

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

MEETING AGENDA

February 13, 2023 | 9 to 10:30 a.m.

Zoom meeting link for registration sent via Outlook meeting invitation:

<https://us06web.zoom.us/join/zoom/register/tZcof--rrzgrGtRupIQ5mxpGrasHepcUs8PP>

I. Welcome (Stephanie Escobar) 5 minutes

- Love Your Heart <https://www.livewellsd.org/love-your-heart/> - Handout - **Page 5**
- Welcome new meeting attendees - translation available
- Welcome Rosa Gracian as Council member representing the Homeless Equitable Solutions and Liki Porotesano as the alternate
- Welcome Lori Sorenson representing the San Diego Regional Center as the alternate to Zach Guzik
- Heather Nemour is the new member representing the Education Sector, Regular Education Pupil Personnel Services
Thank you Violeta Mora and Margaret Sedor for your contributions
- Directing Change the Hope and Justice Film Contest - flier - **Page 7**
Submissions due March 1, 2023
Link: <https://directingchange.org/>

II. Review of Meeting Summary (Yael Koenig) 5 minutes

- December 12, 2022, Meeting Summary - Handout - **Pages 9-14**
- Action Items from December 12, 2022 - See meeting summary for action items - **Page 12**
 - Council staff sent out Committee/Sector update templates on December 23, 2022

III. Business Items (Yael Koenig) 20 minutes

Public Comment or - Inviting all participants to unmute or enter public input in the chat	
Board Letters / Board Actions	
<p><u>December 13, 2022</u></p> <ul style="list-style-type: none"> • Item 20: 2023 Legislative Program • Item 28: Receive Update on Declaring Illicit Fentanyl a Public Health Crisis; Add Staff Years; and Authorized Application for Future Funding Opportunities - Handouts include presentation - Pages 15-33 • Item 31: Establish the Interfaith Behavioral Health Workforce Center of Excellence [Funding Source: Mental Health Services Act] - Handout- Pages 34-38 <p><u>January 10, 2023</u></p> <ul style="list-style-type: none"> • Item 01: Selection of Chair and Chair Pro Tem of the 2023 Board of Supervisors <p><u>January 24, 2023</u></p> <ul style="list-style-type: none"> • Item 01: Installation of a Holocaust Remembrance Exhibit on a County Property • Item 05: Authorize Acceptance of Funding for the Transitional Housing Program, Housing Navigation and Maintenance Program, and Transitional Housing Program Plus Housing Supplement Program and Adopt Resolutions Authorizing Application and Acceptance of Allocation Awards • Item 09: Authorization to Accept Community Care Expansion Preservation Program Operating Subsidy Payments Funds, And Authorize Notices of Funding Availability and Competitive Procurements • Item 14: Annual Report on Gun Violence and Update on Regional Gun Violence Community Needs Assessment <p><u>February 7, 2023</u></p> <ul style="list-style-type: none"> • Item 03: Receive the First 5 San Diego 2022 Annual Report - Handout - Pages 39-42 Link to the Report: https://first5sandiego.org/wp-content/uploads/2022/12/First-5-SD-2022_Annual_Report.pdf • Item 06: Elevating Community Infrastructure and Opportunities Through Youth Transportation Investments • Item 18: Enhance Preparation for the Arrival of Migrants and the Lifting of Title 42 Restrictions • Item 19: Ending Veteran Homelessness in San Diego County <p>Board Letters that may be particularly of interest to the CYF Council are listed above. Due to size, only highlighted Board Letters are included in the packet, however, all Board Letters can be found at the Clerk of Board of Supervisors (BOS) Meeting Agendas, Board Letters and Access to the BOS meetings: https://www.sandiegocounty.gov/cob/bosa/index.html</p>	
Information	
<ul style="list-style-type: none"> • Child Welfare Services (CWS) Child and Family Well-Being (Elliott Hinkle)- Handout – Page 43 • Surgeon General says 13 is “too early” to join social media Surgeon General says 13 is 'too early' to join social media CNN • Governor’s Newsom’s FY 2023-24 January State Budget Proposal – Handout- Pages 44-47 Link to the California State Proposed Budget for 2023-24: https://www.ebudget.ca.gov/ • Children and Youth Behavioral Health Initiative (CYBHI) <ul style="list-style-type: none"> ○ January 2023 Progress Report – Handout - Page 48 ○ Working Paper: California’s Children & Youth Behavioral Health Ecosystem – Handout- Pages 49-50 ○ Overview of Grant Funding Opportunity and February 9, 2023 - Request for Application (RFA): Evidence-Based Practices and Community-Defined Evidence Practices Grant Program – Round Two: Trauma-Informed Programs and Practices – Handouts- Page 51-60 https://www.dhcs.ca.gov/cybhi https://www.chhs.ca.gov/home/children-and-youth-behavioral-health-initiative/ https://www.chhs.ca.gov/wp-content/uploads/2023/01/CYBHI-January-2023-Progress-Report-Final--ADA.pdf https://www.chhs.ca.gov/wp-content/uploads/2023/02/Ecosystem-Working-Paper--ADA.pdf DHCS-CYBHI-EBP-Grant-Strategy-Overview-December-2022 (ca.gov) https://www.dhcs.ca.gov/CYBHI/Documents/DHCS-CYBHI-EBP-CDEP-Round-2-Request-for-Applications.pdf • Behavioral Health Director’s Report - February 2023 (The January 2023 BHAB meeting was cancelled) - Handout - Pages 61-65 	

- **2023 Mental Health External Quality Review (EQR)** January 10-12, 2023
<https://www.calegro.com/mh-egro>
- **2023 Drug Medi-Cal Organized Delivery System (DMC– ODS) EQR** -April 18-20, 2023
<https://calegro.com/dmc-egro>
- **CYF Services Directory** - January 2023 Update - Handout – **Pages 66-67**
<https://www.sandiegocounty.gov/content/dam/sdc/hhsa/programs/bhs/CYF/CYF%20Services%20Directory%20Updated%20January%202023%201.18.23.pdf>
- **San Diego County Suicide Prevention Council-Suicide Prevention Action Plan (SPAP) Update 2023-Community Engagement Event Schedule** - Flier - **Page 68**
Link to current plan: https://www.sdchip.org/wp-content/uploads/2018/06/6-5-18-FINAL_BIGSPCSPAPUpdate2018FINAL_rev1.pdf
- **California Advancing and Innovating Medi-Cal (CalAIM) Services Community Listening Sessions-Handout- Page 69**
Wednesday, February 15, 2023 from 3:30 to 5 p.m.
Tuesday, February 21, 2023 from 3:30 to 5 p.m.
- **8th Annual Critical Issues in Child and Adolescent Mental Health (CICAMH) Conference: Building Resilience Through Family Engagement** (Hybrid) on April 21, 2023 (Dr. Charmi Patel Rao and Dr. Jeff Rowe) - Flier - **Page 70**
Register at: <https://app.ce-go.com/CICAMH2023> -Additional questions at: CICAMHCONFERENCE@GMAIL.COM

IV. MHSA Update (Dr. Danyte Mockus-Valenzuela)

5 minutes

- **Mental Health Matters Month**
Statewide Prevention and Early Intervention Campaign:
[Take Action for Mental Health \(takeaction4mh.com\)](http://takeaction4mh.com)
Local It's Up to Us Campaign:
www.up2sd.org

http://www.sandiegocounty.gov/content/sdc/hhsa/programs/bhs/mental_health_services_act/mhsa.html

V. Hot Topic

50 minutes

Sectors and Committees Bi-Annual Reports – (Jaime Tate-Symons) - Handouts- Pages 71-203

A brief presentation will be offered in the February and March 2023 CYF Council Meetings with all power points included in the February meeting packet. Please enter comments, input, and questions in the meeting chat for the presenter to respond to.

