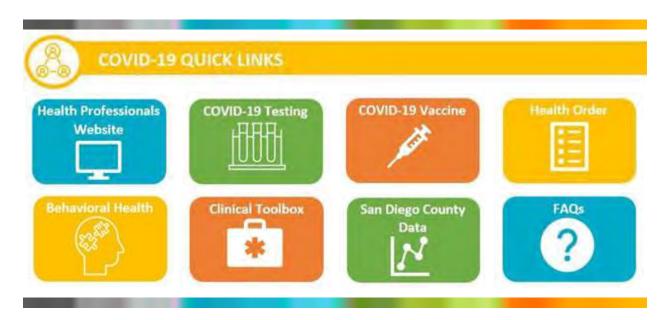
COVID-19 Health Equity Pilot Projects

The Department of Public Health is awarding grants to COVID-19 Health Equity Pilot Projects. The CDPH Office of Health Equity will be administering \$5 million from the CDC and Laboratory Capacity Grant to 16-30 community based organizations led by and serving communities facing disparities in COVID-19 impacts and infection rates. The application deadline is **Tuesday, March 2**.

Love Your Heart 2021

<u>Love Your Heart</u> is an annual event in which organizations from across the U.S. and Mexico join together to provide free blood pressure screenings to the public to promote heart health awareness by knowing their numbers. This year, <u>Love Your Heart @Home</u> is promoted through the distribution of home blood pressure cuffs to communities at risk. Love Your Heart will occur on **Thursday, February 11**, with extended screening dates between February 8–14. Visit the <u>Love Your Heart Digital Toolkit</u> to access a variety of templates and patient education materials to help persons and organizations participate in <u>Love Your Heart</u>.





Text COSD COVID19 to 468-311 to get text alert updates. For local up-to-date information, please visit:

WWW.CORONAVIRUS-SD.COM

Local monitoring information is updated daily around 4:00pm.

Thank you and please continue to let us know how we can support you. Please submit suggestions and questions to: MCSDCallCenter.HHSA@sdcounty.ca.gov





IN RESPONSE TO COVID-19: A CHECKLIST TO SUPPORT LGBTQ STUDENTS DURING DISTANCE LEARNING

During the COVID-19 quarantine, educators across the country are learning how to continue to provide a safe and affirming experience for LGBTQ students via distance learning. Recent data supports the need for educator action and focus:

According to <u>HRC's 2018 LGBTQ</u> Youth Report:

- 67% of LGBTQ students hear their families make negative comments about LGBTQ people.
- While some students are open about their LGBTQ identity at school, only 21% are out at home.
- Privacy and confidentiality are critically important for LGBTQ youth, especially for those who do not have supportive families. Extreme rejecting behaviors can have dire consequences: Approximately 40% of the homeless youth population in the United States identify as LGBTQ, most as a result of rejection by immediate family members.
- Additionally, LGBTQ youth of color often face additional stress and adverse impacts on their health and well-being as a result of bias around their intersecting identities.

Educators are uniquely positioned to provide support and resources to LGBTQ students who are now more at risk due to the pandemic. NEA EdJustice and HRC Foundation's Welcoming Schools have joined together to offer a checklist and resources to help educators and allies navigate how to best support LGBTQ students as schools make this unprecedented pivot to distance learning.

Maintaining inclusivity and safe spaces for LGBTQ students is more important than ever during this period of emergency online learning.

Ask yourself how you are supporting LGBTQ students today:

- Does your virtual classroom include <u>visible signs</u>, like Zoom backgrounds <u>or posters</u>, showing that you are LGBTQ affirming?
- Are you normalizing pronoun sharing by sharing your pronouns, verbally, or by adding your pronouns to your name on your virtual platform if you have the option? Are you creating spaces for students to share their pronouns?
- Are you establishing trust with LGBTQ students by using gender-inclusive and non-heteronormative language such as "students" instead of "boys and girls" and "family" or "caring adult" instead of "mom and dad"?
- Can you confirm a private, virtual connection with an LGBTQ student that is not supported at home, so you can check-in with them about their family dynamic and brainstorm self-care strategies?
- Have you addressed the greater risk for LGBTQ cyberbullying as students overall spend more time online during this period of social isolation by <u>utilizing teachable</u> moments to not only stop negative anti-LGBTQ language and behavior, but also to educate about LGBTQ terminology, history, and current events?
- With LGBTQ drop-in centers closed and LGBTQ student clubs (i.e. GSA's) no longer in session, are you sharing direct, online LGBTQ resources with your students that provide affirming support and connection for LGBTQ youth in virtual settings day or night — including the <u>Trevor</u> <u>Project</u> which offers 24-hours-a-day, 365-days-a-year confidential and online support for LGBTQ youth?

Ready to learn more? Visit Human Rights Campaign, for more resources on how COVID-19 impacts LGBTQ Communities.





SUPPORTING LGBTQ STUDENTS DURING THE CORONAVIRUS QUARANTINE:

A Tip-Sheet for School Counselors

During the coronavirus quarantine, school counselors across the country continue to provide essential services to students. Social distancing requires a new set of strategies and provides new opportunities to support and affirm LGBTQ youth, especially when they live in unsupportive environments. This tip-sheet offers key considerations when working with LGBTQ students in virtual settings, and guidance to help mitigate some of the emerging challenges they face when social distancing practices are required.

1. Create an Affirming Virtual Meeting Space

Now more than ever, LGBTQ students need the support of their school counselors. According to HRC's 2018 LGBTQ Youth Report, only **27**% of LGBTQ youth say they are comfortable talking to their school counselor about questions related to their LGBTQ identity.

- Create a visible safe space. If you are using Zoom to meet with your students virtually, consider using an <u>HRC branded Zoom background</u> to help indicate to students that you are LGBTQ-affirming, or you can search online for your favorite LGBTQ safe space sign to display in an area that is visible when you are speaking on screen.
- Ask or share pronouns to demonstrate LGBTQ inclusion. If your meeting platform allows you to list your name, add your pronouns; for example, "Mrs. Garcia (pronouns: she/her)".
- Use gender-inclusive and non-heteronormative language, which not only models inclusivity, but also sends a strong message to LGBTQ individuals that you support LGBTQ people. If students can easily assess that you are an ally, they will be more likely to trust you and to seek the support they need.

2. Anticipate Unique Challenges When Families are not Affirming

While some LGBTQ students find affirming support at school, many live with unsupportive families. According to HRC's 2018 LGBTQ youth report, 67% of LGBTQ students hear their families make negative comments about LGBTQ people. When LGBTQ students are unable to be their authentic selves, or when they are forced to live in unsupportive environments, the effects can be overwhelming.

Check-in with the student. If the student is not open about their LGBTQ identity at home, and if you can confirm that the virtual connection with the student is private (more on confidentiality and privacy on number 3 below), consider asking how their family dynamic is impacting them while under coronavirus quarantine.

What makes me more comfortable is if they have a sticker or poster that shows that they are supportive of LGBTQ people.

"

I'm not out to my parents for safety reasons. If they found out I was gay, they would kick me out or force me into conversion therapy.



I don't feel comfortable letting a non-LGBTQ person know my identity.



- + Ask what self-care practices they have tried and what, if anything, is helping to alleviate stress. Brainstorm new strategies together and check in with them to see which ones are working best. Make sure they know that you see them, that you affirm their identity and that this time of social isolation is temporary.
- Discuss with them and direct them to online and virtual resources listed below including the lifesaving work of The Trevor Project, which offers confidential phone and online support for LGBTQ youth 24 hours a day, 365 days a year.

3. Protect Confidentiality and Privacy

While some students are open about their LGBTQ identity at school, only 21% are out at home, according to HRC's 2018 LGBTQ Youth Report. Privacy and confidentiality are critically important for LGBTQ youth, especially for those who do not have supportive families. Extremely rejecting behaviors can have dire consequences: approximately 40% of the homeless youth population in the United States identify as LGBTQ, most as a result of rejection by immediate family members.

- Consider new risks when meeting virtually with an LGBTQ student unsupportive family members, or those who are unaware of their child's LGBTQ identity could potentially listen in. For example, if a young trans boy is open with you about his trans status but not with his parents/guardians, think through how to best protect his safety and privacy.
- Create an electronic form for meeting requests that allows the student to include the name and pronouns they want you to use during virtual meetings. Their answers may depend on their ability to secure privacy during virtual sessions. Add a blurb about the confidentiality rights of students, and provide suggestions to improve privacy, such as using an earpiece, or identifying a private area of the home during scheduled meetings. These strategies may improve the likelihood that LGBTQ students will get the support they need.

4. Promote Resilience

When LGBTQ students are affirmed and supported it is easier for them to think beyond current challenges. Additionally, when students feel more connected to their education, their desire and ability to learn improves. As school counselors utilize common strategies to advocate for student success and promote resiliency, it may be helpful to add LGBTQ-inclusive college and career readiness practices to their toolbox. Many LGBTQ students have experienced or witnessed multiple forms of anti-LGBTQ discrimination, and in the current environment may feel more worried than ever about their ability to thrive and succeed as an out LGBTQ young adult. Encourage your LGBTQ students to explore the myriad of online resources that can raise the hopes of students and encourage goal setting and planning for their future.

- + Discuss scholarships specifically for LGBTQ students, locating LGBTQ-friendly colleges and universities and even identifying campuses that provide gender-inclusive housing and offer trans-inclusive healthcare.
- Review current or future employers that provide <u>LGBTQ-inclusive workplaces</u>, and work with them to plan and set goals for success.

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My fear keeps me from seeing a school counselor about things that make me anxious or upset. I don't know how they might react [to my LGBTQ identity], so I'd rather go online or talk to my other queer friends about it.

5. Refer Students to Virtual Supports for LGBTQ Youth

Affirming school counselors are often the lifeline for students, but with school buildings closed, their offices are no longer just down the hall. Having a direct connection to supportive peers and those with shared identities is critically important to the overall well-being of LGBTQ youth. This is especially true during challenging times. With LGBTQ drop-in centers closed and LGBTQ student clubs (i.e. GSAs) no longer in session, some LGBTQ students have lost their only outlets to fully be themselves.

- Remind students that online platforms are not always the best place for LGBTQ youth to find affirmation and are not always monitored to screen out hate speech or other forms of online bullying. According to GLSEN's 2017 National School Climate Survey, nearly half of LGBTQ students reported experiencing some form of electronic harassment in the past year.
- Discuss online safety with students and suggest LGBTQ-inclusive options. To help, HRC has compiled a list of direct and online resources for LGBTQ youth where they can find affirming support and safely connect with LGBTQ peers in virtual settings any time of day or night. There are even virtual supports for parents and families who are in need of support themselves or who want to learn how they can better support their LGBTQ child. Sharing these culturally relevant resources with LGBTQ students can make a lasting impact, and perhaps even save a life.

Summary

Please keep in mind that LGBTQ students need to feel connected, affirmed, and supported during this period of social isolation and uncertainty. For the many LGBTQ youth struggling for self-acceptance or acceptance at home, there is an added burden on their emotional well-being. As a school counselor, you have a critically important role to play in providing that one place, being that one person with whom they can be their true selves. You can help LGBTQ students practice self-care, find meaningful resources and connections online, and ameliorate the tension and stress they may be experiencing while at home.

Author: Dr. Vincent "Vinnie" Pompei, Director, HRC's Youth Well-Being Program

Additional Resources for School Counselors on LGBTQ Inclusion

These resources offer further insights into the work school counselors can do to ensure safety, inclusion, and well-being for LGBTQ students.

