

**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. **Collaboration of four sectors:** Coordination and shared responsibility between child/youth/family, public agencies, private organizations and education.
2. **Integrated:** Services and supports are coordinated, comprehensive, accessible, and efficient.
3. **Child, Youth, and Family Driven:** Child, youth, and family voice, choice, and lived experience are sought, valued and prioritized in service delivery, program design and policy development.
4. **Individualized:** 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. **Community-based:** Services are accessible to children, youth and families and strengthen their connections to natural supports and local resources.
7. **Outcome driven:** Outcomes are measured and evaluated to monitor progress and to improve services and satisfaction.
8. **Culturally Competent:** Services and supports respect diverse beliefs, identities, cultures, preference, and represent linguistic diversity of those served.
9. **Trauma Informed:** 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. **Persistence:** Goals are achieved through action, coordination and perseverance regardless of challenges and barriers.

May 1, 2018



CHILDREN YOUTH & FAMILIES BEHAVIORAL HEALTH SYSTEM OF CARE(CYFBHSOC) COUNCIL MEMBER ORIENTATION



Introduction to the CYFBHSOC Council and Sub-Committees video

Council Member/Participant Orientation FY 2020-21

Meet the Leaders within the Children Youth and Families Behavioral Health System of Care (CYFBHSOC) Council and several of the Sub-Committee Representatives in this informative video. Including an overview of the Children's System of Care, how the Council was established and the evolution that has built the CYFBHSOC Council into the vibrant care system it is today.

1. Video Introduction – Yael Koenig, Deputy Director, BHS Children, Youth & Families
2. BHS Welcome – Luke Bergmann, BHS Director
3. Cultural Competence Resource Team - Piedad Garcia, Deputy Director, BHS Adult & Older Adult
4. TAY Council – Liz Winchell, Program Manager, Mental Health Systems, Inc, North Inland Teen Recovery Center
5. CYF System of Care History - Rosa Ana Lozada, CEO, Harmonium
6. CSOC Principles – Delrena Swaggerty, Vice President, Mental Health Systems, Inc
7. CYF CADRE –
Julie McPherson, Vice President, Community Research Foundation
Marisa Varond, Associate Executive Director, McAlister Institute
8. Early Childhood Mental Health - Autumn Weidman, Director of Positive Parenting, Jewish Family Service
9. Education Advisory – Heather Nemour, Student Mental Health and Well-Being, San Diego County Office of Education
10. Family and Youth Sector – Valerie Hebert, CYF Liaison Program Manager, NAMI San Diego

To access the video online, please visit: <https://cyfliaison.namisaniego.org/youtube/>

County of San Diego

Children, Youth and Families Behavioral Health System of Care Council (CYFBHSOCC or the Council)

COUNCIL OVERVIEW

History: On December 12, 1995, the County Board of Supervisors supported recommendations to transform the Children's Mental Health System. A Children's Mental Health Services System of Care Steering Committee was established; a Public, Private and Family partnership. In 2004, this committee evolved into the Children's Mental Health Services System of Care Council, a four sector partnership:

Public: This includes, but is not limited, to entities that represent local government: San Diego County Health and Human Services Agency (HHSA): Behavioral Health Services, Behavioral Health Advisory Board, Child Welfare Services, HHSA regions, and Public Health Services. It also includes the County's Public Safety Group - Juvenile Probation Department, Juvenile Court; and First 5 San Diego.

Private: Includes the Children, Youth and Families (CYF) System of Care contracted providers. They are also organized with the Mental Health Contractors Association, Alcohol and Drug Providers Association, Fee- For-Service Network, Healthcare-Pediatricians, Managed Care Health Plans, and the San Diego Regional Center.

Family: Youth and families who have lived experience receiving or who have received services from agencies serving children, and/or parents/caregivers of individuals that are receiving or have received services from agencies serving children. This sector includes the CYF Family Youth Liaison).

Education: Representatives are usually also part of the Public Sector but represent Education. Constituencies represented in the Council are the Special Education Local Plan Area (SELPA), School Districts, Regular Education-Pupil Personnel Services, School Boards, Special Education and the San Diego County Office of Education (SDCOE).

The Council serves in an advisory capacity to the Behavioral Health Services (BHS) Director, Dr. Luke Bergmann, and operates according to its by-laws adopted in March 2006 and last revised August 12, 2019.

Children, Youth and Families (CYF) Staff to the Council: Yael Koenig, Deputy Director, Children, Youth and Families.

CYF Administrative Support: Edith Mohler, Grisel Ortega-Vaca and Darwin Espejo.

Children, Youth and Families Behavioral Health System of Care Council, Vision, Mission, and Principles:

In 2010, the principles were updated and refined to complement the Live Well, San Diego! initiative (Currently, Live Well vision). In 2016, the Trauma Informed principle was added. In 2017, an Ad Hoc Sub-Committee started working on adding the Persistence principle and completed further refinements to align with the BHS Ten Year Road map. The revised document was unveiled on May 14, 2018.

Council Vision:

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County of San Diego

Children, Youth and Families Behavioral Health System of Care Council (CYFBHSOCC or the Council)

COUNCIL OVERVIEW

Membership: Limited to 24 voting members, the Council represents the Family/Youth, Public, Private and Education sectors; members are appointed by the Behavioral Health Director to serve a two year term that may be renewed at his discretion.

Council Members are expected to:

- 1) Attend monthly Council meetings. If unable to attend, the designated alternate is expected to attend.
- 2) Sit at the Council members' table. If a member is absent, the alternate representative will sit at the table.
- 3) Align meeting discussions and presentations to the Children's System of Care (CSOC) Principles and Live Well San Diego vision.
- 4) Inductinate incoming members into the Council.
- 5) Inform constituents of CSOC's activities and provide constituency's input to the Council.

Currently, the Council has 24 active seats:

Behavioral Health Advisory Board (BHAB) (1 seat)	Behavioral Health Services (BHS) (1 seat)
Public Safety Group/Probation (1 seat)	Child Welfare Services (Child Welfare Services) (1 seat)
HHSA Regions (1 seat)	Juvenile Court (1 seat)
Special Education (1 seat)	School Board (1 seat)
First 5 Commission (1 seat)	Mental Health Contractors Association (MHCA) (2 seats)
Public Health (1 seat)	Fee-For-Service Network (1 seat)
Managed Care Health Plan (1 seat)	Healthcare/Pediatrician (1 seat)
Family and Youth Liaison (1 seat)	Special Education Local Plan Areas (SELPA) (1 seat)
Regular Education-Pupil Personnel Services (1 seat)	San Diego Regional Center for Developmentally Disabled (1 seat)
Alcohol and Drug Service Provider Association (ADSPA) (2 seats)	Caregiver of child/youth served by the public health system (1 seat)
Youth served by the public health system-through age 25 (2 seats)	

Current Council Sub-Committees:

Executive	Annual Children's Mental Health Well Being Celebration
CYF Change Agents Developing Recovery Excellence (CADRE)	Early Childhood
Education Advisory	Family and Youth Sector (Youth Family Support Partners)
Mental Health Services Act (MHSA) Ad Hoc	Outcomes
Private Sector	Training
Cultural Competence Resource Team (CCRT)	

Regular Reports to Council:

Quality Improvement (QI) - Management Information Systems (MIS)	Responsive Integrated Health Solutions (RIHS) Training Academy
QI - Performance Improvement Team (PIT)	Transition Age Youth (TAY)
QI - Quality Management (QM)	CADRE
Children, Youth and Families SOC Training Academy	Cultural Competence Resource Team (CCRT)
Mental Health Services Act (MHSA)	Trauma Informed System Integration (TISI)

Council General Meeting Schedule:
Meeting dates and times may be adjusted.
During COVID-19 Pandemic are held virtually

- **When:** Second Monday of each month.
- **Time:** 9:00 to 10:30 A.M.
- **Where:** Scottish Rite Masonic Center - 1895 Camino del Rio South, San Diego CA 92108 (Shell Room)
- To be added to Email distribution list, contact Darwin Espejo at Darwin.Espejo@sdcounty.ca.gov or call 619-584-3024
- Additional Council information including all approved meeting minutes are posted in the BHS website:
https://www.sandiegocounty.gov/content/sdc/hhsa/programs/bhs/mental_health_services_children/CYFBHSOCCouncil.html



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 CYFBHSOC 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

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.

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 Minutes: County Administrative staff record CYFBHSOCC meetings and maintain the Minute Book. Minutes 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.

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.

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

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.