Constituency/Committee/Group	Sector	Presenter
Juvenile Court	Public	Honorable Judge Ana España
Education Committee	Education	Heather Nemour
Cultural Competence Resource Team (CCRT)	All Sectors	Rosa Ana Lozada
Homeless Solutions and Equitable Communities	Public	Rosa Gracian
Public Health Services	Public	Dr. Tom Coleman
Medical Care Services	Public	Heather Summers
Child Welfare Services (CWS)	Public	Jerelyn Bourdage
Healthcare (Pediatrician)	Private	Dr. Pradeep Gidwani
San Diego Regional Center	Private	Zach Guzik
Alcohol Drug Service Provider Association (ADSPA)	Private	Marisa Varond
Mental Health Contractors Association (MHCA)	Private	Laura Beadles and Golby Rahimi Saylor
Managed Care Plans	Private	Kathleen Lang
Outcomes	All Sectors	Emily Velazquez Trask
CYF CADRE	Private	Julie McPherson and Marisa Varond
Family and Youth Sector	Family	Sten Walker
Early Childhood	All Sectors	Rosa Ana Lozada and Stephanie Gioia-Beckman
First 5 Commission	Public	Stephanie Escobar
Transition Age Council	All Sectors	Laura Tancredi-Baese and Michael Miller
Public Safety Group	Public	Delona King
Behavioral Health Services Advisory Board (BHAB)	Public	Bill Stewart
Behavioral Health Services	Public	Dr. Laura Vleugels
CYF System of Care Training Academy	All Sectors	Written Update Included – No Presentation

VI. Announcements (Jaime Tate-Symons)

5 minutes

- Poll Question
- **Third Annual Birth of Brilliance Conference** (Virtual) on February 23, 2023 - Fliers – **Pages 204-205**
In-person Cultural Fair on February 24, 2023
Registration at: www.BirthofBrilliance.com
- **43rd California Mental Health Advocated for Children and Youth (CMHACY)** conference: Committing to Mobilizing Hope and Advocacy for Communities and Youth – Elevating Voices, Influencing Progress (Back in person) on May 10-12, 2023 – Handout- **Page 206**
<http://cmhacy.org/>

Next Executive Committee Meeting:

Date: February 23, 2023

Time: 11:30 a.m. to noon.

Next Council Meeting

Date: Monday, March 13, 2023

Time: 9 to 10:30 a.m.

Committees/Sectors/Workgroups Meetings Information is located at the end of the meeting summary. For Council materials go to:
https://www.sandiegocounty.gov/content/sdc/hhsa/programs/bhs/mental_health_services_children/CYFBHSCouncil.html

**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





LIVEWELLSD.ORG



LIVE WELL
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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 & Nutrition 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 FACTORS



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



LOVE HEART

Week of Action February 11-19, 2023

**“Join the Heart Health Movement”
with a free blood pressure screening
at sites across San Diego County and Mexico,
celebrating twelve years of Love Your Heart**

visit LOVEYOURHEARTSD.ORG to learn more



LIVE WELL
SAN DIEGO

LIVEWELLSD.ORG

GET INVOLVED WITH LOVE YOUR HEART

We Need Host Sites and Volunteers!

Love Your Heart Week of Action is February 11-19th!

Love Your Heart 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. Love Your Heart annually helps tens of thousands of people get to know their blood pressure numbers and take charge of their own heart health.

Apply to host a blood pressure screening site!

Organizations from every sector - business, healthcare, education, non-profit, faith-based – are needed to host screening sites and help promote the event. Your organization can offer free blood pressure screenings to the public or your clients and employees.

Apply to be a general or medical volunteer!

We are looking for general volunteers and certified medical workers, such as doctors, pharmacists, dentists, nurses, firefighters, paramedics, or other credentialed individuals who are trained in taking blood pressure readings manually.

As a **medical volunteer**, you will be assigned to support a Love Your Heart screening site within San Diego County by conducting blood pressure screenings. As a **general volunteer**, you will be assigned to support a site by encouraging participants to get their blood pressure checked and assisting with check-in and data entry. Most sites are active between 8am-5pm, though shorter shifts may be assigned.

Please visit **LOVEYOURHEARTSD.org** for more information on how to get involved.

If you have any questions please email: **loveyourheartsd@sdcounty.ca.gov**.





Directing Change

Program and Film Contest

the Hope & Justice

Category

Directing Change is an evaluated program that engages youth to learn about mental health, suicide prevention and other critical health and social justice topics through film and art.

DirectingChangeCA.org

Enter Film Contest

The program can be implemented in a traditional or virtual classroom.

- Open to students in middle and high school, and young adults through age 25
- Free to participate
- Mini grants available to schools, clubs and organizations (up to \$2,500)
- Cash prizes for youth (up to \$1,000)

6 SUBMISSION CATEGORIES



- SUICIDE PREVENTION
- MENTAL HEALTH
- ANIMATED SHORT
- WALK IN OUR SHOES
- HOPE AND JUSTICE
- THROUGH THE LENS OF CULTURE

Films in English, Spanish, Sign Language and other languages welcome!

The Hope & Justice Category

Accepts submissions on a monthly basis in various art forms including film, music, art and more. Visit the website for contest rules, prizes and monthly prompts!

OUTCOMES

Submissions due: March 1

Recognize warning signs for suicide and know how to get help for a friend or themselves.

Know the facts about mental health, coping with adversity, and where to find help.

Have the confidence to stand up for others experiencing stigma or discrimination as a result of a mental health challenge.

Apply critical thinking to issues around equity and justice.

Free lesson plans and educational materials available!

TO GET STARTED

Step 1: Review the contest rules and FAQ!

Step 2:

Visit the "For Schools" page for lesson plans and educational resources. Before proceeding with this contest in your school, or at your organization, be sure to review the protocol and procedures in place at your school or organization for addressing the needs of youth in an emotional crisis. Chapter 2 in *Suicide Prevention: A Toolkit for Schools* (provided on the website) provides guidance on how to do this.

Step 3:

Review educational resources, lesson plans, sample films, and judging criteria to assist participants with creating their film projects. The Directing Change team is available to facilitate free virtual sessions and support around mental health and suicide prevention, and support with the program overall.

Step 4:

Submit entry forms and upload films by March 1. Every entry needs to include signed release forms from every participant (cast and crew). Anyone under the age of 18 also needs to have the form signed by their parent or a legal guardian. *This way we can share your films broadly, even on TV and in movie theatres to help suicide prevention efforts across California! Check the website for monthly Hope and Justice deadlines!

If at any time you are experiencing an emotional crisis, are thinking about suicide or are concerned about someone call the **National Suicide Prevention Lifeline** immediately: **1-800-273-TALK (8255)**. This is a free 24-hour hotline

GET INVOLVED

The program is based on an evaluated curriculum and is free to schools and districts. It can be implemented in the classroom, by a club on campus, or as an after school activity.

www.DirectingChangeCA.org



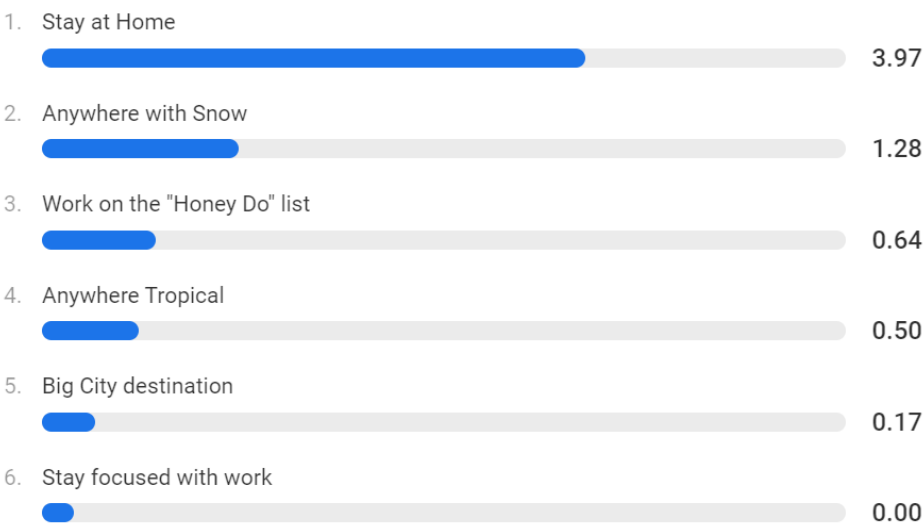
Funded by counties through the voter-approved Mental Health Services Act (Prop. 63).