- + ASCA Position Statement: The School Counselor and LGBTQ Youth
- + ASCA Position Statement: <u>The School Counselor and Transgender / Gender-nonconfirming Youth</u>
- + ASCA: COVID Related Resources for School Counselors
- + HRC Foundation's Report: 2018 LGBTQ Youth Report





SUPPORTING LGBTQ STUDENTS DURING THE CORONAVIRUS QUARANTINE:

A Tip-Sheet for School Counselors

During the coronavirus quarantine, school counselors across the country continue to provide essential services to students. Social distancing requires a new set of strategies and provides new opportunities to support and affirm LGBTQ youth, especially when they live in unsupportive environments. This tip-sheet offers key considerations when working with LGBTQ students in virtual settings, and guidance to help mitigate some of the emerging challenges they face when social distancing practices are required.

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- Create a visible safe space. If you are using Zoom to meet with your students virtually, consider using an <u>HRC branded Zoom background</u> to help indicate to students that you are LGBTQ-affirming, or you can search online for your favorite LGBTQ safe space sign to display in an area that is visible when you are speaking on screen.
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2. Anticipate Unique Challenges When Families are not Affirming

While some LGBTQ students find affirming support at school, many live with unsupportive families. According to HRC's 2018 LGBTQ youth report, 67% of LGBTQ students hear their families make negative comments about LGBTQ people. When LGBTQ students are unable to be their authentic selves, or when they are forced to live in unsupportive environments, the effects can be overwhelming.

Check-in with the student. If the student is not open about their LGBTQ identity at home, and if you can confirm that the virtual connection with the student is private (more on confidentiality and privacy on number 3 below), consider asking how their family dynamic is impacting them while under coronavirus quarantine.

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- + Ask what self-care practices they have tried and what, if anything, is helping to alleviate stress. Brainstorm new strategies together and check in with them to see which ones are working best. Make sure they know that you see them, that you affirm their identity and that this time of social isolation is temporary.
- Discuss with them and direct them to online and virtual resources listed below including the lifesaving work of The Trevor Project, which offers confidential phone and online support for LGBTQ youth 24 hours a day, 365 days a year.

3. Protect Confidentiality and Privacy

While some students are open about their LGBTQ identity at school, only 21% are out at home, according to HRC's 2018 LGBTQ Youth Report. Privacy and confidentiality are critically important for LGBTQ youth, especially for those who do not have supportive families. Extremely rejecting behaviors can have dire consequences: approximately 40% of the homeless youth population in the United States identify as LGBTQ, most as a result of rejection by immediate family members.

- Consider new risks when meeting virtually with an LGBTQ student unsupportive family members, or those who are unaware of their child's LGBTQ identity could potentially listen in. For example, if a young trans boy is open with you about his trans status but not with his parents/guardians, think through how to best protect his safety and privacy.
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- Discuss scholarships specifically for LGBTQ students, locating LGBTQ-friendly colleges and universities and even identifying campuses that provide gender-inclusive housing and offer trans-inclusive healthcare.
- Review current or future employers that provide <u>LGBTQ-inclusive workplaces</u>, and work with them to plan and set goals for success.

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Affirming school counselors are often the lifeline for students, but with school buildings closed, their offices are no longer just down the hall. Having a direct connection to supportive peers and those with shared identities is critically important to the overall well-being of LGBTQ youth. This is especially true during challenging times. With LGBTQ drop-in centers closed and LGBTQ student clubs (i.e. GSAs) no longer in session, some LGBTQ students have lost their only outlets to fully be themselves.

- Remind students that online platforms are not always the best place for LGBTQ youth to find affirmation and are not always monitored to screen out hate speech or other forms of online bullying. According to GLSEN's 2017 National School Climate Survey, nearly half of LGBTQ students reported experiencing some form of electronic harassment in the past year.
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Summary

Please keep in mind that LGBTQ students need to feel connected, affirmed, and supported during this period of social isolation and uncertainty. For the many LGBTQ youth struggling for self-acceptance or acceptance at home, there is an added burden on their emotional well-being. As a school counselor, you have a critically important role to play in providing that one place, being that one person with whom they can be their true selves. You can help LGBTQ students practice self-care, find meaningful resources and connections online, and ameliorate the tension and stress they may be experiencing while at home.

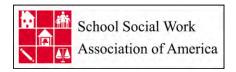
Author: Dr. Vincent "Vinnie" Pompei, Director, HRC's Youth Well-Being Program

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SUPPORTING LGBTQ STUDENTS DURING THE CORONAVIRUS PANDEMIC:

A Tipsheet for School Social Workers

During the coronavirus pandemic, school social workers across the country continue to provide essential services to students. Social distancing requires a new set of strategies and provides new opportunities to support and affirm LGBTQ youth, especially when they live in unsupportive environments. This tip-sheet offers key considerations when working with LGBTQ students in virtual settings, and guidance to help mitigate some of the emerging challenges they face when social distancing practices are required.

1. Create an Affirming Virtual Meeting Space

Now more than ever, LGBTQ students need the support of their school social workers. According to HRC's 2018 LGBTQ Youth Report, 77% of LGBTQ youth reported that they felt down or depressed within the past week. The report also indicated that many LGBTQ students feel unsafe or uncomfortable discussing LGBTQ issues with school-based mental health providers.

- Create a visible safe space. If you are using Zoom to meet with your students virtually, consider using an <u>HRC-branded Zoom background</u> to help indicate to students that you are LGBTQ-affirming. You can also search online for your favorite LGBTQ safe space sign to display in an area that is visible when you are speaking on screen.
- * Ask or share pronouns to demonstrate LGBTQ inclusion. If your meeting platform allows you to list your name, add your pronouns; for example, "Mrs. Garcia (pronouns: she/her)."
- Use gender-inclusive and non-heteronormative language, which not only models inclusivity, but also sends a strong message to LGBTQ individuals that you support LGBTQ people. If students can easily assess that you are an ally, they will be more likely to trust you and to seek the support they need.

2. Anticipate Unique Challenges When Families Are Not Affirming

While some LGBTQ students find affirming support at school, many live with unsupportive families. According to HRC's 2018 LGBTQ youth report, 67% of LGBTQ students hear their families make negative comments about LGBTQ people. When LGBTQ students are unable to be their authentic selves, or when they are forced to live in unsupportive environments, the effects can be overwhelming. Family rejection is one factor that contributes to the fact that LGBTQ youth continue to be disproportionately represented among homeless youth in our nation, and their experiences of homelessness continue to



What makes me more comfortable is if they have a sticker or poster that shows that they are supportive of LGBTQ people.

- LGBTQ STUDENT

be characterized by violence, discrimination, poor health and unmet needs.

- Check in with the student. If the student is not open about their LGBTQ identity at home, and if you can confirm that the virtual connection with the student is private (more on confidentiality and privacy in number three), consider asking how their family dynamic is impacting them while under coronavirus quarantine.
- Ask what self care practices they have tried and what, if anything, is helping to alleviate stress. Brainstorm new strategies together and check in with them to see which ones are working best. Make sure they know that you see them, that you affirm their identity and that this time of social isolation is temporary.
- Provide LGBTQ-affirming counseling to students, actively respond to reports of online bullying and discrimination and intentionally promote youth empowerment and leadership.
- Provide support and services to families by connecting them with community resources and information. Even when parents are accepting, they may not understand how to reduce their child's risk and promote well-being or know what resources are available. Accepting and supportive behaviors by family members can significantly decrease several health risks among LGBTQ youth.
- Discuss with them and direct them to online, virtual resources and LGBTQ affirming community housing resources listed below including the lifesaving work of The Trevor Project, which offers confidential phone and online support for LGBTQ youth 24 hours a day, 365 days a year.

3. Protect Confidentiality and Privacy

While some students are open about their LGBTQ identity at school, only 21% are out at home, according to HRC's 2018 LGBTQ Youth Report. Privacy and confidentiality are critically important for LGBTQ youth, especially for those who do not have supportive families. Extremely rejecting behaviors can have dire consequences: approximately 40% of the homeless youth population in the United States identifies as LGBTQ, most as a result of rejection by immediate family members.

- Consider new risks when meeting virtually with an LGBTQ student unsupportive family members, or those who are unaware of their child's LGBTQ identity could potentially listen in. For example, if a young trans boy is open with you about his trans identity but not with his parents/guardians, think through how to best protect his safety and privacy.
- Create an electronic form for meeting requests that allows the student to include the name and pronouns they want you to use during virtual meetings. Their answers may depend on their ability to secure privacy during virtual sessions. Add a blurb about the confidentiality rights of students, and provide suggestions to improve privacy, such as using an earpiece or identifying a private area of the home during scheduled meetings. These strategies may improve the likelihood that LGBTQ students will get the support they need.

4. Promote Resilience and Equity

The impact of COVID-19 has shown more pronounced rates of unemployment and suicidality especially within the LGBTQ community, according to various researchers. When LGBTQ students are affirmed

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- LGBTQ STUDENT

and supported, it is easier for them to think beyond current challenges. Additionally, when students feel more connected to their education, their desire and ability to learn improves. As school social workers utilize common strategies to advocate for student success and promote resiliency, it is essential that school social workers engage in activities to promote equity and well-being for LGBTQ students, particularly given their risks and potential for resilience.

- Advocate for LGBTQ-inclusive curricula. Research finds that when schools provide inclusive curricula in addition to safe spaces and LGBTQ-inclusive anti-bullying policies, LGBTQ youth report higher levels of safety and academic performance.
- School social workers must continue to take on leadership roles in helping schools develop policies and practices that support LGBTQ youth.
- Encourage and facilitate LGBTQ-inclusive training for staff, teachers and administrators to help increase sensitivity and inclusivity of LGBTQ students.
- Pay particular attention to intersectionality and issues that may impact youth with multiple marginalized social identities.
- Be mindful of intersectionality and consider the needs of LGBTQ students of color. For example, a GLSEN report found that Latinx LGBTQ students experienced harrassment due to both being LGBTQ and their ethnic/racial identities and experienced the lowest levels of school belonging. Students of color should not be treated as a monolithic group, as each have their own unique challenges and strengths.

5. COVID-19 Creating Implications for Serious Mental Health Concerns

According to The Trevor Project, even prior to the pandemic, LGBTQ youth have been found to be at significantly increased risk for depression, anxiety, substance use and suicidality. These risks are even more pronounced among transgender and non-binary youth. Thus, LGBTQ youth may be particularly vulnerable to negative mental health impacts associated with the COVID-19 pandemic. Creating opportunities to decrease feelings of social isolation and sustain a sense of community during distance learning is vital.

- Facilitate a virtual LGBTQ support group or a virtual meeting time for Gender and Sexuality Alliances (GSAs) to stay connected by offering to be a staff advisor.
- Provide therapeutic support to address anxiety, grief and loss, trauma, etc. Utilizing trauma-informed cognitive behavioral interventions, strengths based approaches and empowerment strategies decreases the impact of various risk factors on one's mental health.
- Assess basic needs and connect to community resources the economic impact of COVID-19 may be creating barriers to access food, finances, housing instability, unemployment, etc.
- Use surveys and other research tools such as focus groups or participatory action research to assess the climate and needs of LGBTQ youth. This information can provide critical insights into the needs and experiences of LGBTQ youth in your schools and inform interventions and policy issues, and provide information about key areas of need and success.

6. Refer Students to Virtual Supports for LGBTQ Youth

Affirming school social workers are often a lifeline for students, but with school buildings closed, their offices are no longer just down the hall. Having a direct connection to supportive peers and those with shared identities is critically important to the overall well-being of LGBTQ youth. This is especially true during challenging times. With LGBTQ drop-in centers closed and LGBTQ student clubs (i.e. GSAs) no longer in session, some LGBTQ students have lost their only outlets to fully be themselves.