Fiscal Year 2019-20 Goals

- Promote Live Well San Diego Vision.
- Evaluate the System of Care in context of Board Actions and advocate for needed modifications, adjustments, improvements, and new programing.
- Discuss Population Health and Social Determinants of Health in the context of guiding principles for the CYF System of Care.
- Educate about other systems' priorities and look for opportunities to align efforts to best impact positive system changes.
- Advance the Drug Medi-Cal Organized Delivery System (DMC-ODS) – Year Two
 - ✓ Complete re-procurement of enhanced Teen Recovery Centers (TRC's): Seven outpatient Substance Use Disorder (SUD) treatment programs located in all County regions for adolescents ages 12-17 and their families. TRCs are also located within school sites to increase access and coordination with school personnel. TRCs will include an additional component of early intervention services (ASAM .5) and address teen vaping.
 - ✓ Complete re-procurement of the CalWORKs Connection program to provides behavioral health screening, referral, care coordination and connection to Mental Health and Substance Use Disorder (SUD) treatment services for CalWORKs Welfare to Work Participants. Services are designed to support sufficiency goals by connecting participants to behavioral health resources and treatment services.
 - ✓ Complete re-procurement of the Dependency Drug Court and Housing Support Services program to provide onsite behavioral health screening and connection to SUD treatment services to parents who are involved with Dependency Court to promote the safe reunification of families through the connection to services. New emphasis on Housing Support Services as an integrated program component that provides case management and coordination of community resources to families experiencing housing instability to promote stability and the attainment of sufficiency goals.
 - ✓ Deliver the Annual CYF System of Care Conference: Youth Substance Use Disorders (SUD) and Treatment scheduled for May 28, 2020.
- Emphasize the importance of Early Childhood Mental Health as well as prevention and early intervention.
 - ✓ Complete re-procurement of KidSTART to serve young children with complex needs.
 - ✓ Complete re-procurement of ChildNET to support young children in their preschool settings.
 - ✓ Collaborate with Child Welfare and other partners on Child Abuse Prevention efforts.
 - ✓ Implement the Early Childhood - Child and Adolescent Needs and Strengths (EC-CANS) tool effective in Fiscal Year 2019-20
 - ✓ Deliver the 10th Annual Early Childhood Conference: We didn't wait! A Decade of Progress-A Future of Hope, scheduled for September 12-14, 2019.
 - ✓ Contribute to conversations pertaining to prevention and early intervention, infusing subject matter expertise to inform future programing.
- Make necessary system adjustments to align with Continuum of Care Reform (CCR), including Short Term Residential Treatment Programs (STRTP) contracts as well as Therapeutic Foster Care (TFC) services with mental health contractors. Be prepared to add new STRTP contracts as needed.
- Promote the successful implementation of the State mandated Pediatric Symptom Checklist (PSC-35) and the Child and Adolescent Needs and Strengths (CANS) – year two focused on the Fee for Service (FFS) and Treatment and Evaluation Resource Management (TERM) Provider Network. Emphasize utilizing data at the client, program, and system level to inform decision making.
- Increase collaboration with education sector to support students.

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

- ✓ Promote SchoolLink through creating awareness of school-based services and the minimum threshold expectations set for the 2019-20 School Year.
- ✓ Develop Threat Assessment expertise through TERM panel and contracting.
- ✓ Participate in the October 2019 Annual School Summit through the HHSA School Collaborative.
- Identify new and system relevant trainings.
 - ✓ Deliver the 5th Annual Critical Issues in Child and Adolescent Mental Health Conference scheduled for March 12-13, 2020.
 - ✓ Deliver the 6th Annual Children's Mental Health Well-Being Celebration scheduled for May 8, 2020.
 - ✓ Establish micro learnings for Pathways.
- Promote authentic utilization of Family and Youth Partners as service providers; keeping informed about Senate Bill 10: Mental Health Services: Peer Support Specialist Certification progress as well as the DMC-ODS Peer Support Plan intended for implementation in Fiscal Year 2019-20
- Implement housing opportunities through CYF
 - ✓ By embedding Housing Support services to the Dependency Drug Court program to be procured in Fiscal Year 2019-20 for Fiscal Year 2020-21.
 - ✓ By procuring Shelter Beds program for youth ages 12 to 17 for availability in Fiscal Year 2019-20.
 - ✓ Support Monarch School with Permanent Supportive Housing Services through partnership with the San Diego Housing Commission for Fiscal Year 2019-20.
 - ✓ By promoting standardized utilization of Recovery Residence for perinatal population.
- Continue to address the immigration policies impact in the CYF System of Care community.
- Participate in Performance Improvement Project (PIP) to increase family engagement in treatment.

Highlights of Fiscal Year 2018-19 Accomplishments

- Promoted Live Well San Diego Vision.
- Infused Customer Service commitment.
- Advanced the 1115 Drug Medi-Cal Waiver – Organized Service Delivery System implementation – year 1.
 - ✓ Completed procurement of the New Entra Casa, a six-bed perinatal residential program.
- Advanced Continuum of Care Reform (CCR) implementation
 - ✓ Seven San Diego Short Term Residential Treatment Programs (STRTP) were accredited, with four obtaining Mental Health Program approval.
 - ✓ Established new program design and rates, as well as training standards effective Fiscal Year 2019-20.
 - ✓ Updated the revised Pathways to Well-Being and Continuum of Care Reform eLearning.
- Implemented the “Center for Child and Youth Psychiatry” (CCYP) (Cycle 4-INN 22). The contract was awarded to New Alternatives effective July 1, 2018. CCYP provides psychotropic medication services through office-based clinics and tele-psychiatry. In Fiscal Year 2018-19 CCYP served 241 unduplicated children and youth. It has been seen received as a value added to the system of care, allowing more access to psychiatry services.

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

- Implemented the SmartCare: “Behavioral Health Connect” (BHConnect) (Cycle 4-INN 19) effective February 1, 2019. The contract was awarded to Vista Hill Foundation. BHConnect provides telemental health services to children, youth, and adults who are high utilizers of psychiatric emergency services but are not connected to a current mental health provider.
- Established the Accessible Depression and Anxiety Peripartum Treatment (ADAPT) (Cycle 4-INN18). The contract was awarded to Vista Hill effective March 1, 2019. ADAPT is a collaborative treatment model that provides mental health treatment and Peer Partner services to new parents and partners referred through HHSA Nurse Family Partnership (NFP) and Maternal Child Health Home-Visiting program that have or are at risk of developing PeriPartum Mood and Anxiety Disorders (PMADs).
- Partnered with Optum and RIHS for implementation of the CANS and PSC for the FFS and TERM Provider Network effective July 1, 2019.
- Implemented CANS Early Childhood tool for Mental Health providers serving children ages 0-5 effective July 1, 2019.
- Revised the CANS Family Letter and implemented CANS Sharing Confirmation page in Cerner Community Behavioral Health (CCBH) Client Plan.
- Participated in the October 12, 2018 Annual School Summit.
- Delivered new and system relevant trainings:
 - ✓ Educating Children and Youth Experiencing Homelessness
 - ✓ Family Compassion and the Lesbian, Gay, Bisexual, Transgender, Questioning, Intersexual and Asexual (LGBTQIA) Community
 - ✓ Sexual Health Conversations with Youth and Families
 - ✓ Partnering with Justice Involved Families
 - ✓ Intesectionality of Identities.
- Updated the revised Pathways to Well-Being and Continuum of Care Reform eLearning.
- Annual CYF System of Care Academy conference focused on School Safety: Envisioning Safer Schools (May 30, 2019).
- Updated the CYF Council By-Laws to provide access to trainings delivered by the BHS training contractor to CYF Council members and alternates (December 10, 2018).
- In coordination with HHSA departments, First 5 San Diego, San Diego Academy of Child and Adolescent Psychiatry (SDACAP), American Academy of Pediatrics, CYF providers, and other local organizations, CYF hosted the 9th “We Can’t Wait” Annual Early Childhood Conference-September 2018. The 2018 theme was: Embracing Our Diversity: Intervening Early in Every Community.
- CYF in partnership with the San Diego Academy of Child and Adolescent Psychiatry (SDACAP), the San Diego Psychiatric Society, the California Association of Marriage and Family Therapists-San Diego Chapter (CAMFT), and the San Diego Psychological Association held the 4th Annual Critical Issues in Child and Adolescent Mental Health Conference: Managing Change in a Changing World on March 21-22, 2019.
- Promoted authentic utilization of Family and Youth Partners as service providers by active participation in the BHS Support Partners Advocacy meeting.
- Delivered the 5th Annual Children’s Mental Health Well-Being Celebration on May 3, 2019.
- Supported the promotion of the youth developed Trauma Informed Code of Conduct through the Clinton Health Matters Initiative (CHMI).

CHILDREN, YOUTH AND FAMILIES BEHAVIORAL HEALTH SYSTEM OF CARE COUNCIL MEMBERSHIP ROSTER FISCAL YEAR 2020-21			
CONSTITUENCY		MEMBER	ALTERNATE
1	Behavioral Health Advisory Board (BHAB)	Rebecca Hernandez	Bill Stewart
2	Behavioral Health Services (BHS)	Dr. Laura Vleugels	Dr. Charmi Patel-Rao
3	Public Safety Group/ Probation	VACANT	Chrystal Sweet
4	Child Welfare Services (CWS)	Steven Wells	Norma Rincon
5	HHSA Regions	Dori Gilbert	Jennifer Sovay
6	Public Health	Dr. Thomas R. Coleman	Adrienne Yancey
7	Juvenile Court	H. Judge Ana Espana	Beth Brown
8	First 5 Commission	Alethea Arguilez	Sharon Qin
9	Special Education Local Plan Area (SELPA)	Cara Schukoske	Jamie Tate - Symons
10	Regular Education Pupil Personnel Services	Violeta Mora	Heather Nemour
11	School Board	Barbara Ryan	VACANT
12	Special Education	Yuka Sakamoto	Aidee Angulo
13	San Diego Regional Center (SDRC) for Developmentally Disabled	Peggie Webb	Therese Davis
14	Alcohol and Drug Service Provider Association (ADSPA)	Angela Rowe	John Laidlaw
15	Alcohol and Drug Service Provider Association (ADSPA)	Marisa Varond	VACANT
16	Mental Health Contractors Association	Julie McPherson	Minola Clark Manson
17	Mental Health Contractors Association	Michelle Ly	Michelle Hogan
18	Fee- For-Service (FFS) Network	Dr. Sherry Casper	VACANT
19	Managed Care Health Plan	George Scolari	Kathleen Lang
20	Healthcare/ Pediatrician	Dr. Pradeep Gidwani	VACANT
21	Family and Youth Liaison	Renee Cookson	Valerie Hebert
22	Caregiver of child/youth served by the Public Health System	Debbie Dennison	Sue McCoy