Directing Change
Program & Film Contest

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

December 12, 2022 | 9 to 10:30 a.m.
 Virtual Meeting

ITEM	SUMMARY AND ACTION ITEMS														
<p>I. Welcome (Stephanie Escobar)</p> <ul style="list-style-type: none"> Happy Holidays Welcome new meeting attendees - translation available Directing Change December 2022 Newsletter - Handout - Page 5 Student Monthly Contest: What are your hopes for 2023? Link: https://mailchi.mp/directingchange/teaching-resilient-students-newsletter-december-2022?e=abcfefa600 <p>Where do you want to be this Holiday Season?</p> <div style="text-align: right;">36</div>  <table border="1"> <thead> <tr> <th>Option</th> <th>Count</th> </tr> </thead> <tbody> <tr> <td>1. Stay at Home</td> <td>3.97</td> </tr> <tr> <td>2. Anywhere with Snow</td> <td>1.28</td> </tr> <tr> <td>3. Work on the "Honey Do" list</td> <td>0.64</td> </tr> <tr> <td>4. Anywhere Tropical</td> <td>0.50</td> </tr> <tr> <td>5. Big City destination</td> <td>0.17</td> </tr> <tr> <td>6. Stay focused with work</td> <td>0.00</td> </tr> </tbody> </table>	Option	Count	1. Stay at Home	3.97	2. Anywhere with Snow	1.28	3. Work on the "Honey Do" list	0.64	4. Anywhere Tropical	0.50	5. Big City destination	0.17	6. Stay focused with work	0.00	<p>Stephanie Escobar welcomed meeting attendees, reminded the meeting attendees of the meeting logistics and invited attendees to participate in the virtual ice breaker: Where do you want to be this Holiday Season?</p> <ul style="list-style-type: none"> Participants responses are on the column to the left
Option	Count														
1. Stay at Home	3.97														
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6. Stay focused with work	0.00														
<p>II. Review of Meeting Summary (Yael Koenig)</p> <ul style="list-style-type: none"> November 14, 2022, Meeting Summary - Handout - Pages 6-11 Action Items from November 14, 2022 - See meeting summary for action items - Page 9 <ul style="list-style-type: none"> Forward Council input on Student Behavioral Health Incentive Program (SBHIP) to Verna Gant – Completed November 16, 2022 SBHIP update from Verna Gant to the Council - Handout - Page 12 	<p>Yael Koenig reviewed the meeting summary action items from November 14, 2022:</p> <ul style="list-style-type: none"> Kathleen Lang as MCP representative highlighted that the SBHIP team looks forward to partner better with the CYF Council Rosa Ana Lozada thanked the SBHIP team for their responsiveness to the CYF Council feedback 														
<p>III. Business Items (Yael Koenig)</p> <p>Public Comment</p> <p>Board Letters (BL) November 15, 2022</p> <ul style="list-style-type: none"> Item 28: Authorize Competitive Solicitations and Amendments to Extend Existing Behavioral Health Services Contracts Handouts include presentation - Pages 13-38 <p>Board Letters can be found at the Clerk of Board of Supervisors (BOS) Meeting Agendas, Board Letters and Access to the BOS meetings: https://www.sandiegocounty.gov/cob/bosa/index.html</p>	<ul style="list-style-type: none"> No public comment Yael Koenig reviewed the BHS Board Letter presented at the November 15, 2022 BOS meeting 														

ITEM	SUMMARY AND ACTION ITEMS
<p>Information</p> <ul style="list-style-type: none"> • California Behavioral Health Planning Council (CBHPC) Children and Youth Workgroup Proposal Letter for Advocacy of Peer Counseling programs in all Middle and High Schools in California (Christine Frey) -Handout - Pages 39-41 • Children and Youth Behavioral Health Initiative (CYBHI) Grant Funding Available - Handouts - Pages 42- 50 https://www.dhcs.ca.gov/cybhi • Governor Newsom Announces an Unprecedented \$480.5 Million in Grants for Youth Mental Health -Handout - Page 51 California Master Plan for Kid's Mental Health (shared at the September 12, 2022 meeting) https://www.gov.ca.gov/wp-content/uploads/2022/08/KidsMentalHealthMasterPlan_8.18.22.pdf?emrc=6d3847 • National Center for Youth Law (NCYL) - Youth Survey (December 1, 2022- January 31, 2023) to identify the mental health priorities of youth - Handout - Page 52: https://forms.office.com/pages/responsepage.aspx?id=2Ugf1afYQEyDx_4gvlt-L_j_YcZyNjtlS3QVL-ZNRV9UN1JRN1I00TZJR1E0RDZCSzNCTVBbTExBVi4u More information about NCYL's work at: https://youthlaw.org/focus-areas/health • Behavioral Health Director's Report - December 2022 Handout - Pages 53-60 • 2023 Mental Health External Quality Review (EQR) is scheduled for January 10-12, 2023 • Sectors and Committee Bi-Annual Reports – Leads to submit slides by January 17, 2023 (request and instructions forthcoming) <p>Recognition</p> <ul style="list-style-type: none"> • CYF System of Care Principles Awards (Rose Woods) <ul style="list-style-type: none"> ○ Organization Award: Vista Hill- Accessible Depression and Anxiety Peripartum Treatment (ADAPT) ○ Individual Award: Lesley Johnson, San Diego Unified School District 	<p>Yael Koenig reviewed information items and invited Christine Frey to comment on the CBHPC Children and Youth Workgroup Proposal letter advocating for Peer Counseling programs in Middle Schools and High schools. Highlights:</p> <ul style="list-style-type: none"> ▪ Christine Frey is the Chair of the Child and Youth Workgroup of the California Behavioral Health Planning Council ▪ One of the goals of this workgroup is to advocate for the implementation of a Student-Led Peer Counseling programs in all Middle and High Schools in California which can provide the following benefits: <ul style="list-style-type: none"> ○ Low cost or no cost ○ Students tend to listen more to peers than adults ○ “Innately diverse” ○ Reduces stigma ○ Enables long-term, sustainable outcomes ○ Engages students who want to help their peers and can produce a “pipeline” for mental health occupations ▪ Input provided: Cultural competence component are critical for the program ▪ Reach out to Debbie Dennison for more information or input at debbie@brainxp.org ▪ The CBHPC Children and Youth Workgroup meets quarterly via Zoom. The group coordinator is Naomi Ramirez: Naomi.Ramirez@cbhpc.ca.gov <p>• Additional information on the EQR:</p> <ul style="list-style-type: none"> ▪ Yael Koenig reminded attendees that BHS often reach out to providers for participants in the Focus groups conducted by the reviewers ▪ Behavioral Health Concepts, Inc serves as the California's External Quality Review Organization for Medi-Cal Specialty Mental Health and Drug Medi-Cal https://www.calegro.com/ <p>• Rose Woods, representing the CYF System of Care (SOC) Training Academy presented the organization and individual 2022 CYF SOC Principles award to the ADAPT program and Lesley Johnson respectively for their dedication to advancing the SOC Principles</p>
<p>IV. Mental Health Services Act (MHSA) Update (Dr. Danyte Mockus-Valenzuela)</p> <p>Link: http://www.sandiegocounty.gov/content/sdc/hhsa/programs/bhs/mental_health_services_act/mhsa.html</p>	<ul style="list-style-type: none"> • No update