- * Remind students that online platforms are not always the best place for LGBTQ youth to find affirmation and are not always monitored to screen out hate speech or other forms of online bullying. According to GLSEN's 2017 National School Climate Survey, nearly half of LGBTQ students reported experiencing some form of electronic harassment in the past year.
- Discuss online safety with students and suggest LGBTQ-inclusive options. To help, HRC has compiled a list of direct and online resources for LGBTQ youth where they can find affirming support and safely connect with LGBTQ peers in virtual settings any time of day or night. There are even virtual supports for parents and families who are in need of support themselves, or who want to learn how they can better support their LGBTQ child. Sharing these culturally relevant resources with LGBTQ students can make a lasting impact, and perhaps even save a life.

7. Self-Awareness and Professional Accountability

A recent report published by GLSEN (2018) found that the majority of school social workers received little education or training related to competencies for working with LGBTQ students. Thus, school social workers must take responsibility for their own continued professional development and self-awareness. There are numerous resources listed at the end of this tipsheet and free monthly webinars for youth-serving professionals provided by the Human Rights Campaign here. In addition, school social work is a human rights-based profession, and as such should approach practice from this lens. This means having an orientation towards cultural humility, intersectionality and awareness of your own privilege and social location, as well as building on strengths and resilience. Unlike cultural competence, a cultural humility approach focuses on the practitioner's critical awareness, addresses power imbalances and holds oneself and institutions accountable for addressing inequities and creating inclusive environments.

- Know yourself and critically challenge yourself and others.
- Look beyond the micro into the structural and larger forces that impact LGBTQ youth.
- Become familiar with and knowledgeable about common concerns of LGBTQ youth and their school experiences. The social worker practicing from a lens of cultural humility takes responsibility for sharing this information with their school community.

Summary

Please keep in mind that LGBTQ students need to feel connected, affirmed and supported during this period of social isolation and uncertainty. For the many LGBTQ youth struggling for self-acceptance or acceptance at home, there is an added burden on their emotional well-being. As a school social worker, you have a critically important role to play in providing that one place, being that one person with whom they can be their true selves. You can help LGBTQ students practice self-care, find meaningful resources and connections online and in the community and ameliorate the tension and stress they may be experiencing while at home.



My fear keeps me from seeing a school counselor about things that make me anxious or upset. I don't know how they might react (to my LGBTQ identity), so I'd rather go online or talk to my other queer friends about it.



- LGBTQ STUDENT

Authors

Dr. Vincent "Vinnie" Pompei, Director, HRC's Youth Well-Being Program; Dr. Leticia Villarreal Sosa, Professor of Social Work, Dominican University, River Forest, IL, SSWAA University Relations Board Representative; Christy McCoy, School Social Worker St. Paul Public Schools, President-Elect SSWAA

Additional Resources for School Social Workers on LGBTQ Inclusion

These resources offer further insights into the work school social workers can do to ensure safety, inclusion, and well-being for LGBTQ students.

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 Retrieved from https://www.socialworkers.org/LinkClick.aspx?fileticket=51nqVQj68W0%3d&portalid=0
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- + The Family Acceptance Project. https://familyproject.sfsu.edu/
- Green, A.E., Price-Feeney, M. & Dorison, S.H. (2020) Implications of COVID-19 for LGBTQ Youth Mental Health and Suicide Prevention. New York, New York. https://www.thetrevorproject.org/2020/04/03/implications-of-covid-19-for-lgbtq-youth-mental-health-and-suicide-prevention/
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- Zongrone, A. D., Truong, N. L., & Kosciw, J. G. (2020). Erasure and Resilience: The Experiences
 of LGBTQ Students of Color. https://www.glsen.org/research/reports-and-briefs



Prevention and early intervention (PEI) in mental health seeks to reduce risks to wellbeing, so that people and the communities in which they live in thrive. We like to think of it as "traveling upstream." Here, we can more effectively provide support and intervene early when needs emerge and reduce the negative outcomes of mental health needs, such as suicide, incarceration, and unemployment.

Spurred by Senate Bill 1004 (Wiener), the Commission launched a project to explore ways to equitably advance PEI to reduce these outcomes, reduce mental health disparities, and improve the collective wellness of communities.

But that sounds like a lot of ground to cover – or a lot of water the tread – so we've broken down the key findings of PEI across a series of live events streamed directly to you. Additionally, we will be launching our free lecture series with some of the mental health community's most respected experts with Upstream University. Check the schedule of events below for more and register to participate. We look forward to seeing you Upstream!

LISTENING SESSIONS

California communities lend their voice to help guide PEI forward.

Superior Region: Fri. 2/12, 11am-1pm

Bay Area Region: Mon. 2/22, 1pm-3pm

Southern Region: Mon. 3/1 2pm-4pm

Los Angeles County: Wed. 3/3 Noon-2pm

Central Region: Friday 3/8 1pm-3pm

PUBLIC HEARINGS

See the ins and out of the PEI initiative.

Key concepts of PEI:

Thurs. 2/25

Opportunities for PEI across our lives: Thurs. 4/22

FORUM SERIES

Virtual forums with the field's top experts.

Risk & Protective Factors' role in Strategic Planning & Program Delivery: Wed. 3/17, 12:30pm-4:30pm

State & local evaluation of PEI activities: Sun. 3/24, 9am-1pm

Reducing the negative consequences of mental health needs:

Mon. 4/5 12:30pm-4:30pm

UPSTREAM UNIVERSITY

Explore effective, new, innovative ways to address issues before they become serious mental health challenges with the community's most respected experts.

Premiering at the end of February.

County of San Diego

Children, Youth and Families Behavioral Health System of Care Council

February 8, 2021 Update

Submitted by: Yael Koenig/Edith Mohler

Executive Sub-Committee

Purpose

The Executive Committee is a "standing" sub-committee of the CYF Council. The CYF Deputy Director and administrative staff support the Council by leading the Executive Sub-Committee which is comprised of the sub-committee chairs and co-chairs of the CYF Council. This subcommittee is tasked to:

- Coordinate CYF Council activities
- Inform on current issues relevant to the CYF System of Care (SOC)
- Ensure follow through on CYF Council action items.

Fiscal Year 2020-21 Active Executive Members				
Public	Private	Family	Education	
Yael Koenig	Minola Clark Manson	Valerie Hebert (Family and	Violeta Mora	
(County staff)	(Co-Chair)	Youth as Partners)	(Education)	
Grisel Ortega-Vaca	Valerie Hebert	Suzette Southfox	Heather Nemour	
(County Staff)	(CYF Liaison)	(CYF Liaison)	(Education)	
Darwin Espejo	Julie McPherson			
(County staff)	[CYF Change Agents			
	Developing Recovery			
	Excellence (CADRE)]			
Edith Mohler	Marissa Varond			
(County staff)	[CYF Change Agents			
	Developing Recovery			
	Excellence (CADRE)]			
Eileen Quinn-O'Malley	Aisha Pope			
(County staff-Outcomes)	(Early Childhood)			
	Ginger Bial			
	(Early Childhood)			
	Renee Cookson			
	(CYF Liaison)			
	Emily Trask (Outcomes)			
	Rose Woods (Training)			
	Rosa Ana Lozada			
	[Cultural Competence			
	Resource Team (CCRT)]			

Areas of Focus for Fiscal Year 2020-21

- Address transformation of service delivery due to COVID-19
- Address Equity and Racial Justice
- Convene the postponed 4.13.20 Combined Councils meeting focused of Transgender Health Across the Lifespan
- Inform goals and focus areas which may include:
 - ✓ Child and Family Strengthening Advisory Board
 CWS Advisory board with 3 sub-committees; areas of interest to Council
 - ✓ Strong Families, Thriving Communities Disparities





- o 29 Bold Action items: Which/What would like to discuss as a Council
- o Expecting Report to BOS in August 2020 (Time may shift due to COVID-19)
- ✓ Mapping the Intersection of Youth and the Juvenile Justice System
- ✓ Explore Youth Well: https://youthwell.org/
 - Areas of interest (Social Determinants of Health)
- ✓ Health Homes Program
- ✓ Suicide prevention
 - o Trainings
 - Through collaboration among sectors

Fiscal Year 2020-21 Mid-Year Updates (Through December 2020)

- Addressing transformation of services delivery due to COVID-19 through sharing of:
 - ✓ BHS Director's updates and BHS Director's Reports to the Behavioral Health Advisory Board (BHAB)
 - ✓ Board of Supervisors (BOS) Letters
 - ✓ SchooLink updates
 - ✓ County website links
 - ✓ Plan for January 11, 2021 CYF Council Hot Topic: Recruitment and Engagement During the Pandemic
- Addressing Equity and Racial Justice through sharing of:
 - ✓ Board of Supervisors (BOS) Letters
 - ✓ Announcement of relevant trainings and conversations
- Facilitated
 - ✓ Annual Council Orientation (July 13, 2020)
 - ✓ Annual Council Strategic Planning (August 10th and September 14th, 2020)
 - ✓ Convened the postponed April 13, 2020 Combined Councils meeting focused of Transgender Health Across the Lifespan on (October 12, 2020)
 - ✓ Live Well San Diego Youth Sector presentation (November 9,2020)

Fiscal Year 2020-21 Sub-Committees/Groups

MEETING DATE/LOCATION/TIME

Meets virtually on the 4th Thursday of the month From 11:30 A.M. to 12:00 P.M.

Representation:

Council Co-Chairs

Subcommittee Chairs and Co-Chairs CYF Administration/Staff to Council

LEAD (Co-Lead)

Minola Clark Manson and Valerie Hebert

Mcmanson@sdsu.edu ValerieHebert@namisd.org

CYF Lead: Yael Koenig

Grisel.Ortega@sdcounty.ca.gov





County of San Diego Children, Youth and Families Behavioral Health System of Care Council February 8, 2021 Update

Submitted by: Valerie Hebert

Family and Youth Sector

Purpose

- Strengthening shared identity for CYF Peer Partner Staff
- Supporting Statewide measures for California Peer Certification
- Sharing resources and information on CYF Peer Partner staff opportunities
- Strengthening Four Sector understanding and recognition of CYF Peer Partner staff
- Bring information back to the CYFBHSOC Council

Fiscal Year 20-21 Active Family and Youth Members			
Public	Private	Family	Education
Frank Congine	Valerie Hebert	Valerie Hebert	Sonia Lira
Darwin Espejo	John Bucher	Ingrid Alvarez-Ron	Linda Ketterer
Romalyn Watson	Darron Jones	Sten Walker	
Edith Mohler	Celeste Hunter		
	Lucy Jasso		

Areas of Focus for Fiscal Year 2020-21

- Increase sub-committee attendance and participation through member invitation
- Continue to follow Peer Certification updates and support implementation of Senate Bill 803
- Fill open Youth Served by the Public Health System and Family Receiving Services (Past or Present) seat on the CFYBHSOC Council
- Continue to create a robust Youth and Family Support Partners virtual support meeting with increased participation across the CYF System of Care
- Hosting a robust, fun-filled, and well attended Youth Mental Health Well-Being Celebration in May 2021, in-person or virtual
- Continue with community discussion of "Hot Topics" identification and sharing with the CYF System of Care
- Continue with mental health discussions using the Facebook Live platform valuing youth and family voice (also recorded for viewing at later dates) to support families and youth
- Coordination of TAY information sharing between families, youth and agencies supporting TAY and TAY Council
- CYF System of Care Training Academy Annual Conference Planning Committee involvement
- Continue to support the planning of robust presentations for Youth and Family Support Partners Peer Partner Coaching meetings and celebration. Upcoming support/Coaching meeting themes include:
 - ✓ SSI for families with youth, presented by Legal Aid
 - ✓ ADHD Strategies for families and providers
 - ✓ Rapid Response Housing providers
 - ✓ Recovery residences
 - ✓ Driving focus on providing multicultural support to Youth and Family Support Partners working within the CYF System of Care

Fiscal Year 2020-21 Mid-Year Updates (Through December 2020)

 Recruiting CYF System of Care staff to assist with planning the May 2021 Youth Mental Health Well-Being Celebration in May 2021 so as to prepare for a robust, fun-filled, and well attended in-person or virtual Youth Mental Health Well-Being Celebration.