23	Youth served by the public health system (up to age 26)	Christine Frey	Emma Eldredge
24	Youth Served by the Public Health System (up to age 26)	Micaela Cunningham	VACANT
-	Executive Committee	Minola Clark Manson/ Valerie Hebert	
-	Cultural Competence Resource Team Committee	Rosa Ana Lozada	
-	CYF CADRE	Julie McPherson/ Marisa Varond	
-	Early Childhood Committee	Aisha Pope/ Ginger Bial	
-	Education Committee	Heather Nemour/ Violeta Mora	
-	Family and Youth as Partners	Renee Cookson/ Valerie Hebert	
-	Outcomes Committee	Emily Trask/ Eileen Quinn-O'Malley	
-	Training Committee	Rose Woods	

County of San Diego
Children, Youth and Families Behavioral Health System of Care Council
(CYFBHSOCC) Fiscal Year 2020-21 Sub-Committees/Groups

	SUB-COMMITTEE	MEETING DATE/LOCATION/TIME	LEAD (Co-Lead)
1	Outcomes	Meets the 1 st Tuesday every other month-La Vista Room From 11:30 A.M. - 1:00 P.M. (Virtual Meetings as of June 2020)	Emily Trask and 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
2	Early Childhood	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)	Aisha Pope and Ginger Bial APope@centerforchildren.org VBial@rchsd.org CYF Representative: Shannon.Jackson@sdcounty.ca.gov
3	Education Advisory Ad Hoc	Meets as needed.	Heather Nemour Heather.Nemour@sdcoe.net CYF Representative: Frances.Cooper@sdcounty.ca.gov
4	Transition Age Youth (TAY) Council	Meets Quarterly the 4 th 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)	Alisha Eftekhari Alicia.Eftekhari@sdcounty.ca.gov CYF Representative: Michael.Miller@sdcounty.ca.gov
5	CYF Change Agents Developing Recovery Excellence (CADRE)	Meets Quarterly-2 nd Thursday of the month - 5095 Murphy Canyon Road, Suite 320, San Diego, CA 92123 From 1:30 - 3:00 P.M. (Virtual Meetings as of May 2020)	Julie McPherson and Marissa Varond JMcPherson@comresearch.com Marisa.Varond@mcasterinc.com CYF Representative: Shannon.Jackson@sdcounty.ca.gov
6	Cultural Competency Resource Team (CCRT)	Meets the 1 st Friday of the month- 6367 Alvarado Court Suite 105, San Diego CA 92120 From 10:00 to 11:30 A.M. (Virtual Meetings as of May 2020)	Piedad Garcia and Charity White-Voth Piedad.Garcia@sdcounty.ca.gov Charity.White-Voth@sdcounty.ca.gov Private Sector Representative: RLozada@harmoniumsd.org CYF Representative: Edith.Mohler@sdcounty.ca.gov

County of San Diego
Children, Youth and Families Behavioral Health System of Care Council
(CYFBHSOCC) Fiscal Year 2020-21 Sub-Committees/Groups

	SUB-COMMITTEE	MEETING DATE/LOCATION/TIME	LEAD (Co-Lead)
7	Family and Youth Sector	<p>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</p> <p>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</p> <p>Youth, Family Support Partners Subcommittee Meets every 3rd Thursday of the month from 1:30 - 3:00 P.M. Shift to (Virtual meetings as of March 2020)</p>	<p>Renee Cookson, Suzette Southfox and Valerie Hebert ReneeCookson@namisd.org ValerieHebert@namisd.org SuzetteSouthfox@namisd.org</p> <p>CYF Rep: Edith.Mohler@sdcounty.ca.gov</p>
8	Private Sector	Meets as an Ad Hoc group when projects/initiatives arise.	<p>Minola Clark Manson Mcmanson@sdsu.edu CYF Rep: CYF COR's by Invitation</p>
9	Executive	Meets the 4 th Monday of the month- Conference Call from 10:00 - 10:30 A.M.	<p>Minola Clark Manson and Valerie Hebert ValerieHebert@namisd.org Mcmanson@sdsu.edu</p> <p>CYF Lead: Yael Koenig Grisel.Ortega@sdcounty.ca.gov</p>
10	Children's Mental Health Well Being Celebration	Alternate Youth Mental Health Well Being Virtual Gathering held on May 7, 2020 from 4:30 – 5:30 P.M. Link to event video: https://bit.ly/NAMISD-FB	<p>Renee Cookson, Suzette Southfox and Valerie Hebert ReneeCookson@namisd.org ValerieHebert@namisd.org SuzetteSouthfox@namisd.org</p> <p>CYF Representative: Edith.Mohler@sdcounty.ca.gov</p>

County Of San Diego
Children, Youth and Families Behavioral Health System of Care Council
Sub-Committees Point in Time Sector Representation Fiscal Year 2020-21
July 7, 2020

The Children, Youth and Families Behavioral Health System of Care Council (CYFBHSOCC or the Council), is a four-sector partnership which includes representatives of the public, private, family/youth, and education sectors. They may represent more than one sector.

Public: This includes, but is not limited, to entities that represent local government: San Diego County Health and Human Services Agency (HHSA): Behavioral Health Services (BHS), Behavioral Health Advisory Board (BHAB), Child Welfare Services (CWS), HHSA regions, and Public Health Services. It also includes the County's Public Safety Group- Juvenile Probation Department, Juvenile Court; First 5 San Diego.

Private: Includes the Children, Youth and Families (CYF) System of Care contracted providers. They are also organized with the Mental Health Contractors Association, Alcohol and Drug Provider Association, Fee-For-Service Network, Healthcare/Pediatricians, Managed Care Health Plans and the San Diego Regional Center.

Family: Youth and families who have lived experience receiving or who have received services from agencies serving children, and/or parents/caregivers of individuals that are receiving or have received services from agencies serving children. This sector includes the CYF Liaison.

Education: Representatives are usually also part of the Public Sector but represent Education. Constituencies represented in the Council are the Special Education Local Plan Area (SELPA), School Districts, Regular Education-Pupil Personnel Services, School Boards, Special Education, and the San Diego County Office of Education (SDCOE).

EXECUTIVE SUBCOMMITTEE | Co-Chairs Minola Clark Manson and Valerie Hebert

PRIVATE	PUBLIC	EDUCATION	FAMILY/YOUTH
Ginger Bial	Yael Koenig	Violeta Mora	Renee Cookson
Minola Clark Manson	Violeta Mora	Heather Nemour	Valerie Hebert
Julie McPherson	Heather Nemour		Suzette Southfox
Rosa Ana Lozada	Darwin Espejo		
Aisha Pope	Edith Mohler		
Emily Trask	Grisel Ortega		
Marisa Varond	Eileen Quinn-O'Malley		
Autumn Weidman			
Rose Woods			

OUTCOMES SUBCOMMITTEE | Co-Chairs Emily Trask and Eileen Quinn-O'Malley

PRIVATE	PUBLIC	EDUCATION	FAMILY/YOUTH
Antonia Nunez	Yael Koenig	Yuka Sakamoto	Valerie Hebert
Sarah Walsh	Eileen Quinn-O'Malley	Heather Nemour	
Brent Crandal	Amanda Lance-Sexton		
Julie McPherson	Ezra Ramirez		
Shellane Villarin	Babi Winegarden		
Emily Trask	Liz Miles		
Amy Chadwick	Shelly Paule		
Gwen Shelton			
Michelle Ly			
Shonta Battle			

CYF CADRE SUBCOMMITTEE | Co-Chairs: Julie McPherson and Marisa Varond

PRIVATE	PRIVATE	PRIVATE	PUBLIC
Dori Gilbert	Isela Forward	Kelly McCullough	Shannon Jackson
Michelle Ly	Jennifer Galvis	Mariam Zappier	Wendy Maramba
Carolyn Argote-Bertely	Elizabeth Garcia	George Montoya	Eileen Quinn-O'Malley
Cynthia Ayon	Janeth Garcia	Christina Powell	
Zugiel Torres	Roberto Suarez	Mary Puntenney	
Edgar Capacio	Cosme Gomez	Blanca Reyes	
Michael Cordova	Hope Graven	Julia Ris	EDUCATION
Claudia Covarrubias	Terri Hagmann	Laura Rogers	
Adrian Del Rio	Pamela Jacobs	Jacqueline Rosas	
Kristin Dillinger	Cynthia Jauregui	Karlo Roshnaye	
Yen Du	Deanna Jimenez	Ervey Salinas	
Phil Emhrein	Jennifer Johnson	Rhaelynn Scherr	FAMILY/YOUTH
Trena Ensign	Monet Johnson	Bill Simpson	
Veronica Ephraim	Jan Kren	Stephanie Smith	
Sarah Welsh	John Laidlaw	Alejandra Sosa	
Markov Manalo	Arlyn Leal-Olmos	Michael Miller	
Vanessa Martinez	Mareeh Claire Marquez		

EARLY CHILDHOOD SUBCOMMITTEE | Co-Chairs: Aisha Pope and Ginger Bial

PRIVATE	PRIVATE	PRIVATE	EDUCATION
Aisha Pope	Nubia Soto	Nikoo Sadatrafi	Evette Callahan
Autumn Wiedman	Terri Cook-Clark	Edgar Siera	Lisa Linder
Ginger Bial	Bobbi Smylie		Linda Ketterer
Dr. Sherry Casper	Ashley Rambeau	PUBLIC	Rose Woods
Stacey Musso	Stephanie Smith	Sharon Qin	Saribe Perez
Stacy Annand	Carole Steel	Dr. Charmi Patel-Rao	Fernanda Garcia
Kim Flowers	Desiree Shapiro	Ana Mendez	
Lisa Linder	Valerie Centeno	Nohemy Terrazas	
Dr. Pradeep Gidwani	Izzy Shine	Shelly Paule	FAMILY/YOUTH
Erin Taylor	Jennifer Kennedy	Shannon Jackson	Valerie Hebert
Jeanne Gordon	Angela Rowe	Dulce Cahue-Aguilar	Emma Eldredge
Christine Cole	Amy Zeitz	Donna Erfe-Beltran	
Sarah Franco	Rosa Ana Lozada		