ITEM	SUMMARY AND ACTION ITEMS										
<p>V. Hot Topic: Post-COVID Considerations for Children, Youth, and Families Presented by the Early Childhood Mental Health Committee -(Jaime Tate-Symons) - Handouts- Pages 61-106</p> <ul style="list-style-type: none">○ Overview: General impact of COVID-19 on behavioral health - Dr. Pradeep Gidwani○ Defining Reflective Practice and the value added – Melanie Morones: Poll: What is your current knowledge of Reflective Practice: <ol style="list-style-type: none">1) Huh? 0 Responses2) I think I might have heard of that but nor really sure what it is – 6 Responses3) I am familiar but could not describe it – 11 Responses4) I practice some form of Reflective Practice – 15 Responses○ Provider Panel – Program Introduction -Panel Moderator: Aisha Pope<ul style="list-style-type: none">▪ KidSTART Clinic and Center - Natalie Elms▪ Mi Escuelita – Nubia Soto▪ Behavior Consultations – Melanie Morones <p>Facilitated discussion moderated by Aisha Pope with highlights summarized below:</p> <ul style="list-style-type: none">• Question for Nubia Soto: What are concrete steps to get started on Reflective Practice/How did you get started/Introduce to Team? Answer: The entire team needs to participate. Time needs to be designated and financial resources allocated. Reflective practice needs to be integrated in all aspects of the work.• Question for Melanie Morones: How has Reflective Practice improved your agency? Answer: There was a shift from being more direct (“Why don’t try to do this?”) to reflective and has helped parents to not to feel judged and to understand challenging behaviors in a different way.• Question for Natalie Elms/Golby Rahimi Saylor: What are barriers, what type of investment is needed? Answer: Time for training, requires a cultural shift. Leads to staff satisfaction/retention, and client satisfaction. Important to find an agency champion in leadership role to be SOC champion to ensure training, funding, make a core principle/value of agency for sustainability.• Successes: Panelists shared stories of how Reflective Practice has been successful at different levels and in different situations: behavior improvement on a child at school, caregiver success raising a child, and staff understanding family behavior. <p><u>Input:</u> leadership needs to consider Reflective Practice and reflected in contract language; it will help with workforce...</p> <p><u>Questions and Answers:</u> Name of the book and link to the video in the success examples: How the Other Half Eats: The Untold Story of Food and Inequality in America, Dr. Priya Fielding-Singh PhD https://us06st1.zoom.us/web_client/bai5dum/html/externalLinkPage.html?ref=https://www.youtube.com/watch?v=P4S5rsoKixw</p>	<p>Highlights from the presentation-</p> <ul style="list-style-type: none">▪ Dr. Gidwani discussed some of the impacts of COVID-19 in children 0-5 and their families: Socialization, language, appropriate development of personal space, changes in screen time, less time in nature, children not seeing other adults, the financial impact of COVID-19 resulted in increased stress in parents and children feel it; increased depression, unprocessed grief▪ Rosa Ana Lozada presented a poll on the current knowledge of Reflective Practice. Responses are on the left column▪ Melanie Morones provided an overview of Reflective Practice▪ The provider panel introduced their programs and provided examples of how they use Reflective Practice▪ See left column for facilitated questions and answers and summary <p>END POLL</p> <p>Poll 1 question 74 of 91 (81%) participated</p> <p>1. On a scale of 1-5 (1 the lowest and 5 the highest), how would you rate the relevance and your interest with today's Council meeting? (Single Choice) *</p> <p>74/74 (100%) answered</p> <table><tr><td>1</td><td>(1/74) 1%</td></tr><tr><td>2</td><td>(0/74) 0%</td></tr><tr><td>3</td><td>(16/74) 22%</td></tr><tr><td>4</td><td>(21/74) 28%</td></tr><tr><td>5</td><td>(36/74) 49%</td></tr></table>	1	(1/74) 1%	2	(0/74) 0%	3	(16/74) 22%	4	(21/74) 28%	5	(36/74) 49%
1	(1/74) 1%										
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4	(21/74) 28%										
5	(36/74) 49%										
<p>VI. Announcements (Jaime Tate-Symons)</p> <ul style="list-style-type: none">• Poll (see above-right column)• Reminder: CYF Council will be dark in January 2023. Happy New Year!• Youth - Led Town Halls presented by the Live Well San Diego Youth Sector on December 17, 2022. Register at: https://qr1.be/3HZ8 - Flier- Page 107• Third Annual Birth of Brilliance Conference (Virtual) on February 23, 2023 - Flier - Page 108 In-person Cultural Fair on February 24, 2023. Registration at: www.BirthofBrilliance.com• Save the Date for the 43rd California Mental Health Advocated for Children and Youth (CMHACY) conference (Back in person) on May 10-12, 2023 – Handout- Page 109 http://cmhacy.org/	<ul style="list-style-type: none">• Jaime Tate-Symons made the announcements listed on the left column• Participants announcements are listed on the left column. Announcements can be sent in advance to Edith Mohler at Edith.Mohler@sdcounty.ca.gov										

ITEM	SUMMARY AND ACTION ITEMS
<p>Participants Contribution:</p> <ul style="list-style-type: none"> Join us this Friday, December 16 from 1:00 to 2:00 p.m., to learn all about navigating mental health resources in San Diego County and beyond! We will cover our three, free NAMI San Diego mobile apps, as well as community partner programs and online services! This town hall is also a space to share your thoughts and opinions on the Behavioral Health System of Care! Can register with this zoom link https://us02web.zoom.us/j/84451220000 Join us for Birth of Brilliance 2023: www.birthofbrilliance.com registration is now open! 	
VII. Action Items	Action Due/Status
1) Forward instructions to Sector and Committee leads to complete biannual reports.	1) Completed December 23, 2022.
<p>Next Meeting: Date: Monday, February 13, 2023 Time: 9 to 10:30 a.m.</p>	

+ = Member in Attendance O = Absent

E = Excused

CONSTITUENCY		MEMBER	STATUS	ALTERNATE	STATUS
PUBLIC SECTOR					
1	Behavioral Health Advisory Board (BHAB)	Bill Stewart	+	Joel San Juan	O
2	Behavioral Health Services (BHS)	Dr. Laura Vleugels	+	Dr. Patricia Cardenas-Wallenfelt	O
3	Public Safety Group/ Probation	Tabatha Wilburn	O	Delona King	+
4	Child Welfare Services (CWS)	Jerelyn Bourdage	+	Norma Rincon	O
5	Homeless Solutions and Equitable Communities	Pending		Pending	
6	Public Health	Dr. Thomas R. Coleman	+	Rhonda Freeman	O
7	Medical Care Services	Dr. Kelly Motadel	+	Heather Summers	+
8	Juvenile Court	H. Judge Ana España	O	Beth Brown	+
9	First 5 Commission	Alethea Arguilez	O	Stephanie Escobar	+
EDUCATION SECTOR					
10	Special Education Local Plan Area (SELPA)	Russell Coronado	O	Jaime Tate-Symons	+
11	Regular Education Pupil Personnel Services	Violeta Mora	E	Margaret Sedor	E
12	School Board	Barbara Ryan	+	Debra Schade	O
13	Special Education	Yuka Sakamoto	+	Misty Bonta	O
PRIVATE SECTOR					
14	San Diego Regional Center (SDRC) for Developmentally Disabled	Zachary Guzik	+	VACANT	
15	Alcohol and Drug Service Provider Association (ADSPA)	Angela Rowe	+	John Laidlaw	O
16	ADSPA	Marisa Varond	+	Claudette Allen Butler	+
17	Mental Health Contractors Association (MHCA)	Julie McPherson	+	Minola Clark Manson	+
18	MHCA	Laura Beadles	O	Golby Rahimi	+
19	Fee- For-Service (FFS) Network	Dr. Sherry Casper	+	Marcelo A. Podesta	O
20	Managed Care Health Plans	Kathleen Lang	+	James Trout	+
21	Healthcare/ Pediatrician	Dr. Pradeep Gidwani	+	VACANT	+
FAMILY AND YOUTH SECTOR					
22	Family and Youth Liaison	Sten Walker	+	VACANT	
23	Caregiver of child/youth served by the Public Health System	VACANT		Karilyn "Kari" Perry	E
24	Youth served by the Public Health System (up to age 26)	Verónica Hernandez	+	VACANT	
25	Youth served by the public health system (up to age 26)	Caitlynn Hauw	O	VACANT	
COMMITTEES (Non-voting members unless a member of the Council)					
-	Executive	Jaime Tate Symons/Stephanie Escobar	+/+		
-	Cultural Competence Resource Team (CCRT)	Rosa Ana Lozada	+		
-	CYF CADRE	Julie McPherson Marisa Varond	+/+		
-	Early Childhood	Aisha Pope Ginger Bial	+/O		
-	Education	Heather Nemour Violeta Mora	E/E		
-	Family and Youth as Partners	Sten Walker	+		
-	Outcomes	Emily Trask Eileen Quinn-O'Malley	O/+		
-	Training	Rose Woods	+		