Fiscal Year 2020-21 Sub-Committees/Groups

MEETING DATE/LOCATION/TIME

Family Voice Town Hall Meeting

Weekly virtual meetings per region (North, South, East and Central).

Calendar access: https://namisandiego.org/calendar/ For more information email CYFLiaison@namisd.org or call (858)987-2980

LEAD (Co-Lead)

Renee Cookson, Suzette Southfox and Valerie Hebert

ReneeCookson@namisd.org SuzetteSouthfox@namisd.org ValerieHebert@namisd.org

CYF Rep:

Frank.Congine@sdcounty.ca.gov RomalynWatson@sdcounty.ca.gov Edith.mohler@sdcounty.ca.gov

Family Youth Focus Group

Weekly virtual meetings. Calendar access: https://namisandiego.org/calendar/For more information email CYFLiaison@namisd.org or call (858)987-2980

Youth, Family Support Partners Subcommittee

Meets every 3rd Thursday of the month from 1:30 - 3:00pm Virtual meetings (as of March 2020 and until further notice)





County of San Diego Children, Youth and Families Behavioral Health System of Care Council February 8, 2021 Update

Submitted by: Minola Clark Manson

Private Sector

Purpose

This is an ad hoc group is prepared to address issues as they arise.

The group convenes to address issues raised by the Council or through the Private sector.

Fiscal Year 2020-21 Active Private Members			
Public	Private	Family	Education

Areas of Focus for Fiscal Year 2020-21

Fiscal Year 2020-21 Mid-Year Updates (Through December 2020)

Fiscal Year 2020-21 Sub-Committees/Groups

MEETING DATE/LOCATION/TIME

Meets as an Ad Hoc group when projects/initiatives arise.

LEAD (Co-Lead)

Minola Clark Manson Mcmanson@sdsu.edu

CYF Rep: CYF COR's by invitation





County of San Diego Children, Youth and Families Behavioral Health System of Care Council

February 8, 2021 Update

Submitted by: Aisha Pope/ Ginger Bial

Early Childhood Sub-Committee

Purpose

The Early Childhood Mental Health Subcommittee supports the CYFBH continuum of care by assisting to integrate early childhood mental health programs, addressing key issues impacting young children and their families, and supporting agenda culturally relevant system improvements. ECMH Subcommittee partners with BHS CYFSOCC when considering the unique needs of the 0-5 population and their caregivers when making decisions on programming, policy, and training.

Fiscal Year 2020-21 Active Early Childhood Members				
Public	Private		Family	Education
Jerelyn Bourdage	Stacy Annand	Ginger Bial	Linda Ketterer	Evette Callahan
Shannon Jackson	Sherry Casper	Lisa Castagnola	Emma Eldredge	Kim Flowers
Ana Mendez	Valerie Centeno	Christine Cole	Eva Melendez	Fernanda Garcia
Charmi Patel Rao	Terri Cook-Clark	Latysa Flowers		Oscar Gomez
Sharon Qin	Sarah Franco	Pradeep Gidwani		Lisa Linder
Nohemy Terrazas	Jennifer Kennedy	Rosa Ana Lozada		Saribe Perez
	Marisela Molina	Aisha Pope		Rose Woods
	Ashley Rambeau	Angela Rowe		
	Nikoo Sadatrafiei	Desiree Shapiro		
	Edgar Sierra	Izzy Shine		
	Stephanie Smith	Bobbi Smylie		
	Nubia Soto	Carole Steel		
	Erin Taylor	Autumn Weidman		
	Aimee Zeitz			

Area of Focus for Fiscal Year 2020-21

1) PROMOTE AND EDUCATE

Provide information to improved systemwide understanding of early childhood mental health and integrate throughout the system of care.

OBJECTIVES:

- A. Ensure ECMH voice is represented during SOCC discussions (i.e. hot topics) & ad hoc committees specifically about how caregivers, young children and providers are managing during COVID19 and the current socio-political climate
- B. Provide information to SOCC on caring for caregivers of youth 0-5 related to COVID19 and current socio-political
- C. Develop shared language to effectively communicate within subcommittee and with larger SOCC (i.e. 'systemic racism' as possible replacement language for 'racial unrest' since 'systemic racism' might be perceived to put ownership on all versus people of color)
- D. Continue to offer informational videos, handouts, etc. to the SOCC to promote relevant ECMH information
- E. Continue to provide suggestions for training topics to RHIS and the We Can't Wait Conference to increase community competency





2) ADVOCATE

Prioritize service/program areas for a united voice to have a "ready to go position" for funding opportunities.

OBJECTIVES:

- A. Highlight intersectionality of ECMH and trauma-informed care with the greater system and help translate how this committee intersects with others in the SOCC
- B. Support workforce development by communicating impact of reflective practice on providers, programs and community
- C. Connect with caregivers to assist/empower their advocacy efforts by sharing resources across members and increasing caregiver voices as partners
- D. In light of current climate, consider advancement of current practices/programs vs. new practices/programs
- E. Continue to identify service gaps, disparities, and cultural barriers at annual BHS Community Forums

3) PROMOTE SYSTEM CHANGE

Improve and promote system efforts by increased understanding of services currently available **OBJECTIVES:**

- A. Encourage the ECMH subcommittee to 'look within' and evaluate current practices across members with the intention of assessing readiness to move toward a 'culture of inquiry' and begin system change from within
- B. Gather information on reflective practice (i.e. influence on productivity, staff retention, creativity, burnout, vicarious and secondary trauma, etc.) to learn about the impact of this model on the development of critical thinking skills necessary for complex work and crises; and how this model influences providers, programs and systems
- C. Continue to improve collaboration and hold a united voice with other systems around current efforts to move the ECMH field forward

Fiscal Year 2020-21 Mid-Year Updates (Through December 2020)

1) PROMOTE AND EDUCATE

- A. Promoted HOPE by including an optional reflective check-in about how we (individual members and overall programs) are doing at the beginning of each subcommittee meeting
- B. Began discussion of partnering first with RIHS, and then WCW, on potential ECMH workshop topics, and then determining how to access trainers who speak Spanish to provide training directly in both languages
- C. Discussed creating a 1-pager on core ECMH training topics with suggested trainers to submit to SOC

2) ADVOCATE

D. Shared resources (i.e. basic needs, educational supports, mental health, race and disparity, leadership, etc.) to be distributed to staff and caregivers that will assist and empower individual advocacy efforts

3) PROMOTE SYSTEM CHANGE

A. Collaborated with CCRT chair to create a reflective space for ECMH and CCRT subcommittee members to increase self and collective awareness of how race, disparity and other social justice issues impact ourselves and our teams

Fiscal Year 2020-21 Sub-Committees/Groups

MEETING DATE/LOCATION/TIME

Meets the 2_{nd} Monday of the month:

3160 Camino Del Rio South, Suite 101, San Diego, CA 92123

From 11:00 A.M. – 12:00 P.M.

Virtual Meetings as of May 2020:

https://rchsd.zoom.us/j/98390275341?pwd=NGNZcIRPMW00UHVxL0VnTnI5VWNsZz09

LEAD (Co-Lead)

Aisha Pope and Ginger Bial apope@centerforchildren.org

vbial@rchsd.org
CYF Representative:

Shannon.Jackson@sdcounty.ca.gov







Children, Youth and Families Behavioral Health System of Care Council February 8, 2021 Update



Submitted by: Alisha Eftekhari

Transition Age Youth (TAY) Council

Purpose

The purpose of this council is to facilitate the design and implementation of Transitional Aged Youth (TAY), ages 16-25 services in the Children, Youth, and Families and the Adult and Older Adult Systems of Care by providing feedback and recommendations to the Behavioral Health Director. The TAY council provides community representation and input for the integrity of all TAY services and advancement of all TAY related aspects of the System of Care.

Fiscal Year 20-21 Active CCRT Members				
Public	Private		Education	Family
Steven Wells	Laura Tancredi-Baese	Vanessa Arteaga	Flora Barron	Ursula Hardianto (TAY)
	Prizila Vidal	Courtney Simone-Clements		
	Miriam Adam	Victor Esquivel		
	Peggie Webb	Matthew Wood		
	Christina Metz	Cheyenne Bartram		
	Serena Terrones	Joseph Edwards		
	Mark Bartlett			

BHS System Leads: (not council members): Alisha Eftekhari (AOA) and Michael Miller (CYF)

Areas of Focus for Fiscal Year 2020-21

- Social Justice: Will focus on disparities in TAY accessing Mental Health and Substance Use services. Identify specific needs of TAY facing/impacted by inequity.
- Optimal Service Access: Using TAY perspective to identify blocks to service delivery and the specific needs of TAY
 affected by COVID related issues. Recommendations for fiscally aware interventions to most effectively provide
 optimal TAY services.
- Website and Orientation Manual

Open Seats: Client Advocacy, Hospital Partner, Law Enforcement, Primary Health Care, Public Safety Liaison/Juvenile Probation, Substance Use Disorder Services/Co-Occurring, TAY Youth, and Underserved Communities/CCRT.

Fiscal Year 2020-21 Mid-Year Updates (Through December 2020)

- Website and Orientation Manual Subcommittee reviewed Council Bylaws and created a draft orientation manual
 to help orient new members. Orientation manual to possibly provide the outline of what the website for the
 council will consist of.
- Social Justice subcommittee brainstormed avenues to research how diverse and culturally sensitive our workforce is and how this correlates with TAY engagement and retention in services.
- COVID 19 presentation by Champions for Health which is in collaboration with HHSA.
- TAY Council hosted a roundtable talk with providers about the impacts of COVID 19 within their programs and service delivery.
- Youth Engagement in Services (YES) Initiative presentation to educate our TAY focused programs and community members about what the County has proposed.
- Combined Council Meeting in October had a panel discussion about Transgendered Health across the Lifespan.

Fiscal Year 2020-21 Sub-Committees/Groups

MEETING DATE/LOCATION/TIME

Meets Quarterly the 4th Wednesday of the month-

from 3:00 - 4:30 P.M. at

National University, 9388 Lightwave Ave.

Room 118, San Diego, CA 92123 (Virtual Meetings as of May 2020)

LEAD (Co-Lead)

AOA Representative:

Alisha Eftekhari

Alisha.Eftekhari@sdcounty.ca.gov

CYF Representative: Michael Miller

Michael.Miller@sdcounty.ca.gov

County of San Diego Children, Youth and Families Behavioral Health System of Care Council

February 8, 2021 Update

Submitted by Julie McPherson/Marisa Varond

CYF Change Agents Developing Recovery Excellence (CADRE)

Purpose

The purpose of the CADRE CYF subcommittee is to strengthen the Comprehensive, Continuous, Integrated System of Care (CCISC) initiative in its vision to deliver wide-ranging services for children, adolescents, and families. We serve as a forum for service providers to enhance treatment for children and adolescents experiencing or impacted by co-occurring disorders in order to promote health and resiliency within our youth. The subcommittee aims to:

- Develop integrated co-occurring training and technical assistance in accordance with the CCISC and Cooccurring Center for Excellence standards
- Support the implementation of evidence-based practices to support effective interventions for youth impacted by co-occurring disorders
- Provide a vital link between systems, consumers, and families
- Increase access to needed behavioral health services
- Promote collaboration and develop meaningful relationships between providers to ensure that youth and their families receive the right services at the right time in the right setting.