EDUCATION SUBCOMMITTEE | Chair: Heather Nemour

PRIVATE	PUBLIC	EDUCATION	FAMILY/YOUTH
Pam Hansen	Heather Nemour	Aidee Angulo	
	Cara Schukoske	Cara Schukoske	
	Frances Cooper	Heather Nemour	
	Violeta Mora	Violeta Mora	
	Yuka Sakamoto	Yuka Sakamoto	
	Aidee Angulo	Stacey Musso	
		Barbara Ryan	

FAMILY & YOUTH AS PARTNERS SUBCOMMITTEE | Co-Chairs: Renee Cookson and Edith Mohler

PRIVATE	PUBLIC	EDUCATION	FAMILY/YOUTH
Renee Cookson	Edith Mohler	Heather Nemour	Renee Cookson
Nikoo Sadatrafiei	Rebecca Raymond	Sonia Lira	Valerie Hebert
Carrie Kintz	Heather Nemour	Rose Woods	Debbie Dennison
Susan McCoy	Janie Regier		Susan McCoy
Celeste Hunter	Darwin Espejo		Darron Jones
Rosa Ana Lozada	Dorothy Thrush		Micaela Cunningham
Valerie Hebert			Christine Frey
Darron Jones			Sten Walker
James Ruf			Suzette Southfox
Ambar Lopez-Barnes			
Rose Woods			
Linda Ketterer			
Lucilla "Lucy" Jasso			

CULTURAL COMPETENCE RESOURCE TEAM (CCRT) | Co-Chairs: Piedad Garcia and Charity White-Voth

PRIVATE	PUBLIC	EDUCATION	FAMILY/YOUTH
Shadi Haddad	Piedad Garcia	Juan Camarena	Mercedes Webber
Sahra Abdi	Edith Mohler	Minola Clark Manson	Celeste Hunter
Mohamed Abdi	Charity White-Voth	Rick Heller	Ingrid Alvarez-Ron
Michelle Ly	Nilanie Ramos	Shiva Jaimes	Luz Pino
Mercedes Webber	Elizabeth Dauz	Elisa Barnett	
Kat Katsanis-Semel	Ann Vilmenay	Nicole LeFol	
Rebecca Paida	Liz Miles		
Winona Garcia	Nancy Rodriguez		
Shadi Haddad	Kimberly Pettiford		
Rosa Ana Lozada	Jennifer Santos		
Jessica Young	Andrea Duron		
Minola Clark Manson	Frances Cooper		
Karen Harris	Luisa Dones		
Yen Du	Karen Harris		
Awichu Akwanya	Ezra Ramirez		
	Gebaynesh Gashaw-Gant		



**Fiscal Year 2020-21
CHILDREN, YOUTH AND FAMILIES BEHAVIORAL HEALTH SYSTEM OF CARE COUNCIL
(CYFBHSOCC)/ REPORTING SCHEDULE**

2nd Monday of each month from 9:00-10:30 A.M.
Scottish Rite Center– 1895 Camino Del Rio South, San Diego, CA 92108- Shell Room
(Currently meeting virtually)

July 13, 2020

CYF Council Member Orientation
(Virtual)

August 10, 2020

**End of Fiscal Year Accomplishments and New Fiscal Year Goals
STRATEGIC PLANNING MEETING**

September 14, 2020

**End of Fiscal Year Accomplishments and New Fiscal Year Goals
STRATEGIC PLANNING MEETING**

October 12, 2020

COMBINED CYF/TAY/AOA MEETING- Hosted by AOA

November 9, 2020

December 14, 2020 - DARK

January 11, 2021

Meeting Focus: Bi-Annual Sub-Committee Reports
Early Childhood/ Education Advisory/ TAY Council

February 8, 2021

Meeting Focus: Bi-Annual Sub-Committee Reports
CADRE/ Family and Youth/ CCRT

March 8, 2021

April 12, 2021

COMBINED CYF/TAY/AOA MEETING- Hosted by CYF

May 10, 2021

June 14, 2021

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

MEETING MINUTES

March 9, 2020 – 9:00-10:30 A.M.

Scottish Rite – Shell Room -1895 Camino del Rio South, San Diego CA 92108

+ = Member in Attendance O = Absent E = Excused

CONSTITUENCY		MEMBER	STATUS	ALTERNATE	STATUS
PUBLIC SECTOR					
1	Behavioral Health Advisory Board (BHAB)	Rebecca Hernandez	O	Bill Stewart	+
2	Behavioral Health Services (BHS)	Dr. Laura Vleugels	+	VACANT	
3	Public Safety Group/ Probation	Dr. Geoff R. Twitchell	O	Chrystal Sweet	O
4	Child Welfare Services (CWS)	Steve Wells	+	Norma Rincon	O
5	HHSA Regions	Dori Gilbert	+	Jennifer Sovay	O
6	Public Health	Dr. Thomas R. Coleman	+	Adrienne Yancey	O
7	Juvenile Court	H. Ana Espana	O	Beth Brown	+
8	First 5 Commission	Alethea Arguilez	O	Dulce Cahue-Aguilar	+
EDUCATION SECTOR					
9	Special Education Local Plan Area (SELPA)	Cara Schukoske	+	Jamie Tate - Symons	O
10	Regular Education Pupil Personnel Services	Violeta Mora	+	Charisma De Los Reyes on behalf of Heather Nemour	+
11	School Board	Barbara Ryan	+	VACANT	
12	Special Education	Yuka Sakamoto	+	Aidee Angulo	O
PRIVATE SECTOR					
13	San Diego Regional Center (SDRC) for Developmentally Disabled	Peggie Webb	+	Therese Davis	+
14	Alcohol and Drug Service Provider Association (ADSPA)	Angela Rowe	O	John Laidlaw	+
15	Alcohol and Drug Service Provider Association (ADSPA)	Marisa Varond	+	VACANT	
16	Mental Health Contractors Association	Julie McPherson	E	Minola Clark Manson	+
17	Mental Health Contractors Association (MHCA)	Michelle Ly	+	Michelle Hogan	O
18	Fee- For-Service (FFS) Network	Dr. Sherry Casper	+	VACANT	
19	Managed Care Health Plan	George Scolari	+	Kathleen Lang	+
20	Healthcare/ Pediatrician	Dr. Pradeep Gidwani	O	VACANT	

FAMILY AND YOUTH SECTOR					
21	Family and Youth Liaison	Renee Cookson	O	Valerie Hebert	+
22	Caregiver of child/youth served by the Public Health System	Debbie Dennison	+	Sue McCoy	O
23	Youth served by the Public Health System (up to age 26)	Micaela Cunningham	+	Emma Eldredge	O
24	Youth served by the public health system (up to age 26)	VACANT		Christine Frey	+
SUB-COMMITTEES (Non-voting members unless a member of the Council)					
-	Executive Sub-Committee	Dori Gilbert/ Minola Clark Manson	+/+		
-	Cultural Competence Resource Team (CCRT)	Rosa Ana Lozada	+		
-	CYF CADRE	Julie McPherson/ Marisa Varond	E/+		
-	Early Childhood Sub-Committee	Aisha Pope/ Autumn Weidman	+/+		
-	Education Sub-Committee	Heather Nemour/Violeta Mora	+/+		
-	Family and Youth as Partners Sub-Committee	Renee Cookson/ Valerie Hebert	O/+		
-	Outcomes Sub-Committee	Emily Trask/Eileen Quinn-O'Malley	E/+		
-	Training Sub-Committee	Rose Woods	E		

CYF Council Staff: Yael Koenig, Edith Mohler, and Darwin Espejo

I. Welcome and Introductions (Dori Gilbert)

- New meeting attendees
 Sara Webster-Parent
 Meghann O'Connor–San Diego County Office of Education
 Laura McClarin-Fred Finch
 Meghan Lukasik-Rady Children's Hospital
 Leon Altamirano-North County Health Services
 Liza Bolanos-Sweet Water Unified School District
 Kristin Gist-Rady Children's Hospital
 Lisa Sawin-Juvenile Probation
 Charisma De Los Reyes-San Diego County Office of Education
 Frank Congine-CYF Behavioral Program Coordinator
 Alyssa Label-Vista Hill Foundation.

II. Approval of Minutes (Minola Clark Manson)

- February 10, 2020 meeting minutes-Approved
- Review of action items from the February 10, 2020 meeting. See meeting minutes.