Total Attendees: 123

Aisha Pope	Delia Machado	Krystle Murguia	Ron Bautista
Alicia Castro	Delona King	Laura Beadles	Rosa Ana Lozada
Amanda Lance-Sexton	Denise Alvarez	Laura McClarin	Rose Woods
Angela Rowe	Dina Ali	Laura Vleugels	Rusell Gagui
Angelina Puffelis	Edith Mohler	Lesley Johnson	Salvador Tapia
April Peña	Eileen Quinn-O'Malley	Leslie Manriquez	Sandra Mueller
Augusto Eduvala	Elaine Carballo	Linda Puebla	Sarah Baldwin
Barbara Ryan	Elizabeth Dauz	Lumumba Mushonga	Sarah Garlejo
Berenis Gonzalez	Erick Mora	Marcelo Podesta	Saskya Caicedo
Beth Brown	Ericka Hernandez	Mareeh Marquez	Shakara Thompson
Bill Stewart- BHAB	Evan Hodges	Margaret Anello	Shannon Jackson
Bobbi Smylie	Fran Cooper	Margarita Hernandez	Shaun Goff
Bri Renstrom	Golby Rahimi Saylor	Maria Norris	Sherry Casper
Brianna Wills	Heather Summers	Marisa Varond	Stacey Annand
Carl Antonio	Jaime Tate-Symons	Marissa Wolf	Stacey Musso
Carmen Pat	James Trout	Martin Dare	Sten Walker
Carole Steele	Jamie Pellegrino	Megan Hoff	Stephanie Escobar
Celeste Hunter	Janet Cacho	Melanie Morones	Stephanie Gioia-Beckman
Charisma De Los Reyes	Janette Magsanoc	Melissa Penaflor	Steven Wong
Cheryl Rode	Janice Lapointe	Melizza Welton	Susana Antonio
Christina Bruce	Jazmin Wali	Michael Miller	Tais Millsap
Christine Davies	Jean McDonald	Minola Clark Manson	Tito Escalante
Christine Frey	Jennifer Kennedy	Natalie Elms	Tom Coleman
Christine Maggio	Jerelyn Bourdage	Nubia Soto	Wendy Maramba
Christine Tham	Jessica Luckey	Patrick Samayoa	Yael Koenig
Claire Riley	Julie McPherson	Pradeep Gidwani	Yuka Sakamoto
Claudette Allen Butler	Kacie Rodvill	Rafael Ortiz-Gomez	Yvette Leiva
Danyte Mockus-Valenzuela	Kathleen Lang	Rebecca Raymond	Zachary Guzik
Darwin Espejo	Kelly Bordman	Rhonda Crowder	Unknown Caller
Debra Schade	Kelly Motadel	Robert Dean	Unknown Caller
Debbie Dennison	Kimberley Saelens	Roberto Suarez	

Committees/Sectors/Workgroups Meetings Information:

Due to COVID-19, most of the committees' meetings are occurring virtually
Please reach out to the sector lead or Executive committee 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 a.m.to noon

Education Advisory Ad Hoc: Meets as Needed

TAY Council: Meets the fourth Wednesday of the month 3 to 4:30 p.m.

CYF CADRE: Meets quarterly on the second Thursday of the month from 1:30 to 3 p.m.

CYF System of Care Training Academy: Meets on the first Wednesday of the month from 9 to 10 a.m.

CCRT: Meets the first Friday of the month from 10 to 11:30 a.m.

Private Sector: Ad Hoc/Meets as needed.



COUNTY OF SAN DIEGO

AGENDA ITEM

BOARD OF SUPERVISORS

NORA VARGAS
First District

JOEL ANDERSON
Second District

TERRA LAWSON-REMER
Third District

NATHAN FLETCHER
Fourth District

JIM DESMOND
Fifth District

DATE: December 13, 2022

28

TO: Board of Supervisors

SUBJECT

RECEIVE UPDATE ON DECLARING ILLICIT FENTANYL A PUBLIC HEALTH CRISIS; ADD STAFF YEARS; APPROVE USE OF AMERICAN RESCUE PLAN FUNDING; AND AUTHORIZE APPLICATION FOR FUTURE FUNDING OPPORTUNITIES (DISTRICTS: ALL)

OVERVIEW

Overdose deaths continue to rise, both nationally and locally, with illicit fentanyl contributing to a large proportion of these deaths. On June 28, 2022 (22), the San Diego County Board of Supervisors (Board) voted to declare illicit fentanyl a public health crisis and directed the Chief Administrative Officer to work with the County of San Diego (County) Health and Human Services Agency Director to:

- Develop recommendations and an implementation plan to address illicit fentanyl as a public health crisis and return to the Board of Supervisors within 180 days with an update.
- Explore and research funding to be used to support a comprehensive approach to fentanyl misuse prevention and harm reduction efforts, including local efforts to check the local drug supply for the presence of fentanyl and reduce its availability.

Today's update provides a report back on this direction with a request to implement a client-centered, data-driven, public health-oriented approach to service delivery and policy with recommendations adopted from the Centers for Disease Control and Prevention Health Alert Network Advisory distributed on December 17, 2020, to address the increase in fatal overdoses driven by synthetic opioids. Also, included is an update in response to the October 11, 2022 (11) Board direction calling for additional harm reduction funding for naloxone distribution and training, as well as funding to support implementation of fentanyl awareness in schools. To advance these efforts, today's action seeks approval to utilize American Rescue Plan Act funds.

In addition to these actions, addressing the local fentanyl crisis is supported by additional activities including: advancing strategies aimed at reducing opioid misuse utilizing Overdose Data to Action (OD2A) grant funding from the Centers for Disease Control and Prevention, continuous actions from the County's Population Health Steering Committee to advance the County's Harm Reduction Strategy, approval to accelerate spending of Substance Use Block Grant funding, and contributing to strategic planning of the Opioid Settlement Framework.

SUBJECT: RECEIVE UPDATE ON DECLARING ILLICIT FENTANYL A PUBLIC HEALTH CRISIS; ADD STAFF YEARS; APPROVE USE OF AMERICAN RESCUE PLAN FUNDING; AND AUTHORIZE APPLICATION FOR FUTURE FUNDING OPPORTUNITIES (DISTRICTS: ALL)

This item supports the County's vision of a just, sustainable, and resilient future for all, specifically those communities and populations in San Diego County that have been historically left behind, as well as the ongoing commitment to the regional *Live Well San Diego* vision of healthy, safe, and thriving communities. Additionally, all recommended actions in the implementation plan align with the County's Comprehensive Harm Reduction Strategy approved by the Board on June 8, 2021 (4) and include the application of evidenced-based approaches aimed at mitigating the risk of overdose and facilitating access to effective harm reduction interventions and treatment.

RECOMMENDATION(S)

CHIEF ADMINISTRATIVE OFFICER

1. Receive an update on Declaring Illicit Fentanyl a Public Health Crisis, inclusive of recommendations and an implementation plan to address the unprecedented increase in fentanyl-related overdoses.
2. Approve and authorize the Health and Human Services Agency, Behavioral Health Services to add four (4.00) staff years to develop and disseminate strategic overdose prevention education and public health messaging in response to the fentanyl public health crisis and opioid misuse and direct the Department of Human Resources to classify the positions at the appropriate level.
3. Approve and authorize the Public Safety Group, County Fire, Emergency Medical Services to add two (2.00) staff years to develop and oversee countywide integration of an Overdose Mapping and Application Program, a software that will capture date, time, and location of overdoses through already established first responder data to support the Local Emergency Medical Services Information System (LEMSIS) in tracking and analyzing potential opioid overdoses in the community, and to implement, support, and track the Emergency Medical Services Leave Behind Naloxone program and other future prehospital opioid mitigation initiatives, and direct the Department of Human Resources to classify the positions at the appropriate level.
4. Approve and authorize the Health and Human Services Agency, Public Health Services and Behavioral Health Services to add fourteen (14.00) staff years to conduct overdose surveillance, investigation, response, evaluation, and administration in response to the fentanyl public health crisis and the broader response related to opioid misuse in alignment with the County's Comprehensive Harm Reduction Strategy, and direct the Department of Human Resources to classify the positions at the appropriate level.
5. Approve the use of \$4.8 million of American Rescue Plan Act (ARPA) funding for Fiscal Years 2022-23 through 2024-25 to support response efforts tied to the fourteen (14.00) staff years included in Recommendation 4, related to the fentanyl public health crisis and the broader response related to opioid misuse. ARPA funding will be redirected from the COVID-19 Response portion of the ARPA Framework based on projected spending in tracing and testing activities in alignment with current need and demobilization plans.
6. Authorize the Agency Director, Health and Human Services Agency or designee, to apply for future funding opportunities to support overdose prevention and response resources.