Fiscal Year 2020-21 Active CADRE Members			
Public	Private	Family	Education
Shannon Jackson	Mental Health and SUD		
	BHS-contracted providers		

Areas of Focus for Fiscal Year 2020-21

- Identify strategies and continue to support programs in responding to COVID-19 and its "shadow pandemic" with a particular emphasis on access to co-occurring services, youth and family engagement, and traumainformed, culturally responsive expansion of telehealth.
- Promote the advancement of trauma-informed care at the intersection of behavioral health and law enforcement (Includes July 9th presentation from PERT's Community/Law Enforcement Liaison, Wes Alpers).
- Utilize the framework of the Comprehensive Continuous Integrated System of Care (CCISC) principles to better address the complex and profound impact that race plays in clients' behavioral health.
- Continue to strengthen knowledge of and relationships between CYF SUD and Mental Health programs for ease of referrals, warm handoffs and admissions for youth.
- Invite TAY and AOA SUD and Mental Health programs to the CYF CADRE Sub-Committee to increase awareness of programs, services, and referral processes to support youth transitioning into the TAY/AOA system of care.

Fiscal Year 2020-21 Mid-Year Updates (Through December 2020)

10/8/20 – Heather Nemour and Violeta Mora of the San Diego County Office of Education (SDCOE) presented on the following topics:

- School legislations related to behavioral health
- SDCOE supports for districts to meet legislation requirements
- Mental Health in School Collaborative
- COVID impacts on pupil and staff wellness
- AB 2022- Pupil Mental Health Services





• In addition to exchanging resources, there was robust discussion about how behavioral health providers can better partner with school districts to support students who have higher behavioral health needs.

Fiscal Year 2020-21 Sub-Committees/Groups

MEETING DATE/LOCATION/TIME

LEAD (Co-Lead)

Meets Quarterly-2nd Thursday of the month

From 1:30 -3:00pm

5095 Murphy Canyon Road, Suite 320,

San Diego, CA 92123

(Virtual Meetings as of May 2020)

Julie McPherson and Marissa Varond JMcPherson@comresearch.com Marisa.Varond@mcalisterinc.com

CYF Representative:

Shannon.Jackson@sdcounty.ca.gov





County of San Diego Children, Youth and Families Behavioral Health System of Care Council February 8, 2021 Update

Submitted by: Emily Trask

Outcomes Sub-Committee

Purpose

Outcomes Sub-Committee reviews service delivery systems and aims to improve County of San Diego System of Care services by measuring and evaluating outcomes and use results to provide recommendations to the CYFBHSOC Council. The Outcomes Subcommittee meets on the first Tuesday of every other month.

Fiscal Year 20-21 Active Outcomes Members			
Public	Private	Family	Education
Yael Koenig	Emily Trask (co-chair)	Renee Cookson	Yuka Sakamoto
Amanda Lance-Sexton	Amy Chadwick	Evan Hodges	
Eileen Quinn-O'Malley	Brent Crandal		
(co-chair)			
Elizabeth Miles	Antonia Nunez		
Ezra Ramirez	Shellane Villarin		
Babbi Winegarden	Renee Cookson		
	Michele Ly		
	Golbanou (Golby) Rahimi		
	Sara Welsh		

Areas of Focus for Fiscal Year 2020-21

- Review the PSC data during the quarantine & examine any disparities among different racial/ethnic groups.
- Complete a comprehensive CANS and ACES Crosswalk.
- YSS online survey compare completion rates and answers to paper surveys from the past.
- Review clinician survey feedback for the online YSS to improve administration in the fall (e.g., look into text to voice option to read to families, tracking completion).
- Provide trainings/presenters to further support efforts for integrating CANS into clinical practice.
- Support transition to telehealth through handouts on best practices

Fiscal Year 2020-21 Mid-Year Updates (Through December 2020)

- Developed handout on engaging families and youth in teletherapy
- Developed Clinician Telehealth Checklist of teletherapy best practices
- Reviewed PSC data before and after the Stay-at-Home orders began in March 2020
- Discussed clinicians' feedback to the online YSS
- Creating a handout on using the CANS strengths during client plan development and treatment interventions

Fiscal Year 2020-21 Sub-Committees/Groups

MEETING DATE/LOCATION/TIME

Meets the 1st Tuesday every other month

Virtual Meeting

From 11:30 A.M. – 12:30 P.M.

LEAD (Co-Lead)

Emily Trask & Eileen Quinn-O'Malley

EvTrask@ucsd.edu

Eileen.Quinn-OMalley@sdcounty.ca.gov

CYF Representatives:

Yael.Koenig@sdcounty.ca.gov

Amanda.Lance-Sexton@sdcounty.ca.gov





County of San Diego Children, Youth and Families Behavioral Health System of Care Council February 8, 2021 Update

Submitted by Rose Woods

Training Academy

Purpose

The Children Youth and Families System of Care (CYF-SOC) Training Academy provides trainings to enhance the work of public systems in providing services to children, youth and families in San Diego County. Responsive Integrated Health Solutions (RIHS) continues this work through the Training Academy Committee, a collaboration of partners in the four sectors of the CYF System of Care.

Fiscal Year 2020-21 Active Training Academy Members			
Public	Private	Family	Education
Jorge Aguilar, Probation	Minola Clark Manson, RIHS	Valerie Hebert, NAMI San Diego	Linda Ketterer, San Diego Mission Academy (Education & Family representation)
Becky Lanier, CWS	Pam Hansen, San Diego Center for Children	LaTysa Flowers	
Edith Mohler, BHS-CYF	Celeste Hunter, UPAC	Celeste Hunter, UPAC (Private & Family representation)	
Nilanie Ramos, BHS	Aisha Pope, San Diego Center for Children		
Jennifer Rusit, BHS	Golby Rahimi, MHS, Inc. Eliza Reis, MHS Inc. Rose Woods, RIHS		

Areas of Focus for Fiscal Year 2020-21

Five CYFSOC Training Academy trainings on the following topics:

- Understanding our Own Biases and Assumptions
- Supporting People of Color in Treatment
- Disparities and Access to Healthcare
- Bridges Out of Poverty
- Missed Cues in Service Delivery

Annual CYFSOC Training Academy conference *Youth Substance Use: Risk, Resilience, Reconnection* will be held virtually on May 27, 2021.

Scholarships for professional development opportunities will be made available to parent partners, family partners and youth support partners throughout the CYF System of Care to attend local and statewide conferences.

CYF System of Care Advancing Principles Awards.





Fiscal Year 2020-21 Mid-Year Updates (Through December 2020)

The CYFSOC Training Academy has delivered one of our five trainings:

• Bridges Out of Poverty (Delivered on 10-6-2020)

Annual CYFSOC Training Academy conference **Youth Substance Use: Risk, Resilience, Reconnection** will be held virtually on **May 27, 2021**. Workshops will include:

- Understanding the Impact of In Utero Substance Exposure and Implementing Concrete Care Strategies in Caring for Substance Exposed Infants and Toddlers
- Early Onset Psychosis and Cannabis Use
- California Youth Advocacy Network (CYAN): Advocating for a Tobacco-Free California
- Opioid Crisis and Juvenile Drug Smuggling in San Diego County

With more to come!

Fiscal Year 2020-21 Sub-Committees/Groups

MEETING DATE/LOCATION/TIME

Meets the 1st Wednesday every month From 9:00 A.M. – 10:00 A.M.

Virtual Meeting

rwoods@sdsu.edu
CYF Representative:

Edith.mohler@sdcounty.ca.gov





County of San Diego Children, Youth and Families Behavioral Health System of Care Council February 8, 2021 Update

Submitted by: Heather Nemour

Education Sub-Committee

Purpose

The purpose of the Education Sub-Committee is to build and/or enhance relationships between mental health providers and education resulting in resource development, needs identification, relationship building, and partnerships with stakeholders in efforts that promote student and staff mental health & wellness, positive school climates, and trauma informed delivery of school-based programming.

Fiscal Year 2020-21 Active Education Members			
Public	Private	Family	Education
<u>Frances Cooper</u>	<u>Pam Hansen</u> San Diego	Christina Frey-Youth	<u>Heather Nemour</u> &
County of San Diego	Center for Children		<u>Violeta Mora</u> SDCOE-
			Student Support Services
	Mareeh Marquez	<u>Debbie Dennison</u> -Parent	Cara Schukoske SDCOE
	Pathways Cornerstone		Special Education
	Program		
			Barbara Ryan California
			School Board Association
			Yuka Sakamoto San
			Diego Unified School
			District

Areas of Focus for Fiscal Year 2020-21

- Be responsive to the changing needs of schools with COVID-19 and distance learning such as virtual trainings, resource identification and student & staff wellness resources
- Provide access to LivingWorks Start online suicide prevention training to identified school districts for middle and high school teachers, staff and students
- SDCOE will promote and disseminate the newly updated 2021-21 Suicide Prevention Resource Guide for Schools to the 42 school districts and charter schools
- SDCOE will develop an AB1767 resource guide for schools to help K-6 districts develop and implement suicide prevention policies and practices
- Continue to convene the San Diego Suicide Prevention Council's K12 Education Sub-Committee, Mental Health in Schools Collaborative and the CYFBHSOCC Education Sub-Committee and cross inform the three groups by sharing information and resources
- Convene Ad-hoc Education Sub-Committee on a quarterly basis and be responsive to the behavioral / mental health needs of schools during pandemic
- Review SchooLink Manual for inclusion of a COVID19 module / information.
- Contribute to the FY2021 Live Well Advance with School Track.
- Continue to explore opportunities for SDCOE and BHS to collaborate and strengthen work related to suicide education and prevention.





150

Fiscal Year 2020-21 Mid-Year Updates (Through December 2020)

- SDCOE delivered 13 trainings on mental health & wellness, coping strategies during COVID-19, suicide prevention and positive school climate to 227 educators and parents
- 119 middle and high school staff and 74 middle and high school students in San Diego completed LivingWorks Start online suicide prevention training. Students and staff can use the <u>LivingWorks Start Training Flyer</u> to access the training at no cost.
- SDCOE held 3 Mental Health in Schools Collaborative meetings that convene key district & school staff at the intersection of mental health and learning practices with an average of 66 participants from 19 districts at each meeting
- SDCOE and SPC promoted and disseminated the newly updated <u>2021-21 Suicide Prevention Resource Guide</u> for <u>Schools</u> to 3,221 educators and school partners
- SDCOE developed an <u>AB1767 Resource Guide for Elementary Schools</u> to help K-6 districts meet legislative requirements to develop and implement suicide prevention policies and practices and disseminated it to 1,455 educators
- SDCOE developed a <u>Suicide Prevention Guide for High Priority Youth Groups</u> to support districts in meeting the requirements of AB2246 in relation to having resources for youth groups who are disproportionately affected by suicide. This guide was disseminated to 1,455 educators
- SDCOE wellness team developed a <u>Teen Guide to Mental Health & Wellness</u>, <u>Young Persons Guide to Wellness</u>, <u>Social and Emotional Strategies at Home During COVID-19</u>, <u>Kids Need Schools to Continue Reporting Abuse During COVID-19 Crisis</u> and <u>Helping Vulnerable Students Feel Comfortable with Online Learning</u>. All were disseminated to the 42 school districts and 3,221 educators and school partners
- In partnership with the District Attorney's Office and local law enforcement, Handle with Care was launched in 7 school districts representing 153 schools, to bridge the justice and education system to promote trauma informed practices in schools
- SDCOE received a federal grant, Project SaFE, to implement human trafficking prevention education to 7th and 9th grade students in 29 schools
- Convened 5 SPC Education Sub-Committee meetings
- SDCOE and BHS held 8 meetings to collaborate and strengthen youth suicide prevention efforts across the county
- BHS-CYF provided a SchooLink presentation to the Mental Health in Schools Collaborative. The presentation
 provided San Diego County school and/district administrators, social workers, counselors, psychologists,
 teachers, mental health supports, and other staff a brief overview of SchooLink and the addition of a new
 COVID module, which includes an update to the referral process and the continuity of services.
- The <u>Student Wellness & Positive School Climate</u> website is continuously updated with information and resources for schools, staff, students and families.