III. Business Items (Yael Koenig)

- Coronavirus Disease 2019 (COVID-19) Update-(Tom Coleman, MD)-Handout
 ✓ The most up to date information regarding COVID-19 can be found at: www.coronavirus-sd.com

- ✓ Updated information is posted daily by 4:00 P.M.
- ✓ **COVID-19 in San Diego as of March 6, 2020**
 - On February 14, 2020, the San Diego County Public Health Officer issued a Declaration of Local Health Emergency. This was an administration action to facilitate the response to COVID-19 for coordination of services and acquisition of needed materials/tools such as N95 masks, ventilators, etc.
 - No person to person COVID-19 spread has occurred in San Diego County
 - Under Federal oversight/quarantine, two airplanes from China arrived at the Marine Corp Air Station Miramar with 232 passengers. Two of the passengers tested positive for COVID-19. These two cases were resolved
- ✓ **Quarantine vs Isolation**
 - Quarantine: When a person has been potentially exposed to the virus but presents no symptoms and is separated from the rest of the population
 - Isolation: Individual presenting virus symptoms and separated from the rest of the population
 - In San Diego, as of March 6, 2020, 447 individuals have been monitored for potential COVID-19. Out of the 447 monitored individuals, 361 have completed monitoring, 82 continue to be monitored and 4 individuals are under investigation
- ✓ **Current guidance to prevent spread of the Coronavirus**
 - COVID-19 is droplet spread
 - Unless a person has symptoms, there is no need to wear face coverings to prevent spread
 - Do not go to work if sick
 - Wash hands for at least 20 seconds with soap and water or use hand sanitizer with at least 60% alcohol
 - Avoid touching face, especially mouth, nose and mouth
 - Cover cough and nose with a tissue if possible, and deposit the used tissue in the trash
 - Avoid contact with people who are sick
 - Clean and disinfect frequently touched areas and surfaces
- ✓ **COVID-19 Testing**
 - Centers for Disease Control and Prevention (CDC) and California Department of Public Health, and County Public Health Services follow the case definition for testing. Initially, COVID-19 testing was authorized for individuals that had travel exposure. The definition has been broadened to individuals with serious respiratory infection that requires hospitalization. All testing is currently managed through the Public Health laboratory
 - COVID-19 testing will be available through the commercial setting
- ✓ **California Health Alert Network (CAHAN)**
 - Public Health Services uses CAHAN San Diego to send priority health communications to health care and public safety professionals in San Diego county. Topics include communicable diseases outbreaks, emerging health issues, requests for heightened surveillance related to communicable diseases, recommendations on communicable disease identification, prevention, infection control, specimen submission and laboratory testing, and emergency preparedness information.
- ✓ **Preparation for a pandemic**
 - Three elements need to be present for a pandemic
 - Ready person to person spread
 - Virus widely circulating throughout a large geographic area
 - The virus causes significant disease including death
 - There is currently no person to person spread in San Diego county, but it is expected
 - All sectors need to be cognizant of preparing for quarantine/isolation and take measures to prevent the spread of COVID-19
 - Families need to prepare with food, including food for pets, and medication for at least two weeks
 - CDC has provided interim guidance for schools and businesses. Some of the guidance/recommendations may include telework
 - Providers servicing the homeless population need to prepare to protect this population
- ✓ **Summary of Questions and Answers**
 - CDC guidance/information is updated often
 - As of now, there is no data/information available to determine if COVID-19 is seasonal
 - The Flu shot will not help against COVID-19, but it is recommended as the flu is still circulating in the community
 - Clinical trials for viral medication to treat COVID-10 are currently being conducted
 - Businesses need to get ready for potential changes to business operations

- From the public health perspective, if a person is sick, the recommendation is to stay home to avoid exposing others to become sick
- The CDC has advised that COVID19 is affecting more the older population and persons with chronic respiratory and heart medical conditions. Nevertheless, the guidance is not static
- Currently, it is believed that incubation period of Coronavirus is of 2 to 14 days
- County providers/contractors will be updated and oriented through conversation and information updates regarding their services/operations during this health emergency.
- December 14, 2020 Meeting is cancelled-See page 19 of meeting packet
- Recognition to Travis Webster (Yael Koenig and Valerie Hebert)
 - ✓ Travis Webster was recognized with a certificate and letter of appreciation for his contributions to the CYF Council representing Youth served by the public health system
- Update on the Strong Families, Thriving Communities Initiative Board of Supervisors (BOS) Letter-Agenda Item 07-February 11, 2020-See pages 21-28 of the meeting packet
- Local Oversight of Medication Assisted Treatment (MAT) Programs BOS Letter-Agenda Item 7-February 25, 2020-See pages 29-33 of the meeting packet
- Authorization to submit an application for the Mental Health Student Services Act Grant, Approval to receive awarded funds and authorization to apply for future funding opportunities to support Behavioral Health Services BOS Letter-Agenda Item 13-February 25, 2020-See pages 35-38 of the meeting packet
- Adopting Best Practices to Promote Recovery and Protect Public Health BOS Letter-Agenda Item 03, March 10, 2020-See pages 39-46 of the meeting packet
- Update on Advancing the Behavioral Health Continuum of Care Through Regional Collaboration and Innovation-BOS Letter-Agenda Item 04-March 10, 2020-See pages 47-50 of the meeting packet.

IV. Mental Health Services Act (MHSA) Updates (Kimberly Pettiford)

- The Community Engagement forums report is currently being compiled.

V. Sector “Hot Topics” (Leon Altamirano, PsyD, Meghan Lukasik, PhD, and Jeffrey Rowe, MD)-Handouts

- Adverse Childhood Experiences (ACE) screening in primary care (Leon Altamirano, PsyD, Director of Integrated Behavioral Health-NCHS)
 - ✓ Context
 - The CDC-Kaiser Permanent (Dr. Vincent Felitti) ACE Study: <https://www.cdc.gov/violenceprevention/childabuseandneglect/acestudy/about.html> and ACE San Diego County tribal data studied by Dr. Altamirano, demonstrate that cumulative adversity, especially when experienced during childhood development, seems to cause harmful consequences. In alignment with the conceptual framework (Impact of ACEs and toxic stress) of the CDC-Kaiser Permanente ACE Study, Dr. Altamirano found the following within the Tribal communities he worked with:
 - General Embodiment/Historical trauma: Nine generations had shorter life expectancy than average population
 - Social Conditions/Local context: Stigma of mental health, culture of trauma
 - Adverse Childhood experiences “will change trajectory of development”
 - Disrupted neurodevelopment: Stress affects brain development and brain function
 - Social, emotional, and cognitive impairment
 - Adoption of health risk behaviors: “Traumatized people seek relief” through behaviors like smoking, excessive alcohol consumption, drug use, eating disorders, etc.
 - Disease disability and social problems: Violence
 - Early Death: Ten top leading causes of death (heart disease, cancer, liver disease, suicide, kidney disease)
 - The CDC-Kaiser Permanente study and the data collected/observations within the San Diego county tribal communities by Dr. Altamirano and his team, led to the development of a primary care model that seeks wellness not only for current, but for future generations. One of the strategies has been through trauma informed care staff training, (650 of about 900) and ACEs screening. ACEs screening helps to determine the increased health risks due to trauma
 - ✓ ACEs Aware Initiative
 - Effective January 1, 2020, Medi-Cal physicians can be paid for ACEs screening for Medi-Cal patients
 - Screening evaluates children and adults for a history of exposure to adversity during the first 18 years of life:

- Abuse: physical, emotional, and sexual abuse
 - Neglect: physical and emotional neglect
 - Household dysfunction
- Pediatric ACEs and Related Life-events Screener (PEARLS)
 - The tool was designed to identify exposure to childhood adversity and events that may increase a child's risk for toxic stress and negative health outcomes. It includes two sections:
 - Original ACEs
 - Other adversities that are risk factors for toxic stress or negative health outcomes
 - Children under 18 can be screened annually
 - At this point, there is no clear information about screening limited to primary care
- ✓ Benefits of ACEs screening
 - Trauma is a silent pandemic, but early identification of trauma for early treatment is a priority; screening allows to identify health risks due to a toxic stress response
 - Screening is a tool that helps identify appropriate treatment
- KidSTART (Screening, Triage, Assessment, Referral, Treatment)-Assessing and Treating the Impact of Adverse Childhood Experiences (Meghan Lukasik, PhD)
 - ✓ Serves children 0 to 5 with complex needs; medical, developmental, mental health needs and their families. KidSTART uses a transdisciplinary approach assessment and treatment
 - ✓ Screening
 - Formalized: For example, through the Ages and Stages Questionnaire
 - Informal: For example, through a therapist who works with a child, or a parent who shares concerns about the child
 - ✓ Triage
 - Global psychological assessments completed at KidSTART, school districts, San Diego Regional Center, and California Early Start
 - ✓ Assessment
 - Assessments for further needs, such as speech needs, trauma, etc.
 - ✓ Referral
 - Can be completed within KidSTART and in partnership community providers
 - ✓ Treatment
 - The treatment team is trauma informed care trained and includes a care coordinator to help the family "navigate the system". Family is a big part of the child's treatment team
 - ✓ KidSTART has been screening for ACEs since 2012 to assess and to change the "trajectory of the child's life" The ACE tool was adapted to be used with the parents/caregivers on behalf of the children, but will shift to PEARLS. The use of ACE survey at KidSTART has:
 - Addressed conflicting diagnostics
 - Shifted to treating based on experiences that will later show themselves through behavior
 - Supported increased understanding of parents' needs relative to their own engagement
- Jeffrey Rowe, MD-Discussion/Questions and answers
 - ✓ The California ACEs Initiative also includes training to certify providers to receive Medi-Cal payment for ACEs screening.
 - ✓ The ACEs responses for children in the CWS system tend to differ depending on the parents groups: foster parents, biological parent, relative caregivers, etc. For example: relative caregivers tend to report more ACEs information than the biological parents
 - ✓ What happens when there is no care coordination and different providers screen for ACEs to the same individual?
 - In many cases the reporting of ACEs does not occur on the first screening; normalizing the screening by multiple screenings helps the community understand the importance of ACEs screening. It is possible that multiple ACEs conversations with the different services providers, at different contexts (medical, mental health, CWS, etc.), help individuals and families feel more comfortable talking about ACEs
 - It is important to learn about the ACEs screening experience from the family/individual receiving the screening perspective, including how is the ACEs screening affecting the family
 - ✓ What about protective factors/guidance on for family?
 - Guidance is being developed regarding protective factors, resilience and resources for families. More information can be found at: <https://www.acesaware.org/>
 - The strengths in the ACEs increase resilience