SUBJECT: RECEIVE UPDATE ON DECLARING ILLICIT FENTANYL A PUBLIC HEALTH CRISIS; ADD STAFF YEARS; APPROVE USE OF AMERICAN RESCUE PLAN FUNDING; AND AUTHORIZE APPLICATION FOR FUTURE FUNDING OPPORTUNITIES (DISTRICTS: ALL)

EQUITY IMPACT STATEMENT

The County of San Diego (County) is committed to ensuring a just, sustainable, and resilient future for all as well as ensuring its diverse communities are healthy, safe, and thriving. Every San Diegan experiences the world differently and has unique circumstances and opportunities that can impact health, lifestyle behaviors, and overall well-being, leading to differences in health outcomes, or health inequities. These health disparities exist among our communities, including when it comes to overdose due to fentanyl. Fentanyl can impact anyone regardless of age, race/ethnicity, gender, or socioeconomic background; however, according to data collected by the County's Medical Examiner Office and the San Diego Association of Governments, those between the ages of 18-45 years old, as well as Black/African American residents, are disproportionately impacted by fentanyl overdose compared to others. Although White residents account for the majority of fentanyl overdose deaths, Black/African American residents experienced the highest mortality rate in 2021, a 1,143% increase from 2017. Fentanyl has become the leading cause of death among individuals ages 18-45 years old.

Additionally, to advance the County's vision of a just, sustainable, and resilient future for all, confronting this public health crisis and addressing existing inequities remains among the highest priorities. The Department of Human Resources is committed to assuring that equity is considered in the classification and compensation review work. Today's recommendations will assist the County of San Diego to provide and retain a skilled, adaptable, and diverse workforce for County departments and enables the County to provide equitable services to all constituents of this county.

SUSTAINABILITY IMPACT STATEMENT

Today's actions are supportive of the County of San Diego's (County) Sustainability Goal #2 to provide just and equitable access to County services by enhancing the County's overdose data and surveillance infrastructure, allowing the County to more nimbly respond to regional overdose spikes with appropriately disbursed regional prevention efforts. Additionally, the County is ensuring naloxone vending machines are distributed countywide with site placement determined by overdose data and in consultation with community organizations that serve those at high risk for overdose.

Today's actions also support Sustainability Goal #4 to protect the health and well-being of everyone in the region, by making a concentrated effort to reach those most at risk of overdose in all activities, specifically through overdose prevention education efforts that increase the public's awareness of changes in the illicit drug supply, risk for overdose, and risk reduction strategies.

FISCAL IMPACT

Recommendations 1 and 6: Receive an Update on Declaring Illicit Fentanyl a Public Health Crisis and Authorize the Agency Director to Apply for Future Funding Opportunities

These recommendations have no fiscal impact. There will be no change in net General Fund cost and no additional staff years.

SUBJECT: RECEIVE UPDATE ON DECLARING ILLICIT FENTANYL A PUBLIC HEALTH CRISIS; ADD STAFF YEARS; APPROVE USE OF AMERICAN RESCUE PLAN FUNDING; AND AUTHORIZE APPLICATION FOR FUTURE FUNDING OPPORTUNITIES (DISTRICTS: ALL)

Recommendation 2: Approve and Authorize the Health and Human Services Agency, Behavioral Health Services to Add Four (4.00) Staff Years to Develop and Implement Overdose Prevention Education and Public Health Messaging

Funds for this request are included in the Fiscal Year (FY) 2022-24 Operational Plan in the Health and Human Services Agency. If approved, this action will result in estimated costs and revenue of \$0.3 million in FY 2022-23 and \$0.6 million in FY 2023-24, which will be covered by existing appropriations. The funding source will be Opioid Settlement funds. Behavioral Health Services will pursue additional funding opportunities to sustain ongoing costs, including grants and federal and State allocations, should they become available. There will be no change in net General Fund cost and an increase of 4.0 additional staff years.

Recommendation 3: Approve and Authorize the Public Safety Group, County Fire, Emergency Medical Services to Add Two (2.00) Staff Years for Countywide Integration of an Overdose Mapping Application and the EMS Leave Behind Naloxone Program

Funds for this request are included in the FY 2022-24 Operational Plan for San Diego County Fire, Emergency Medical Services. If approved, this action will result in estimated costs and revenue of \$0.2 million in FY 2022-23 and \$0.3 million in FY 2023-24, which will be covered by existing appropriations. The funding source will be Opioid Settlement funds. There will be no change in net General Fund cost and an increase of 2.0 additional staff years.

Recommendation 4 and 5: Approve and Authorize the Health and Human Services Agency, Public Health Services and Behavioral Health Services to Add Fourteen (14.00) Staff Years to Conduct Overdose Surveillance, Investigation, Response, Evaluation, and Administration, and Approve the Use of the American Rescue Plan Act Funding

Funds for this request are included in the FY 2022-24 Operational Plan in the Health and Human Services Agency. If approved, this action will result in estimated costs and revenue of \$1.1 million in FY 2022-23 and \$2.2 million in FY 2023-24, which will be covered by existing appropriations. The funding source will be American Rescue Plan Act funding and Overdose Data to Action grant funds initially, and potentially Opioid Settlement funds and ongoing grant funds as they become available. The departments will pursue additional funding opportunities to sustain ongoing costs, including grants and federal and State allocations, should they become available. There will be no change in net General Fund cost and an increase of 14.0 additional staff years.

BUSINESS IMPACT STATEMENT

N/A

ADVISORY BOARD STATEMENT

At their respective meetings on November 1 and November 3, 2022, the Health Services Advisory Board and the Behavioral Health Advisory Board voted to recommend approval of these recommendations.

BACKGROUND

The current drug overdose crisis is multifaceted and has evolved beyond prescription opioids; illicit opioids, largely driven by fentanyl and its analogues, have become key contributors.

SUBJECT: RECEIVE UPDATE ON DECLARING ILLICIT FENTANYL A PUBLIC HEALTH CRISIS; ADD STAFF YEARS; APPROVE USE OF AMERICAN RESCUE PLAN FUNDING; AND AUTHORIZE APPLICATION FOR FUTURE FUNDING OPPORTUNITIES (DISTRICTS: ALL)

Provisional data from the Center for Disease Control and Prevention (CDC) National Center for Health Statistics indicate there were an estimated 107,622 drug overdose deaths in the United States during 2021, an increase of nearly 15% from the 93,655 deaths estimated in 2020. Additionally, the CDC reports that overdose deaths from synthetic opioids (primarily fentanyl), psychostimulants such as methamphetamine, and cocaine continued to increase in 2021 compared to 2020. Furthermore, data from the CDC shows that accidental deaths caused by fentanyl are the number one killer of people between the ages of 18 and 45 years, far exceeding the number of deaths caused by car accidents, COVID-19, heart disease, and gun violence within this age group. Based on preliminary 2021 data from the County of San Diego's Medical Examiner Office, from 2016 to 2021 the rate of death among San Diego residents due to all drug overdoses increased significantly by 132%, largely driven by the increase in fentanyl overdoses. From 2019 to 2021 alone, there was a 418% increase in the rate of accidental fentanyl overdose deaths. In 2021, opioids accounted for 71% of all drug overdose deaths, with 743 of the 822 opioid deaths involving fentanyl. This number continues to rise as pending cases are closed.