Fiscal Year 2020-21 Sub-Committees/Groups

MEETING DATE/LOCATION/TIME

LEAD (Co-Lead)

Meets as needed. This year due to COVID-19 the committee decided to meet quarterly. We held two meetings and plan to meet again in March and June2021. Dates TBD.

Heather Nemour: heather.nemour@sdcoe.net

CYF Representative: Frances.Cooper@sdcounty.ca.gov





151





CYF Education Sub-Committee Update

Heather Nemour, Program Specialist

Violeta Mora, Project Specialist

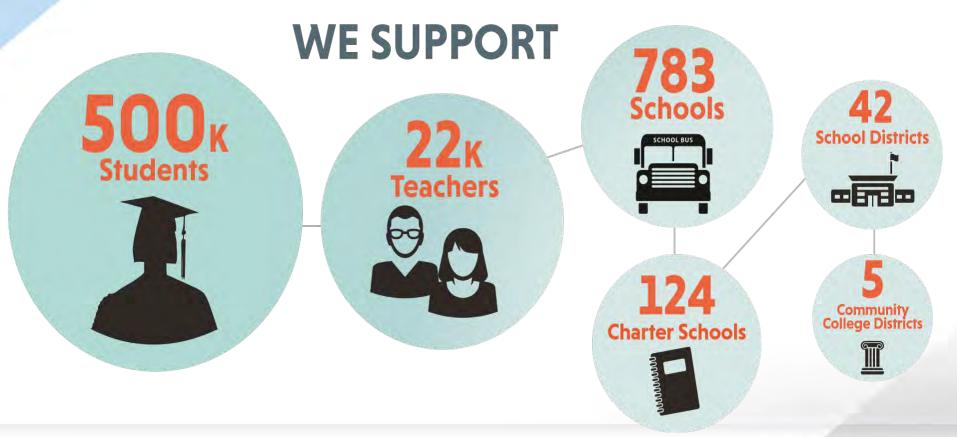
Student Support Services: Student Wellness & Positive School Climate

February 8, 2021





San Diego County Office of Education



Student/Staff Wellness & Positive School Climate Department Snapshot July -December 2020





3 Mental Health in Schools

Collaborative meetings held that convene key district & school staff intersecting mental health and learning practices

On average, **66** participants from **19** districts at each meeting

Training Requests

13 trainings delivered to

765 educators & parents across the county and state on mental wellness and coping strategies during COVID-19





13 trainings delivered on mental health & wellness, suicide prevention and positive school climate

227 participants representing 93%of the 42 districts



5 <u>comprehensive</u> <u>guides</u> created and shared with 51,721 educators throughout the county and state





In partnership with the District
Attorneys Office and local law
enforcement, Handle with Care
was launched to bridge the justice
and education system to promote
trauma informed practices in schools

In 7 school districts representing 153 school communities

Safe From Exploitation

Received <u>Project SaFE</u> a federally funded grant to implement human trafficking prevention education to 7th and 9th



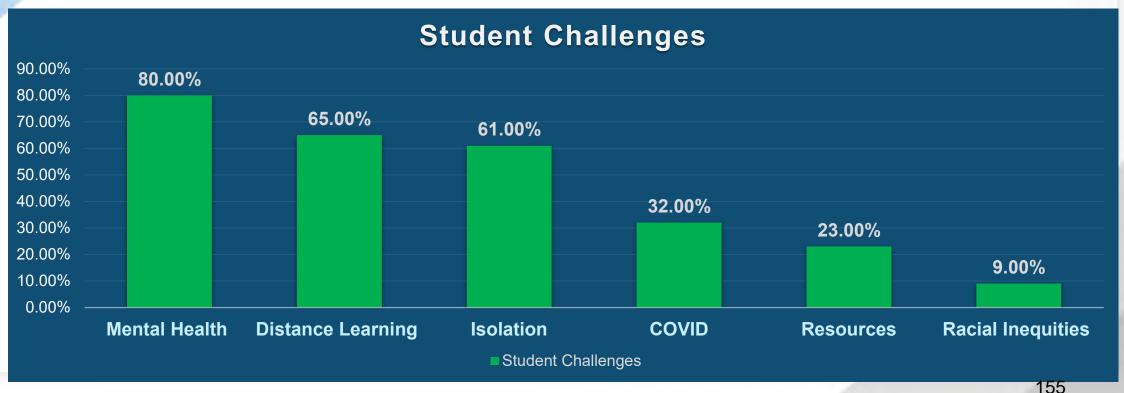
grade students in 29 schools







Student Challenges During COVID







AB1767 Resource Guide for Schools

- Training and curriculum
- Articles

Resiliency

Social Emotional Learning



AB1767 Resource Guide for Elementary Schools

ABI-767 requires the governing board or body of a LEA that serves pupils in kindergarten and grades 1 to 6, inclusive to, before the beginning of the 2020-21 school year, adopt, and update as prescribed, a policy on pupil suicide prevention that specifically addresses the needs of high-risk groups. Requires this policy to be age appropriate and delivered and discussed in manner that is sensitive to the needs of young pupils. Also requires this policy to be written to ensure proper coordination and consultation with the county mental health plan for a referral for mental health or related services made on behalf of a pupil who is a Medi-Cal beneficiary. Requires the policy to address any training on suicide awareness and prevention to be provided to teachers of pupils in all of the grades served by the LEA

Suicide Prevention Training for Elementary School Staff

Act on FACTS helps educators understand this important role with an acclaimed online training program that is self-paced, comprehensive and offered free of charge. Through the use of role-plays, the training embraces school culture and presents real-life scenarios for youth suicide prevention methods. Survivors of suicide loss share their personal stories, while many mental health experts give detailed accounts regarding at-risk populations, warning signs, risk factors, and what the referral process means for educators, counselors and members of the school community. Once the 60-minute base module is completed there is a 30-minute module that builds off of the base module containing information specific to elementary school environments and educators.

Length	Website	Grades	Fee
90 mimutes	Making Educators Partners in Youth Suicide Prevention: Act on FACTS	K-12	No

Created by the SDCOE Student Wellness & Positive School Climate Department-July 2020



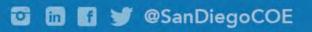


Resource Guides to Support AB2246 Suicide Prevention Guide for High Priority Youth Groups

Education Code section 215 (a) (2) The policy shall specifically address the needs of high-risk groups, including, but not limited to, all of the following: Youth bereaved by suicide. Youth with disabilities, mental illness, or substance use disorders. Youth experiencing homelessness or in out-ofhome settings, such as foster care. Lesbian, gay, bisexual, transgender, or questioning youth.

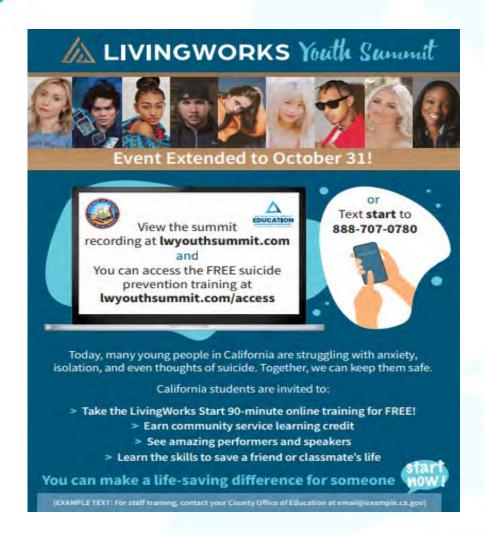
EDUCATION Suicide Prevention Guide for High Priority Youth Groups erican Indian/Alaskan Nativ and Care Program American Indians Seven Generations ater challenge with suicide than other groups. However, they d silence, the stigmo, and to seek help. Learn more about the irit of American Indian men me their pain, silence, the stigma and to seek help. Heart of any, includes location shooting from the Alaskan cities of includes the Inupian, Tlingit, Tshimshian, Unangon, bascon, Aleut and Yupik Tribes, SAMHSA is grateful for the loation of all who made this video possible. tempt Survivors ing hope is possible. The Lifetine is conlinble for support. 3477 Be True and Be You: A Basic Mental Healt side for LGBTQ+ Youth revortifeLine: 866-488-7386 vor Text: Text "START" to 678678 ulble 24/7/365.

HighPriorityGroupsresourceguide 12 07 20





AB1808: LivingWorks Start Training

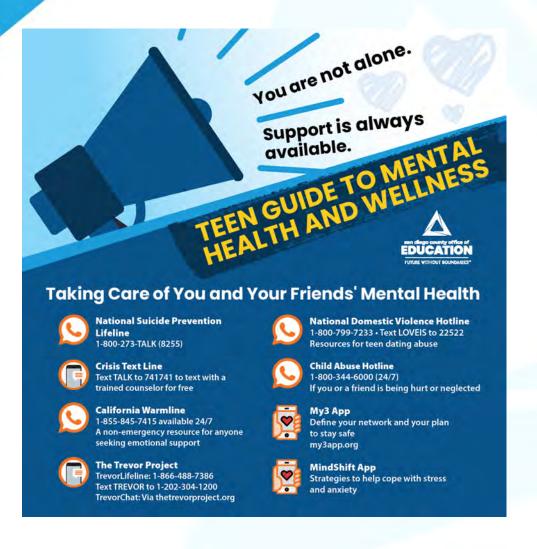


- Available to middle and high school staff & students in California
- First come first served basis
- 295 staff trained in San Diego
- 182 students trained in San Diego





Mental Health and Wellness Resources





A Collection of Mental Health Resources

Student/Staff Wellness & Positive School Climate

Supporting School Communities in Challenging Times

STUDENT RESOURCES

A Young Person's Guide to Wellness

Teen Guide to Mental Health & Wellness-English

Teen Guide to Mental Health & Wellness-Spanish

Mental Health Resources BY Teens FOR Teens

Online Suicide Prevention Training for Ages 13 and Over



Click Here For More Information & Resources on the Student/Staff Wellness & Positive School

STAFF RESOURCES

Helping Vulnerable Students Feel Comfortable with Online Learning

Kids Need Schools to Continue Reporting
Abuse During COVID-19 Crisis

Online Suicide Prevention Training for Middle & High School Staff



PARENT RESOURCES

Social & Emotional Strategies at Home
During COVID-19

Tips to Supporting Your Student's Virtual Learning at Home-English

<u>Tips to Supporting Your Student's Virtual</u> <u>Learning at Home-Spanish</u>





Contact Information

Heather Nemour

Program Specialist

Student Wellness & Positive School Climate

heather.nemour@sdcoe.net 858-298-2093

Violeta Mora

Project Specialist

Student Wellness & Positive School Climate

viomora@sdcoe.net

858-298-2099



A Collection of Mental Health Resources

Student/Staff Wellness & Positive School Climate

Supporting School Communities in Challenging Times

STUDENT RESOURCES

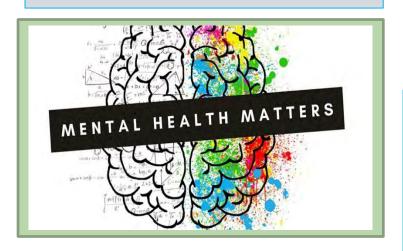
A Young Person's Guide to Wellness

<u>Teen Guide to Mental Health & Wellness-</u> <u>English</u>

<u>Teen Guide to Mental Health & Wellness-</u> Spanish

Mental Health Resources BY Teens FOR Teens

Online Suicide Prevention Training for Ages 13 and Over



Click Here For More Information & Resources on the Student/Staff Wellness & Positive School Climate

STAFF RESOURCES

Helping Vulnerable Students Feel
Comfortable with Online Learning

<u>Kids Need Schools to Continue Reporting</u>
Abuse During COVID-19 Crisis

Online Suicide Prevention Training for Middle & High School Staff



PARENT RESOURCES

Social & Emotional Strategies at Home During COVID-19

<u>Tips to Supporting Your Student's Virtual</u> Learning at Home-English

<u>Tips to Supporting Your Student's Virtual</u> Learning at Home-Spanish

161

County of San Diego

Children, Youth and Families Behavioral Health System of Care Council February 8, 2021 Update

Submitted by: Ann Vilmenay and Rosa Ana Lozada

Cultural Competency Resource Team (CCRT)

Purpose

Advises the BHS Executive team of the Adult/Older Adult (AOA) and Children, Youth and Families (CYF) Systems of Care on issues of cultural competence. The CCRT is currently meeting virtually on the first Friday of each month from 10:00 to 11:30 A.M. The standing monthly agenda items include: CCRT Chair's Report, Mental Health Services Act (MHSA) update, Quality Improvement Updates, and Committee Updates: Education and Training, and Children's Update (CYF).