- ✓ The incorporation of the Child and Adolescent Needs and Strengths (CANS) into the Family Team meeting provides the foundation to start a conversation with youth, family, and services providers about strengths, supports, resilience factors, and services. It will allow for better care coordination.
- ✓ Cultural and ethnic background need to be considered when screening for ACEs
- ✓ Waiting for treatment after ACEs screening may have a negative impact on the family/individual. Need to be able to support individual family during the continuity of care
 - CWS makes every effort to provide “just in time” treatment for the children and youth they serve
 - Individuals and families using Community Health Clinics as their primary health care home, may be able to access primary care/pediatrician services on the same day and specialized behavioral health services within a week or two
- ✓ In alignment with Trauma Informed Care, need to ensure that providers screening for ACEs are also being supported with reflective strategies/supervision
- ✓ Schools need to be included in the ACEs conversation to ensure consistency for screening and partnership with other sectors. The Santana High School Shooting of 2001 was mentioned as an example to support this need as current students and their parents seem to be affected by the shooting of 2001
- ✓ ACEs screening in the education sector needs to be expanded beyond Educationally Related Mental Health Services (ERMHS)
- ✓ Fee-For-Service providers need to screen for ACEs too
- ✓ At this time, the County is not required to screen for ACEs, but uses the CANS which includes a trauma module with questions linked with ACEs. Additionally, CYF programs can choose to use the ACEs screening
- ✓ A very intentional and careful process of readiness should take place if ACEs screening is incorporated into the CYF System of Care practice protocols

VI. Announcements (Minola Clark Manson)-Handouts

- Critical Issues in Child and Adolescent Mental Health Conference-March 12-13, 2020. Additional information is available at <https://CICAMH.COM>
- Brain XP Day 2020: Teens Helping Teens- Scheduled for April 4, 2020
- Save the Date: April 13, 2020 Combined Councils from 10:00 to 11:30 A.M. at the Scottish Rite Center
- Save the Date: May 8, 2020: Youth Mental Health Well Being Celebration.

VII. Director's Report

CYF Deputy Director provided system updates within the Business Items meeting agenda section.

VIII.Action Items

Action Item(s)	Action By	Action Due
1. Provide update on the March 17, 2020 Juvenile Health and Justice Symposium	• BHS Staff participants	• May 11, 2020 CYF Council meeting
2. Send the COVID-19 link to the CYF Council electronic distribution lists	• CYF Council staff	• Completed March 11,2020 via e-mail: http://www.coronavirus-sd.com/
3. Send additional documents related to the ACEs presentations: <ul style="list-style-type: none"> ✓ Presentation by Dr. Altamirano (separate handout provided at the meeting) ✓ Presentation by Dr. Lukasik, this presentation is included in the meeting packet in a small version in pages 51-52 ✓ The Stress and Early Brain Growth is a “Talking points” tool the KidSTART program staff uses with families after the ACEs survey is administered. The “Stress and Early Brain Growth”- handout is also included in pages 53-54 of the March 9, 2020 meeting packet. 	• CYF Council staff	• Completed March 11, 2020 via e-mail.

Next CYF Council Meeting (Combined Councils): April 13, 2020
Scottish Rite Center, Shell Room
10:00 to 11:30 A.M.

Sub-Committees/Sectors/Workgroups Meetings Information:

Behavioral Health Advisory Board (BHAB) meeting: Meets the first Thursday of the month, currently at the County Operations Center's (COC) Hearing room, located at 5520 Overland Ave, San Diego, CA 92123 from 2:30 to 5:00 P.M.

Outcomes: Meets the first Tuesday of every other month at- 3255 Camino del Rio South, San Diego CA 92108 in La Vista Room- from 11:30 A.M. to 12:30 P.M.

Early Childhood: Meets the second Monday of the month- at the San Diego Center for Children-FFAST office located at 8825 Aero Drive, Suite 110, San Diego, CA from 11:00 A.M. to 12:00 P.M.

Education Advisory Ad Hoc: Meets As Needed.

TAY Council: Meets the fourth Wednesday of the month 3:00 to 4:30 P.M. at National University, 9388 Lightwave Ave. Room 118, San Diego, CA 92123.

CYF CADRE: Meets quarterly on the second Thursday of the month at NAMI San Diego, 5095 Murphy Canyon Road, Suite 320, San Diego, CA 92123 from 1:30 to 3:00 P.M.

CCRT: Meets the first Friday of the month at the Health Services Complex- 6367 Alvarado Ct. Ste. 105, San Diego, CA 92120 from 10:00 to 11:30 A.M.

Family and Youth Sector: Meets quarterly –Contact CYFLiaison@namisd.org for schedule.

Family and Youth as Partners: Meets every third Thursday of the month at NAMI San Diego, 5095 Murphy Canyon Road, Suite 320, San Diego CA 92123 1:30 to 3:00 P.M.

Private Sector: Ad Hoc/Meets As Needed.

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

Web Page

- CYF Council main web page:
https://www.sandiegocounty.gov/content/sdc/hhsa/programs/bhs/mental_health_services_children/CYFBHSOCCouncil.html
Or [Click Here](#)
- CYF Council Meeting Minutes:
https://www.sandiegocounty.gov/content/sdc/hhsa/programs/bhs/mental_health_services_children/CYFBHSOCCouncil/Council_Meeting_Minutes.html
Or [Click Here](#)

The screenshot shows the website for Behavioral Health Services. The header includes the County of San Diego logo and the text "Behavioral Health Services". Below the header is a navigation bar with links: "I WANT TO FIND", "ADULT SERVICES", "CHILDREN'S SERVICES", "PROVIDERS", and "CONTACT". The main content area features the title "Children, Youth and Families Behavioral Health System of Care Council" and a paragraph describing the council's purpose and meeting schedule. It also lists the 2019 CYFBHSOC Council Co-Chairs: Minola Clark Manson and Dori Gilbert. A list of links for council documents is provided, including Council Overview, System of Care Principles, Council Bylaws, Council Member Roster, Council Meeting Minutes, Council Meeting Packet, Council Subcommittee's/Groups, and Council New Attendee Welcome Packet. The right sidebar contains a "Popular Services" section with links to About Behavioral Health Services (BHS), Our Services, BHS Councils & Behavioral Health Advisory Board, Mental Health Services Act (MHSA), Contact, and Your Rights. Below this is the "COUNTYNEWSCENTER" section with news items about the County Board approving small business stimulus, dine-in restaurants closing, and businesses being placed on a watchlist.

Behavioral Health Services

Children, Youth and Families Behavioral Health System of Care Council

The Children, Youth and Families Behavioral Health System of Care (CYFBHSOC) Council is open to the public and meets the 2nd Monday of every month from 9:00 a.m. – 10:30 a.m. in the Shell Room at Scottish Rite Center located at:

1895 Camino Del Rio South, San Diego, CA 92108

[Meetings Calendar](#)

2019 CYFBHSOC Council Co-Chairs:

Minola Clark Manson, representing the Private Sector

Dori Gilbert, representing the Public Sector

On December 12, 1995, the County Board of Supervisors supported recommendations to transform the Children's Mental Health System. A Children's Mental Health Services System of Care Steering Committee was established; a Public, Private and Family partnership. In 2004, this committee evolved into the Children's Mental Health Services System of Care Council, a four sector partnership: Public, Private, Family and Education. For additional information please see:

- [Council Overview](#)
- [System of Care Principles](#)
- [Council Bylaws](#)
- [Council Member Roster](#)
- [Council Meeting Minutes](#)
- [Council Meeting Packet](#)
- [Council Subcommittee's/Groups](#)
- [Council New Attendee Welcome Packet](#)

Children, Youth and Families (CYF) Staff: Yael Koenig, Deputy Director

CYF Administrative Support: Grisel Ortega-Vaca, Edith Mohler, and Darwin Espejo

For questions regarding the Children, Youth and Families Behavioral Health System of Care Council or to be added to the electronic distribution list, please contact please contact **Darwin Espejo** (Darwin.Espejo@sdcounty.ca.gov) at (619) 584-3024

Popular Services

- About Behavioral Health Services (BHS)
- Our Services
- BHS Councils & Behavioral Health Advisory Board
- Mental Health Services Act (MHSA)
- Contact
- Your Rights
- [More Services](#)

COUNTYNEWSCENTER

- County Board Approves Small Business Stimulus
- Dine-In Restaurants, Other Indoor Activities to Close in County
- County to Be Placed on Watchlist; Impacted Businesses Should
- [More Stories](#)

Children, Youth and Families (CYF) Behavioral Health Services



Provider Resource Manual

Available on line at:

https://www.sandiegocounty.gov/content/sdc/hhsa/programs/bhs/mental_health_services_children.html

[https://www.sandiegocounty.gov/content/dam/sdc/hhsa/programs/bhs/CYF/CYFBHSPRM%20January%202017%20\(2\).pdf](https://www.sandiegocounty.gov/content/dam/sdc/hhsa/programs/bhs/CYF/CYFBHSPRM%20January%202017%20(2).pdf)



COUNTY OF SAN DIEGO
HHSA
HEALTH AND HUMAN SERVICES AGENCY



LIVE WELL
SAN DIEGO

Introduction

Children, Youth and Families Administrative Team

Yael Koenig, Deputy Director	(619) 563-2773
Dr. Laura Vleugels, Supervising Psychiatrist	(619) 563-2715
Dr. Charmi Patel-Rao, Supervising Psychiatrist	(858) 694-4695

Fran Cooper, AMSA	(619) 584-5030
Amanda Lance-Sexton, AMSA	(619) 563-2722
Frank Congine, Behavioral Health Program Coordinator	(619) 563-2761
Trang Hoang, Behavioral Health Program Coordinator	(619) 563-2722
Shannon Jackson, Behavioral Health Program Coordinator	(619) 563-2720
Terri Kang, Behavioral Health Program Coordinator (Acting)	(619) 563-2777
Wendy Maramba, Chief, Child and Adolescent Services	(619) 584-5076
Mike Miller, Behavioral Health Program Coordinator	(619) 563-2787
Eileen Quinn-O'Malley, Behavioral Health Program Coordinator	(619) 584-5046
Rebecca Raymond, Behavioral Health Program Coordinator	(619) 584-3011

The County of San Diego, Health and Human Services Agency Behavioral Health Services administers Children, Youth and Families Behavioral Health Services. This provider resource manual describes the services currently funded by the County of San Diego, which include County operated and contracted programs.