In an action brought forward in partnership with the District Attorney on June 28, 2022 (22), the San Diego County Board of Supervisors (Board) voted to support the declaration of illicit fentanyl as a public health crisis. The Board further directed the Chief Administrative Officer to work with the County of San Diego (County) Health and Human Services Agency (HHSA) Director to:

- Develop recommendations and an implementation plan to address illicit fentanyl as a public health crisis and return to the Board within 180 days with an update.
- Explore and research funding to be used to support a comprehensive approach to fentanyl misuse prevention and harm reduction efforts, including local efforts to check the local drug supply for the presence of fentanyl and reduce its availability.

Following this direction, high-level recommendations, and an implementation plan were created to address the unprecedented increase in fentanyl-related overdoses. The Strategies described below are included on Attachment A, with clear Objectives, Activities, and an estimated timeline for implementation. With the approval of the additional positions recommended, HHSA will create an Overdose Unit. This team will make up a new, multi-departmental unit housed in both Public Health Services and Behavioral Health Services, focused on overdose surveillance, investigation, response, and community engagement/partnerships, in order to efficiently respond to the strategies below.

Strategy A: Conduct Overdose Prevention Education

Education is prevention. Leveraging opportunities to increase awareness about the prevalence and dangers of illicit fentanyl and the availability of naloxone particularly for people who use drugs is crucial in preventing overdose. Prevention efforts that offer education and provide tailored messaging to high-risk groups help people make informed decisions, get the help they need, and ultimately reduce the risk of overdose. Additionally, academic detailing and trainings that aim to improve opioid prescribing, inform clinical practice, and protect patients at risk support providers in delivering better care that can result in improved outcomes for patients.

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Overdose Data to Action (OD2A) is a CDC grant initiative that supports jurisdictions in collecting high quality, comprehensive, and timely data on nonfatal and fatal overdoses, and funds prevention and response efforts informed by this data. HHSA is one of the recipients of the OD2A grant awarded by the CDC and in September 2019, the County launched the multiyear OD2A initiative focusing on strategies and activities aimed at reducing opioid misuse and opioid use disorder and increasing access to evidence-based treatment. Efforts to advance overdose prevention education have been the focus of OD2A strategies, specifically *OD2A Strategy 4: Prescription Drug Monitoring Program* and *OD2A Strategy 5: Integration of Local and State Prevention and Response Effort*. Activities under both OD2A strategies have led the County's efforts to provide education and training related to overdose risk and prevention and include provider and community education and outreach efforts, curriculum development, and targeted academic detailing. Academic detailing is the process of conducting outreach to physicians and other licensed health care professionals to provide evidence-based information regarding medications and other treatment-related decisions with the goal of improving health care outcomes.

As outlined in Attachment A, Objective A1 within Strategy A prioritizes efforts that increase awareness about the changing illicit drug supply, risks for overdose, and risk reduction strategies, particularly among people who use drugs. By leveraging existing OD2A funding and overdose prevention activities, these efforts will seek to build upon existing messaging to further educate and inform on the dangers of fentanyl. Education efforts will also include information regarding naloxone access and training.

In an action brought forward in partnership with the District Attorney on October 11, 2022 (11), the Board approved recommendations to enhance fentanyl education and strengthen harm reduction efforts for youth, with direction to report-back within 90 days. The intent is to facilitate community awareness and education efforts for youth, parents and community coalitions related to substance misuse prevention including illicit fentanyl and overdose death prevention.

The following actions demonstrate current strategies with existing funding streams that were redirected to enhance naloxone distribution and training efforts, support implementation of fentanyl awareness in schools, and promote outreach events:

- The County's Naloxone Distribution Program conducts outreach through ongoing education and training for youth and families, school nurses, and counselors, with focused attention on youth in treatment.
- Substance Abuse Prevention and Treatment Block Grant American Rescue Plan Act (ARPA) activities in San Diego County are countywide and are mainly directed at reducing substance use disorder related problems experienced by youth between 12 and 25 years of age, including sub-groups of adolescents considered to be at high risk for experiencing such problems. Using these funds, the following education and training activities will be conducted:
 - Implementation of a Substance Use Prevention and Life Skills curriculum for students in grades six and seven. The curriculum is evidence-based (Project Alert) and includes illicit fentanyl prevention messaging. Through a contract with the San Diego County Office of

SUBJECT: RECEIVE UPDATE ON DECLARING ILLICIT FENTANYL A PUBLIC HEALTH CRISIS; ADD STAFF YEARS; APPROVE USE OF AMERICAN RESCUE PLAN FUNDING; AND AUTHORIZE APPLICATION FOR FUTURE FUNDING OPPORTUNITIES (DISTRICTS: ALL)

Education, services will include the adaptation of the Project Alert curriculum, which currently targets grades seven and eight, to include specific content for grade six.

- Youth-led conversations focused on substance misuse prevention, including illicit fentanyl at schools.
- Regional, community-based fentanyl presentations and naloxone training events for parents and community coalitions.
- Harm reduction presentations and exhibitor booths, including educational sessions on illicit fentanyl and naloxone trainings at the 2022 Live Well Advance.
- Purchase of intranasal naloxone of which a portion will be allocated to the above-mentioned community-based education and training sessions.
- In addition, OD2A-funded efforts under *OD2A Strategy 5: Integration of Local and State Prevention and Response Effort* have included the creation and dissemination of educational materials to increase awareness and education about opioids and fentanyl for youth and parents. Building upon these efforts, ongoing dissemination of resource materials aimed at increasing awareness among parents and youth regarding naloxone and illicit fentanyl will be supported.
- Additional funding to further expand and support ongoing education and naloxone training is being explored, in parallel with the strategic planning of the Opioid Settlement Framework approved by the Board on October 25, 2022 (20).

To further build on existing overdose prevention education strategies, today's action requests authority to add 4.0 staff years within the County's Behavioral Health Services department to enhance community engagement and development and implementation of overdose prevention education activities and public health messaging around the dangers of fentanyl and other opioids.

Strategy B: Expand Naloxone Distribution Program

Naloxone Vending Machines

Naloxone, commonly known by the brand name Narcan[®], is a life-saving medication that reverses the effect of an opioid overdose, allowing an individual's normal breathing to be restored. Administration by laypeople began as early as the 1990s and has become increasingly widespread since then.

Research has demonstrated that broad community distribution of naloxone is associated with a reduction in overdose deaths. Coupled with training, naloxone distribution helps ensure those who are using substances and those who are likely to witness an overdose (e.g., family, friends) carry and administer this life-saving medication. To better equip communities to respond to the increasing rise in overdoses, naloxone distribution efforts must aim to saturate the community by establishing mechanisms for easy access to naloxone.

Following the Board's approval on December 7, 2021 (22) authorizing the award of a competitive solicitation for naloxone distribution services, a contract establishing the expansion of the County's naloxone distribution program was executed on July 1, 2022. This newly executed contract sets forth the goal to saturate the community with naloxone through targeted outreach and training efforts, partnerships with community-based programs and the implementation of naloxone

SUBJECT: RECEIVE UPDATE ON DECLARING ILLICIT FENTANYL A PUBLIC HEALTH CRISIS; ADD STAFF YEARS; APPROVE USE OF AMERICAN RESCUE PLAN FUNDING; AND AUTHORIZE APPLICATION FOR FUTURE FUNDING OPPORTUNITIES (DISTRICTS: ALL)

vending machines. Currently, the naloxone distribution program contract includes efforts to purchase and place 12 naloxone vending machines throughout San Diego County. Plans for the purchase and placement of vending machines throughout the county are underway, with the first one to be placed at McAlister Institute South Bay Regional Recovery Center in Chula Vista by December 31, 2022. The program will use overdose data and consultation with community organizations that serve those at high risk for overdose, to inform other specific sites for vending machine site placement.