Fiscal Year 2020-21 Active CCRT Members			
Public	Private	Family	Education
Piedad Garcia	Shadi Haddad	Mercedes Webber	Juan Camarena
Chair/Ethnic Services Coordinator			
Charity White-Voth	Sahra Abdi	Celeste Hunter	Shane Padamada
Liz Miles	Mohamed Abdi	Ingrid Alvarez-Ron	Erick Mora
Nilanie Ramos	Michelle Ly	Luz Pinto	
Ann Vilmenay	Mercedes Webber		
Nancy Rodriguez	Kat Katsani-Semel		
Kimberly Pettiford	Rebecca Paida		
Jennifer Rusit	Evelyn Parada		
Andrea Duron	Adam Renteria		
Fran Cooper	Rosa Ana Lozada		
Luisa Dones	Jessica Young		
Karen Harris	Minola Clark Manson		
Ezra Ramirez	Yen Du		
Edith Mohler	Awichu Akwanya		
Nicole Le Fol	Gebaynesh Gashaw-Gant		
Sara Zare	Ingrid Alvarez-Ron		
Danyte Mockus-Valenzuela	Rick Heller		
Martin Dare	Shiva Jaimes		
Angie Solom	Elisa Barnett		
Danielle Eguiza	Mahvash Alami		
Claire Riley	Brian Bauers		
	Elizabeth Dauz		

Areas of Focus for Fiscal Year 2020-21

- **C**OVID-19 Discussions that include but are not limited to:
 - ✓ Actions to address racial and ethnic disparities
 - ✓ Telehealth services and Client engagement
 - ✓ How can the CCRT contribute to COVID-19 Tracing, Tracking and Treating?
- Equity and Racial Justice discussions that include but are not limited to:
 - √ Training needs for services providers
- Discuss primary care and behavioral health integration (invite experts/speakers)
- Review accomplishments from Fiscal Year 2019-20 and develop Fiscal Year 2020-21 focus and goals





Information Sources:

- 1) https://www.sandiegocounty.gov/content/dam/sdc/hhsa/programs/bhs/TRL/TRL%20Section%204/cult-comp-plan-2020.pdf
- 2) CCRT Meeting minutes located at: <u>https://www.sandiegocounty.gov/content/sdc/hhsa/programs/bhs/mental_health_services_act/bhs_c</u> ouncil_minutes.html

Fiscal Year 2020-21 Mid-Year Updates (Through December 2020)

CCRT Meeting:

- Team reviewed data for the last 2-3 years on penetration, retention, and numbers of visits the African American community and other ethnicities comprise, as well as to what is the need in the community
- Chair shared the following article "Why the term "BIPOC (Black Indigenous and People of Color) is so complicated, explained by linguists" with members.
- HHSA/BHS as well as other divisions revived the Diversity and Inclusion Executive Council at the Agency level.
- LGBT Recommendations, which are aligned with the County's 10-Year Roadmap, were presented.
- Members discussed the Strategic Plan for Diversity & Inclusion (2015-2020).
- County Executive Leadership Academy Training based on anti-racism and social equity is under development in partnership w/ RIHS.
- Input from CCRT members was solicited and provided for the MHSA Forum.
- CCRT Chair presented at the graduation for the Cultural Competency Academy Capstone, which included 40 hours of training on cultural competency.
- Members participated in the Birth of Brilliance Conference, which is a collaborative effort of the Early Childhood Committee, Children, Youth, and Family Behavioral Health System of Care Council (CYFBHSOC). The Birth of Brilliance Conference was conceived to raise the collective consciousness around the effects of racial disparities and implicit bias in mental health, social services, developmental services, early childhood education, and medical care. https://app.ce-go.com/birth-of-brilliance-virtual-conference#
- Team identified goals for 20/21. One of the goals included addressing Equity and Social Justice identifying training as a strategy. The following are three specific system collaborative activities toward this area of focus.
 - o Policy Recommendations County of San Diego Board of Supervisors approved Youth Sector Recommendations
 - The Live Well San Diego Youth Sector Framework supports the long-term work of the CYFBHSOC Council. This is reflected in our vision: Wellness for children, youth and families throughout their lifespan and mission: Advance systems and services to ensure that children and youth are healthy, safe, lawful, successful in school and in their transition to adulthood, while living in nurturing homes with families. Recommendations include: integration of the Children's System of Care guiding principles; cultural competence and trauma informed practice looking into cultural disparities and the impact of trauma across a lifespan along with training on cultural bias.
 - o Recommendations
 - Policy Child and Family Strengthening Advisory Board
 - The County Behavioral Health Cultural Competence Resource Team (CCRT) has reached out to Child Welfare to support their effort to address race and equity by sharing tools currently used in the Behavioral Health System and mutually learning about potential additional new tools supports advancement of equity, cultural and linguistic appropriate services throughout the Health and Human Services Agency.
 - https://docs.google.com/document/d/1apOD_t7xYF1HTRFW10-iK85xoN-X4EsOsNW3d_waOx4 /edit?usp=sharing





Education and Training Subcommittee:

- CCRT Education and Training Workgroup reviewed the "Progress Towards Reducing Disparities in the Mental Health Services Report (Fiscal Years: 2009-2010, 2012-2013, and 2015-2016)" provided feedback/input to the representatives from the UCSD Health Services Research Center to help identify gaps and needs.
- CCRT Education and Training Workgroup is in the process of finalizing "Recommendations to the Director."
 The goal is to utilize the data BHS has already collected, and streamline State identified best practices for effective system change.
- CCRT Education and Training Workgroup developed and finalized a "welcome packet" to distribute to new members.
- CCRT Education and Training Workgroup had an Ad Hoc meeting to help determine which topic (Anti-Racism or Health Equity) will be used for their E-Learning this year's recommendation was determined to be on anti-racism and social equity.
- The BHS Technical Resource Library was updated with new resources for Black Lives Matter.

Proposed Goals for 2020 (**Recommendations from Strategic Planning/Focus Group)

Best Practice:

- **Identify gaps in representation with CCRT and develop targeted outreach for those agencies/community groups for participation.
 - Invite additional Ethnic Community Based Organizations (ECBO) who align with CCRT as well as system of care partner representatives from Probation, Education, DA, etc. to move toward system wide improvement.
- Provide quarterly, uniform CCRT Updates to various meetings and Councils to provide consistent messaging.
 - o Develop a standardized tool to provide consistent CCRT highlights at the various Councils at the beginning of the fiscal year.
- **Provide dedicated support to contractors and community agencies who request technical assistance and guidance around cultural competence efforts within their agency, workforce, client served, etc.
 - o Review organizational CC Plans by Legal Entity.

Program:

- Advance culturally responsive community-based organizations to evidence-based standards.
- Increase CCRT Substance Use Disorder provider and consumer membership.
- Invite programs/providers to present on their respective Cultural Competence (CC) Plans, including approaches, implementation, challenges and goals at CCRT meetings.
- **Develop a process for dissemination of resources that are readily available not only to BHS contractors, but to the general community and BHS staff.

Policy:

- Identify and implement strategies to strengthen system wide advance of cultural competence standards consistent with the State Plan and CLAS standards.
 - o CCRT members will use a standardized tool to review provider organizational CC Plans by Legal Entity and provide recommendations for continuous improvement.





Meeting Information and Contacts LEAD (Co-Lead)

MEETING DATE/LOCATION/TIME

Meets the 1st Friday of the month

From 10:00 to 11:30 A.M.

6367 Alvarado Court, Suite 105, San Diego CA

92120

(Virtual Meetings as of May 2020)

Piedad Garcia

Piedad.Garcia@sdcounty.ca.gov

Charity White-Voth Charity.White-

Voth@sdcounty.ca.gov

Private Sector Representative:

Rosa Ana Lozada

RLozada@harmoniumsd.org

CYF Representative:

Edith Mohler

Edith.Mohler@sdcounty.ca.gov





Cultural Competence Resource Team (CYFBHSOC) FY 20/21 Mid Year Update

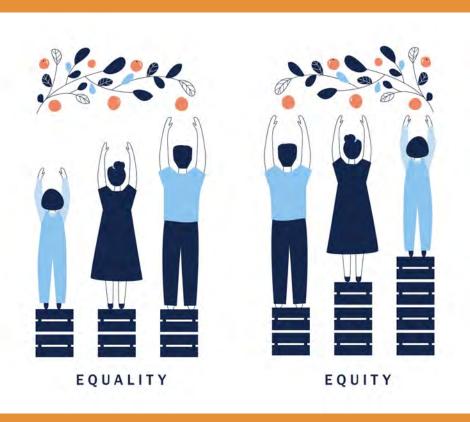
February 8, 2021 Rosa Ana Lozada LCSW, IFMHS, RFP II

System Change The Three "Ps"?

https://drive.google.com/file/d/1DWXIygZmCNs_LNMvE81gDM nRL5ntKZ5x/view?usp=sharing 1. Policy

2. Program

3. Practice



- 1. **Policy:** direction, governance, requirements, procedures, regulation, protocols, etc
- 2. **Program:** service model and design, populations to be served, types of services, etc.
- 3. **Practice:** day to day application of the policies and the program, interactions and relationships

BUT WAIT, THERE IS ANOTHER "P"

Personal Commitment

Achieving inclusion and equity is a lifelong journey.

Requires: Self reflection, love, & hope

System Change





"Somehow we've weathered and witnessed a nation that isn't broken, but simply unfinished."

Amanda Gorman

Amanda Gorman is the youngest inaugural poet in U.S. history, as well as an award-winning writer and cum laude graduate of Harvard University, where she studied Sociology. She has written for the New York Times and has three books forthcoming with Penguin Random House.

172

What is your Personal Commitment?