P.O. Box 85524
SAN DIEGO, CA 92186-5524
PHONE (619) 563-2750
FAX (619) 563-2775

Access and Eligibility for Services

County funded Behavioral health services are intended for children and adolescents who are either experiencing a behavioral health crisis (such as depression, suicidal thoughts, extreme anxiety, substance abuse/dependence) or who require behavioral health services in order to function in school, at home or in the community. Generally services are targeted for the Medi-Cal beneficiaries and low income up to age 21. All services are rendered without regard to race, color, creed, or disability. Individuals and professionals may make direct contact with any of the resources listed in this manual. ***However, it should be noted that, in some cases, access to services is managed through specific procedures and may be limited to certain special populations.*** Where possible, this information has been included in this manual. If in doubt about eligibility or how to access services, please contact the Access and Crisis Line at **(888) 724-7240**.

Access to Language Services

Clients have a right to free language assistance in a language they understand. Clients shall be provided interpreter services as a part of their therapeutic services. However clients have the option to choose or use a family member or a friend as an interpreter. The client/family are not expected to provide their own translator. All Behavioral Health programs have access to translators.



County of San Diego

NICK MACCHIONE, FACHE
AGENCY DIRECTOR

HEALTH AND HUMAN SERVICES AGENCY
BEHAVIORAL HEALTH SERVICES
3255 CAMINO DEL RIO SOUTH, MAIL STOP P-531
SAN DIEGO, CA 92108-3808
(619) 563-2700 • FAX (619) 563-2705

ALFREDO AGUIRRE
DIRECTOR, BEHAVIORAL HEALTH SERVICES

January, 2017

Welcome to San Diego County's Health and Human Services Agency (HHSA) Behavioral Health Services (BHS) Children, Youth and Families (CYF) System of Care (SOC).

The eLearning you will receive today provides an overview of the Children, Youth and Families System of Care.

The intent of this training is to facilitate the understanding of the CYF SOC philosophy and guiding principles. The training provides an overview of the array of services offered to support children, youth and their families and how we work together with other entities within and outside of the County of San Diego.

Behavioral Health Services provides a continuum of mental health and alcohol and drug services for communities of all ages embracing the *Live Well San Diego* vision: A region that is Building Better Health, Living Safely and Thriving.

Behavioral Health Services promotes resiliency, discovery, and well-being for children and youth. This is achieved through prevention and treatment that is focused on offering culturally competent, individualized, trauma informed, community based, collaborative, outcomes driven, strength based, youth guided and family driven services.

Jointly, we work to ensure that children and youth in our community are healthy, safe, successful in school, and are law abiding while they live in a community that supports them with strong family connections.

You play an important role in helping achieve the CYF SOC goals. This training will facilitate the understanding of how you contribute to a legacy of quality care that is responsive to the needs of the diverse communities in this county.

I hope that you will enjoy this training while learning about our system.

Yael Koenig, LCSW, Deputy Director

Children, Youth and Families System of Care
Behavioral Health Services

A BHS Children, Youth and Families System of Care eLearning is available on the RIHS website:
<https://theacademy.sdsu.edu/programs/rihs/elearning/>. Search for BHE0028.



LIVEWELLSD.ORG

BEHAVIORAL HEALTH SERVICES 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 ever-changing world.

Live Well San Diego

AREAS OF INFLUENCE



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



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



LIVE WELL
SAN DIEGO

2018-2019 *LIVE WELL SAN DIEGO* ANNUAL IMPACT REPORT

EXECUTIVE SUMMARY | 9 YEARS OF **HEALTHY**, **SAFE** & **THRIVING** COMMUNITIES

COLLECTIVE ACTIONS ARE CREATING POSITIVE IMPACTS

Live Well San Diego is the vision for a region that is Building Better Health, Living Safely and Thriving. Developed in 2010, the vision was built on the collective impact model which requires that cross-sector organizations come together in support of a common agenda, agree to track progress in the same way, and coordinate efforts to continuously improve programs and initiatives that positively affect quality of life in San Diego County.

As of June 30, 2019, 451 Recognized Partners have committed to the vision and are working with the County of San Diego, as well as community leaders and organizations across the region in support of a better quality of life for all 3.3 million San Diego County residents. These partners include 23 Cities & Government partners, 86 Business & Media partners, 52 Schools & Education partners, and 290 Community & Faith-Based partners. In 2018-2019 fiscal year alone, 65 new partners were welcomed.

The full 2019 Annual Impact Report can be found online and includes success stories submitted by partners from July 2018 through June 2019. Read the full report at LiveWellSDAnnualReport.org.

RECOGNIZED PARTNERS BY SECTOR



SCHOOLS & EDUCATION: 52

Encouraging nearly 457,000 students and their families to adopt healthy, safe and thriving behaviors.



BUSINESS & MEDIA: 86

Improving economies, expanding message reach and positively influencing employee/community health.



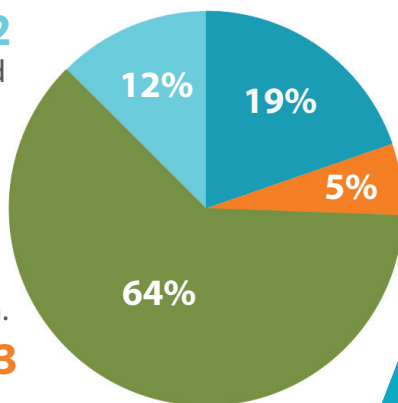
CITIES & GOVERNMENTS: 23

Enacting health and safety policies and building sustainable and walkable infrastructure for over 3 million residents.



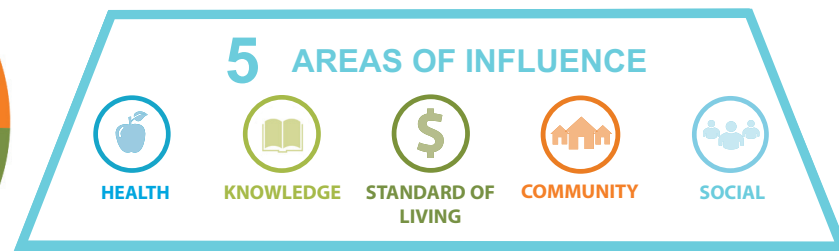
COMMUNITY & FAITH-BASED: 290

Connecting individuals and families throughout San Diego County to programs and services that improve well-being.



PARTNERS COMMITTED TO ADVANCING THE VISION

451



Partner Success Stories

As of June 30, 2019, 451 Recognized Partners have come together to support the *Live Well San Diego* vision throughout the region. This is the power of collective impact – working together to accomplish far more than government or any single entity could ever do alone. This section highlights some of the many events, programs, initiatives and services that made an impact in the lives of San Diegans between July 1, 2018 and June 30, 2019. Partner success stories and each of the *Live Well San Diego* Top 10 Indicators are organized under the 5 Areas of Influence below.



HEALTH

Enjoying good health and expecting to live a full life

1. Life Expectancy
2. Quality of Life



Be There San Diego, a coalition of patients, communities, healthcare systems and organizations, **reduced heart attacks in San Diego County by 22%** (2011-16) through their Heart Attack & Stroke Free Zone, Southeastern San Diego Cardiac Disparities Project and Accountable Communities for Health collaboratives.

The County of San Diego teamed with contracted doctors and nurses and volunteers from the San Diego Rapid Response Network - a coalition of organizations and community leaders, including 10 Recognized Partner organizations, dedicated to aiding immigrants and their families - to provide more than **13,630 health screenings** for asylum seekers.



KNOWLEDGE

Learning throughout the lifespan

3. Education



Over **850 young adults and allies** came together to discuss ways to connect disconnected youth to educational and employment opportunities at the 2019 Opportunity Summit hosted by San Diego Workforce Partnership in partnership with representatives from 2-1-1- San Diego, Cajon Valley Union School District, San Diego Unified School District, DETOUR, RISE San Diego and others.

The 2019 Super STEM Saturday was hosted by California State University San Marcos in partnership with The Classical Academies and welcomed **18,000 attendees** to the CSUSM campus to discover science, re-imagine technology, create engineering, and explore math.



STANDARD OF LIVING

Having enough resources for a quality life

4. Unemployment Rate
5. Income



Nearly **600 of San Diego's business leaders**, including the Port of San Diego, SANDAG, San Diego Workforce Partnership, the City of National City and the County of San Diego, gathered for the South County Economic Development Council's 28th Annual Economic Summit to discuss affordable housing and sustainable employment options for San Diego County.

The ARC of San Diego provided employment training and support to over **400 individuals with disabilities** and, through partnerships, placed **110 individuals** in jobs of their choice throughout the county.





COMMUNITY

Living in a clean and safe neighborhood

- 6. Security
- 7. Physical Environment
- 8. Built Environment



A partnership between Community Health Improvement Partners, the Lemon Grove HEAL Zone, Kaiser Permanente and the City of Lemon Grove brought over 1,000 Lemon Grove residents together to create local park improvements, city/school policy changes, and gardening and nutrition education programs.

I Love A Clean San Diego and the City of Chula Vista held a 16th annual community cleanup event called Beautify Chula Vista Day where **1,033 volunteers** helped remove an estimated 14,067 pounds of debris and 5,300 sq ft of graffiti and planted 246 plants.



SOCIAL

Helping each other to live well

- 9. Vulnerable Populations
- 10. Community Involvement



The San Diego Hunger Coalition, whose members include multiple Recognized Partners, worked together to increase access to CalFresh (SNAP) benefits, resulting in an additional **3,303 households and 5,496 low-income college students** receiving CalFresh benefits.

The County of San Diego, International Rescue Committee, The Karen Organization, Daily Harvest Express and the YMCA of San Diego County, collaborated with the San Diego Refugee Forum to organize the 2018 World Refugee Day hosting over **300 participants** and celebrating the diversity of cultures and customs of the local refugee population.



JOIN US

Organizations throughout the region continue to join the movement, bringing their expertise and expanding the reach of collective efforts that are creating measurable change within San Diego's diverse communities.

Live Well San Diego Recognized Partners are going above and beyond in their commitment to a region that is living well. They are thinking about the future by seeking long-term solutions to local challenges.


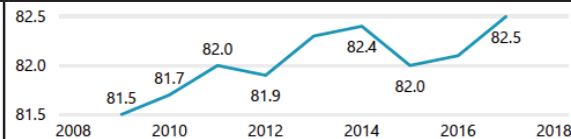

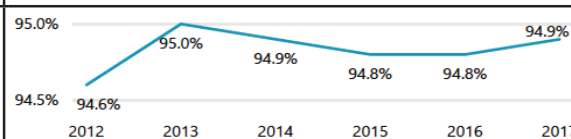

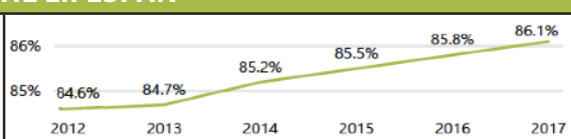

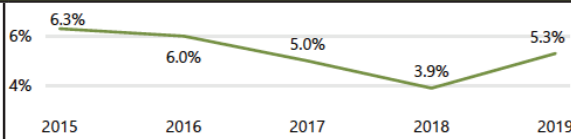

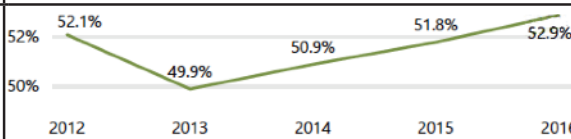

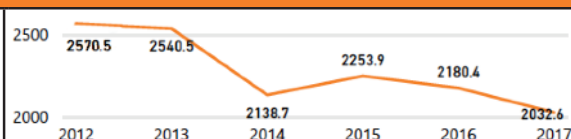

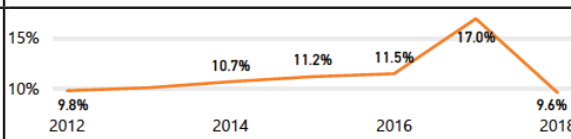

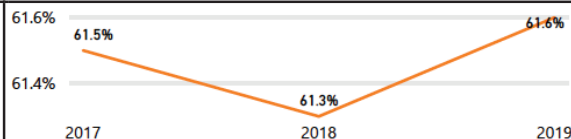

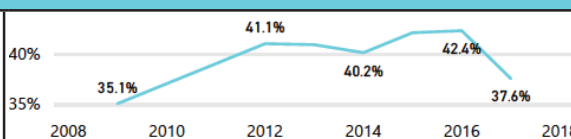

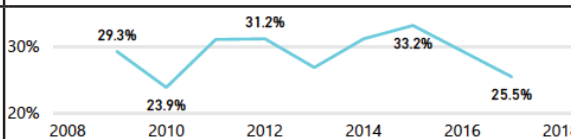
Learn more about Partner accomplishments by visiting LiveWellSDAnnualReport.org.

Where can your organization get involved?

- **Regional Community Leadership Teams** connect the collective efforts of organizations and individuals and facilitate opportunities for stakeholders to have a voice in the future of their neighborhoods, so that every resident can be healthy, live safely and thrive.
- **Workgroups, Coalitions and Collaborations**, often supported by Recognized Partner organizations, address a wide variety of topics, including community health, youth and gang involvement, homelessness, conservation and sustainability, and are often looking for strategic leadership to help drive change. Visit LiveWellSDAnnualReport.org under the Join Us tab to find examples of groups working in the region.
- **Monthly Newsletter and Social Media Channels** inform the community and other partners about what organizations are doing to impact the *Live Well San Diego* vision. Opportunities can be submitted to LWSD.HHSA@sdcounty.ca.gov for consideration.
- **Signature Events** bring thousands of individuals, families and organizations together in support of healthy, safe and thriving communities. Partners can strengthen their partner-to-partner collaboration and increase their involvement in the vision by participating in Signature Events as planners, speakers, sponsors, hosts, volunteers or participants.

MEASURING PROGRESS: *Live Well San Diego* Top 10 Indicators

Progress toward the *Live Well San Diego* vision is measured across a person's lifespan within 5 Areas of Influence and 10 *Live Well San Diego* Indicators which define what it means to live well in San Diego. As more residents improve their health, safety and economic status, there are more opportunities for people to grow, connect and thrive.

Status	Indicator: Measure	U.S.	CA	SD	Trend Data
HEALTH - ENJOYING GOOD HEALTH AND EXPECTING TO LIVE A FULL LIFE					
	Life Expectancy: Length of life expected at birth in years	78.6	U	82.5	
	Quality of Life: Percent of the population sufficiently healthy to live independently (not including those who reside in nursing homes or other institutions)	94.2%	94.5%	94.9%	
KNOWLEDGE - LEARNING THROUGHOUT THE LIFESPAN					
	Education: Percent of population ages 25 and over with at least a High School Diploma or Equivalent	87.3%	82.5%	86.1%	
STANDARD OF LIVING - HAVING ENOUGH RESOURCES FOR A QUALITY LIFE					
	Unemployment Rate: Percent of the total labor force that is unemployed (2019 ESRI Community Analyst current year, data is not seasonally adjusted)	4.6%	5.5%	5.3%	
	Income: Percent of population spending less than 1/3 of income on housing	63.7%	54.4%	52.9%	
COMMUNITY - LIVING IN A CLEAN AND SAFE NEIGHBORHOOD					
	Security-Overall Crime Rate: Number of crimes per 100,000 people (all crimes, including violent and property)	2745.1	2946.0	2032.6	
	Physical Environment-Air Quality: Percent of days that air quality was rated as unhealthy for sensitive populations	1.7%	9.7%	9.6%	
	Built Environment-Distance To Park: Percent of population living within a quarter mile of a park or community space	U	U	61.6%	
SOCIAL - HELPING EACH OTHER TO LIVE WELL					
	Vulnerable Populations-Food Insecurity: Percent of population with income of 200 percent or less of the federal poverty level, who have experienced food insecurity	U	42.6%	37.6%	
	Community Involvement-Volunteerism: Percent of population who volunteer	30.3%	25.4%	25.5%	

 Moving in the right direction

 Moving in the wrong direction

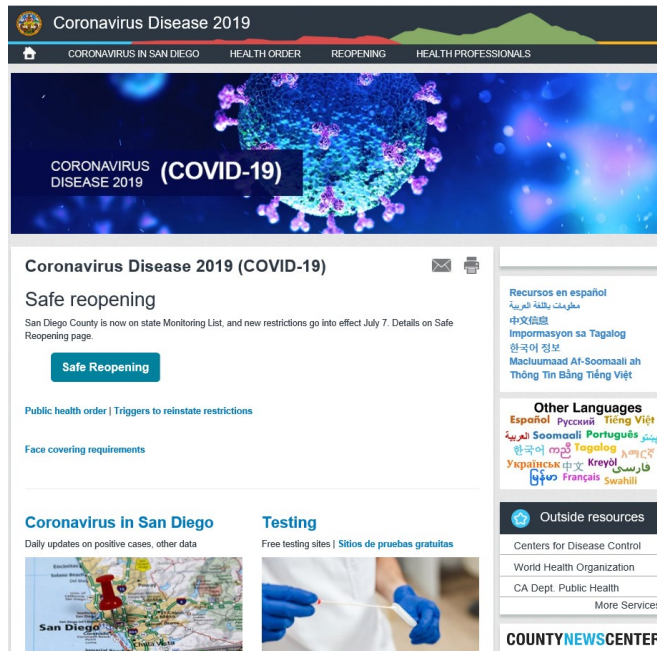
Note: The most current local data, that has state and national comparison data is reported. U = unavailable.

To view data at a sub-regional or sub-area level, visit www.LiveWellSD.org/data-results.

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

CORONA VIRUS DISEASE 2019 (COVID-19)

County of Diego COVID-19 Webpage: <https://www.sandiegocounty.gov/coronavirus.html> or [Click Here](#)



Behavioral Health Services Resources for Managing Mental Health and Coping During COVID-19:
<https://www.sandiegocounty.gov/hhsa/programs/bhs/> or [Click Here](#)