	TRADITIONAL PRACTICES AND NEW INNOVATIONS		
SPECIAL POPULATION	OUTREACH Bringing New Clients into Care NEW CLIENTS	ENGAGEMENT Ensuring the right level of service provision EXISTING CLIENTS	
Substance Use	 Shift in F2F – look to cross disciplinary partnerships to contact youth. Need broader community awareness – outreach with refugee community – need people who are trusted in the community to learn the language to talk about needs. Drive up outreach Partner with schools to distribute information Creative ways to meet with youth, provide PPE, fun activities for youth and families "How to Videos" about how 	 Creative ways to meet with youth, provide PPE, fun activities for youth and family's Drive up outreach How to videos about how different	
Mental Health	 How to videos about now different cultures understand the language of mental health from their culture SDUSD meeting with parent groups, resource guides for parents, resource guide for schools, Mailing out engagement letters when we are not able to communicate with new referrals and also after we have completed screenings to families that have not followed through with completing required Intake paperwork. Discussing barriers during screening process. 	 New to videos about now different cultures understand the language of mental health from their culture Need for home visits to connect and support the students and families. Many of us have learned that we need to support our teams (therapists, parent/peer partners, admin, etc.) so that they can best show up for the families we serve. Reflective supervision and infusing joy into their day has helped hold staff so that they can be emotionally present for those they are serving across - all populations 	
0-5	 Referrals increased beginning in September 	 Concern about child abuse rates, potentially gaps for young children needing mental health support 	





	TRADITIONAL PRACTICES AND NEW INNOVATIONS		
SPECIAL POPULATION	OUTREACH Bringing New Clients into Care NEW CLIENTS	ENGAGEMENT Ensuring the right level of service provision EXISTING CLIENTS	
	 Important to be F2F when possible 3 to 4 sessions have really helped to build engagement then switching to virtual if necessary Important to support the caregiver Visits in community parks 	 May need to identify new pathways. Important to be F2F when possible 	
6-12	 In person sessions to build rapport Games with body movement – running, mini golf, Social stories about interacting Bringing them games ahead of time and have them open at virtual sessions Keep sessions shorter and spread them out during the week. Outreach to parents to ensure they have support and need met - food 	■ Important to be F2F when possible	
Teens	 In the TRCs offered free drug test for parents to access for teens Schools have put together a portal on parent's page that shows resources and support to the parents about what could be happening with their child. 	■ Important to be F2F when possible	
Special Population such as CSEC, Homeless, LGBTQ	 Schools leverage strength in student body population on how to speak to the youth and or parents on specific topics. Use peers to help peers (middle school and high school) 	 Need to think about LGBTQ youth who are sheltering in place with family that may be having a hard time because of need for code switching, issues of safety. Online resources that can be accessed from the home are paramount for youth to be able to engage with a gender positive resource 	





	TRADITIONAL PRACTIC	ES AND NEW INNOVATIONS
SPECIAL	OUTREACH	ENGAGEMENT
POPULATION	Bringing New Clients into Care	Ensuring the right level of service
	NEW CLIENTS	provision EXISTING CLIENTS
		 Asking teachers to add pronouns to their signature lines – shows they are
		safe and perhaps someone a youth can speak to. Supporting LGBTQ Students During the Coronavirus Pandemic: A Tip Sheet for School Social Workers
Families	 Caregiver and parent engagement is vital for young kids and teens Social media is very important to share resources and tools. Faith based community's are interested in supporting and offering resources but may not know how to connect or offer support 	■ Important to be F2F when possible
Residential (SUD)		•
Residential (MH)	 Not applicable 	•
Education	 Schools leverage strength in student body population on how to speak to the youth and or parents on specific topics. Use peers to help peers SDCOEs Student Wellness and Positive School Climate Unit consolidated, created, and shared the mental health and wellness resources and virtual professional development opportunities through our multiple ListServs, SDCOE and outside partners' web- 	 Training school staff on what to look for in zoom meetings for signs of distress/ needs Asking teachers to add pronouns to their signature lines – shows they are safe and perhaps someone a youth can speak to. Add link to parent resource guide on the grade page.





	TRADITIONAL PRACTICES AND NEW INNOVATIONS		
SPECIAL POPULATION	OUTREACH Bringing New Clients into Care NEW CLIENTS	ENGAGEMENT Ensuring the right level of service provision EXISTING CLIENTS	
Health Plans / PC	based platforms. SDCOE Communications Department designated a COVID- 19 site for schools, caregivers, and students. https://covid- 19.sdcoe.net/ The following are resources to support LGBTQ students during distance learning. Response to COVID-19: A Checklist to Support LGBTQ Students During Distance Learning Supporting LGBTQ Students During the Coronavirus Quarantine: A Tip Sheet for School Counselors Partnerships with PCP for referrals	 Physician offices are still seeing needs 	
/ FQHC		Drop of materials at clinic	
Cultural Considerations	 Need to identify the language to how to ask for help Creating How to speak videos in specific cultures when addressing MH and SU 	 When people are stressed, we need to realize people's cultural norms. We need to consider their culture and use that in a way to stay engaged with them. Cultural representation is also important to keep in mind. 	
Foster Youth	Important to be F2F when possible	 Important to be F2F when possible 	
Justice Involved	 Important to be F2F when possible 	■ Important to be F2F when possible	





CYF Council Discussion - 1.11.21 & 2-8-21

	TRADITIONAL PRACTICES AND NEW INNOVATIONS		
SPECIAL POPULATION	OUTREACH Bringing New Clients into Care NEW CLIENTS	ENGAGEMENT Ensuring the right level of service provision EXISTING CLIENTS	
General Brainstorming	 virtual consultations and follow- ups through texting, phone and video calls, e-mails, social media, Skype, or Zoom 	 Wellness Calls for screening and informing of resources, when indicated Drive-Thru Check-ins for face to face contacts Appointment reminders- virtual touchpoints throughout care Mobile Applications for tracking wellness changes 	
Systemic Recommendations	 Important to be F2F when possible Creative ways to meet with youth, provide PPE, fun activities for youth and family's Drive-Thru Check-ins for face to face contacts Creating How to speak videos in specific cultures when addressing MH and 	 Important to be F2F when possible Creative ways to meet with youth, provide PPE, fun activities for youth and family's Drive-Thru Check-ins for face to face contacts Training school staff on what to look for in zoom meetings for signs of distress/ needs Creating How to speak videos in specific cultures when addressing MH and SU Outreach to parents to ensure they have support and need met - food 	

CYF SOC Council's Best Practices for Outreach and Engagement During the Pandemic

- Promote cross disciplinary solutions and connections
- Continuously review and advance best practices and identify opportunities in today's changing environment
- Continue dialog through MHCA, ADSPA, and Council
- .
- _

HOUSING **OUR YOUTH**

YMCA YOUTH & FAMILY SERVICES



FOR YOUTH DEVELOPMENT® FOR HEALTHY LIVING FOR SOCIAL RESPONSIBILITY

The Housing Our Youth (HOY) program provides specialized assistance to youth and young adults up to and including the age of 24 years throughout San Diego County who are at-risk or experiencing homelessness. HOY services will include housing, peer support, care coordination, service navigation, transportation, job preparation, subsidized employment, education assistance, tenant support, and other wrap-around services as needed to help youth remain stably housed and prepared for self-sufficiency.



WHAT SERVICES DO WE OFFER?

Our goal is to interrupt poverty and provide youth with the skills and tools to lead a financially independent and successful life. Our services include the following:



& CASE **MANAGEMENT**



PERSONAL DEVELOPMENT WORKSHOPS



EMPLOYMENT & EDUCATIONAL COORDINATION



SUPPORT







ASSISTANCE & PLACEMENT

WORK **READINESS TRAINING**

Youth & Family Services is the lead organization for this project. We are working in collaboration with youth-serving organizations across the entire San Diego County. Members of the Housing Our Youth Collaborative include:

- Home Start
- North County Lifeline
- San Diego LGBT Community Center
- San Diego Youth Services
- SBCS
- **Urban Street Angels**





Housing Our Youth is funded by the County of San Diego Health and Human Services Agency.

FOR MORE INFORMATION:

Contact David Baker at (760) 908-9126 Referrals or questions can be sent to hoy@ymcasd.org

OUR MISSION:

The YMCA of San Diego County is dedicated to improving the quality of human life and to helping all people realize their fullest potyptial as children of God through the development of the spirit, mind and body.

The Behavioral Health Workforce Collaborative presents San Diego's Racial Equity Gap

Wednesday, February 10, 2021 | 1:00PM - 3:00 PM

Webex link to be provided upon confirmed registration.

Register by clicking <u>here</u>.

This seminar will address systemic racism and racial equity gaps within San Diego's current labor market. Dr. Enemark will provide an overview of policies made in San Diego that contribute to the challenges experienced in the communities that we serve.



Daniel Enemark, Ph.D

Daniel Enemark, Ph.D., is the Senior Economist with the San Diego Workforce Partnership. He is known for his work in identifying opportunities to improve the efficiency and equity of San Diego's labor market.







VIRTUAL CONFERENCE

CHALLENGING US TO CREATE RACIAL **EQUITY IN EARLY CHILDHOOD**

SAVE THE DATE!

FEB. 25, 2021 | 8:30 AM-4:30 PM \$80 | REGISTRATION OPENS 1/11

For more information, contact Ludy:

lbaclig-passons@sdyouthservices.org

ABOUT THE EVENT

ALL CHILDREN ARE BORN WITH BRILLIANCE,
WHICH ACCORDING TO WEBSTERS
DICTIONARY MEANS: INTENSE BRIGHTNESS OF
LIGHT; VIVIDNESS OF COLOR; AND
EXCEPTIONAL TALENT OR INTELLIGENCE.

Imagine a world where every child's brilliance is acknowledged and nurtured from birth.

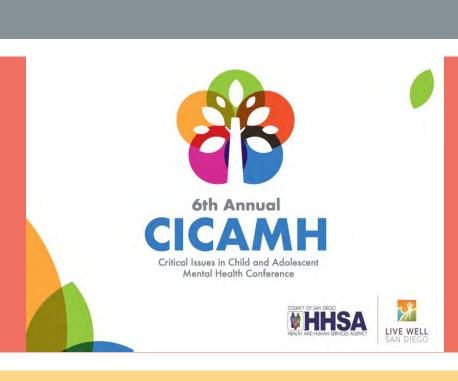
Racial inequity flies in the face of this brilliance and it is our responsibility to rewrite the narrative.

Event features Dr. Jessica Pryce, Assistant Professor at Florida State University and Executive Director of the Florida Institute for Child Welfare, and Akiea Gross, founder of Woke Kindergarten and Early Childhood Education Assembly's 2020 Social Justice Award Recipient.

Also featuring breakout groups from San Diego local experts in Early Childhood, this virtual one-day conference was conceived to raise the collective consciousness around the effects of racial disparities and implicit bias in mental health, social services, developmental services, early childhood education, and medical care.

This is a can't miss event!





Critical Issues in Child and Adolescent Mental Health Conference March 19, 2021

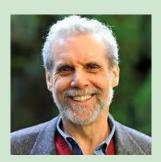
(a virtual conference)

Registration is Now Open!

https://app.ce-go.com/cicamh

Featured Speaker: **Daniel Goleman**

An Internationally known science and psychology journalist, Daniel Goleman's Book entitled **Emotional Intelligence** was on The New York Times best seller for more than a year. The Harvard Business Review called his book "a revolutionary, paradigm-shattering idea". Goleman is a co-founder for Academic, Social, and Emotional Learning (www.casel.org), which originated at the Yale Child Studies Center and is now based at the University of Illinois in Chicago. CASEL's mission centers on bringing evidence-based programs in emotional literacy to schools worldwide



Keynotes:

Sleep in Children & Impact on health with the changed world of COVID-19 -David Gozal, M.D.

Professor, Marie M. and Harry L. Smith Endowed Chair Chairman, Department of Child Health and Pediatrician-in-Chief, University of Missouri School of Medicine Women's and Children's Hospital

Seeing the Forest and the Trees – The Complexities of Diagnosing Autism in the Age of DSM-5 -Fred R Volkmar, M.D.,

Irving B. Harris Professor, Child Study Center, Yale University School of Medicine

Mental Health Practice with Immigrant and Refugee Youth: A Socioecological Framework -B. Heidi Ellis, Ph.D.

Associate Professor of Psychology, Department of Psychiatry and Behavioral Science Harvard University.

Empathy, Understanding, and Anti-Racism

-Jelani Memory

Author and Entrepreneur

Immigration Issues: Impacts of Child and Family Separation in United States

-Shawn S Sidhu, M.D.

Associate Physician in Psychiatry and Training Director, Child and Adolescent Psychiatry Training Program, University of California at San Diego, CA

iGen & Covid

-Jean Twenge, Ph.D.

Author and Professor of Psychology, San Diego State University

FULL AGENDA IS POSTED ON THE WEBSITE!

We are pleased to offer 5 different tracks with a total of 15 breakouts! You can attend any of them!

They will all be recorded and available to you for up to 3 months!

Cost

General: \$50 Students: \$25

Fee includes up to 8 credits!