Community interest and support for the placement of naloxone vending machines has been great, prompting recent discussions with providers who serve high-risk populations interested in hosting vending machines. As outlined in Attachment A, Objective B1 within Strategy B recommends increasing the number of naloxone vending machines to be placed throughout San Diego County beyond the initial 12. This proposed expansion of vending machines seeks to encourage more individuals to carry naloxone, including family, friends, community members, and those who are personally at risk for overdose by increasing points of community access for naloxone. Ensuring easy and widespread access to naloxone will promote and normalize this life-saving medication.

Prior to accessing naloxone through a vending machine, individuals will need to complete a one-time online registration and training which can be done at home or on a mobile device (vending machines will have information pointing to this step). Upon completion, a pin number will be provided that will allow naloxone to be dispensed at any County-sponsored vending machine at no cost. The registration information gathered will provide valuable initial data (e.g., basic demographics, intentions for use, etc.) and ongoing data regarding usage unique to the individual pin number. This data will help inform patterns of distribution, and coupled with overdose surveillance data, can inform ongoing response efforts, including where focused outreach is needed, placement of additional vending machines, and other key strategies needed.

Emergency Medical Services Leave Behind Naloxone Programs

Research shows overdose survivors face a significantly increased risk of fatally overdosing in the future. First responders are uniquely positioned to interrupt the cycle of nonfatal-to-fatal opioid overdose by increasing distribution of overdose prevention resources to patients in real time. Leave Behind Naloxone is a collaboration between the public health system and public safety that allows Emergency Medical Service (EMS) personnel to leave layperson naloxone and education on-scene with patients and their support systems, providing directly to those who need it the most. By distributing these kits, EMS can save lives beyond the patient care given in the moment of an overdose.

On November 10, 2020, the County of San Diego EMS Office developed a partnership with the Department of Health Care Services (DHCS) Naloxone Distribution Project. Through this program, San Diego County paramedic agencies are authorized to implement a local Leave Behind Naloxone Program. The Naloxone Distribution Project is funded by the Substance Abuse Mental Health Services Administration and administered by DHCS to address the opioid crisis and reduce overdose deaths through the provision of free naloxone in its nasal spray formulation. The DHCS program provides naloxone at no cost to EMS agencies for the Leave Behind Naloxone Program.

SUBJECT: RECEIVE UPDATE ON DECLARING ILLICIT FENTANYL A PUBLIC HEALTH CRISIS; ADD STAFF YEARS; APPROVE USE OF AMERICAN RESCUE PLAN FUNDING; AND AUTHORIZE APPLICATION FOR FUTURE FUNDING OPPORTUNITIES (DISTRICTS: ALL)

Though the Leave Behind Naloxone Program is an optional initiative, as paramedic agencies are not mandated to participate, efforts to engage paramedic agencies in participating offers increased opportunities to save lives beyond the patient care given in the moment of an overdose. For this reason, Objective B2 within Strategy B recommends expanding Leave Behind Naloxone Programs throughout San Diego County through efforts that aim to promote and encourage widespread paramedic agencies' participation.

Today's action requests authority to add 1.0 staff year to San Diego County Fire, Emergency Medical Services to implement, support, and track the EMS Leave Behind Naloxone program and other future prehospital opioid mitigation initiatives.

Strategy C: Intervene Early with Individuals at Highest Risk for Overdose

Most opioid overdoses are accidental and can happen anywhere, anytime, and to anyone. However, certain individuals are at higher risk of experiencing an opioid overdose. These individuals include people who use drugs who have had a recent non-fatal overdose, have had an extended period of abstinence, use opioids in combination with other substances (e.g., alcohol, other drugs, medicines that suppress respiratory function, such as benzodiazepines, barbiturates, anesthetics, or some pain medications), have comorbidities (e.g., HIV, liver, or lung disease), and mental health conditions. Those at greatest risk often lack access to prevent overdose resources and treatment. For this reason, interventions that focus on client engagement and support linkage to services, such as social support networks and culturally specific recovery supports, are vital in preventing opioid overdoses and maintaining substance use recovery.

Current efforts to ensure individuals who have recently experienced a non-fatal overdose are connected to care are being driven by *OD2A Strategy 6: Establishing Linkages to Care* activities. These activities have focused on identifying processes for integrating care services into emergency rooms for individuals who experience a non-fatal overdose. Building upon this preliminary linkage to care work, Objective C1 within Strategy C recommends the development of a peer specialist service model that offers outreach and engagement to individuals who recently experienced a non-fatal overdose. Services will emphasize engagement strategies and focus on developing an individualized overdose response plan, naloxone training, and exploring strategies for reducing the risk of another overdose (for example, by avoiding mixing opioids with other substances and understanding changes in tolerance to opioids). Additionally, program efforts may also include warm handoffs to Syringe Services Programs (SSPs) or other health or social support services. Using this peer model, specialists will facilitate opportunities to foster ongoing relationships that are respectful, collaborative, and cement the connections between people who use drugs and the services that can help them survive and thrive.

Strategy D: Improve Detection of Overdose Outbreaks to Facilitate More Effective Response
Expansion of Overdose Data and Surveillance Infrastructure

Identification of overdose outbreaks and cluster events (including those involving fentanyl) can facilitate an effective community response. This is dependent on having a robust surveillance system and data infrastructure to capture a comprehensive and timely picture of drug trends in the community. As outlined in Attachment A, Objective D1 within Strategy D recommends

SUBJECT: RECEIVE UPDATE ON DECLARING ILLICIT FENTANYL A PUBLIC HEALTH CRISIS; ADD STAFF YEARS; APPROVE USE OF AMERICAN RESCUE PLAN FUNDING; AND AUTHORIZE APPLICATION FOR FUTURE FUNDING OPPORTUNITIES (DISTRICTS: ALL)

establishing a 1.0 staff year to serve as a liaison to facilitate and support countywide integration and use of an Overdose Mapping and Application Program (ODMAP) – an existing software tool that will capture date, time, and location of overdoses through already established first responder data, while maintaining patient confidentiality. Additionally, this Full Time Equivalent staff will have access to the Local Emergency Medical Information System (LEMSIS), a data source that can offer more detailed information on potential opioid overdoses.

Adding these resources would help to advance the existing OD2A surveillance efforts supported by *OD2A Strategy 3: Innovative Surveillance* activities, which aim to develop new and innovative ways to collect and report data on drug use or overdose to better inform community needs and responses. Furthermore, the addition of dedicated staff with specialized expertise could allow for real-time analysis and rapid response to potential drug-related outbreaks. Today's action requests:

- Authority to add 1.0 staff year to San Diego County Fire, Emergency Medical Services to support countywide integration and use of ODMAP and LEMSIS; and,
- Authority to add 14.0 staff years within HHSA BHS and PHS to conduct opioid surveillance, investigation, response, evaluation, and administration in response to the fentanyl public health crisis and the broader response related to overdose in alignment with the County's Comprehensive Harm Reduction Strategy.

Implementation of Drug Checking Services

An additional facet of this work is to increase access to drug checking services (also known as pill testing or adulterant screening), particularly through harm reduction organizations, that allows people who use drugs to help identify the substance they intend to take and therefore prevent harms associated with consuming an unknown substance. Drug checking services are often offered alongside other harm reduction services, such as naloxone distribution and SSPs. There are several technologies that can be employed in the provision of this service, including fentanyl test strips and the use of Fourier-transform Infrared (FTIR) technology that uses light to measure how much of the beam is absorbed by the sample. Using such technology to identify the substance an individual intends to take can encourage safer use, potentially increasing the likelihood of people discarding a substance if hazardous chemicals are present or reduce how much an individual uses if the sample contains substances of increased potency. FTIR technology can also serve as a population health tool to monitor the unregulated drug market, track trends, and allow for early detection and warning systems of harmful substances.

On August 29, 2022, Assembly Bill 1598, was signed by Governor Newsom and Chaptered into law. The new law which takes effect January 1, 2023, amends Sections 11014.5 and 11364.5 of the Health and Safety Code, relating to controlled substances, allowing entities outside of SSPs to distribute drug checking tools, such as fentanyl test strips or any other “testing equipment that is designed, marketed, used, or intended to be used to analyze a substance for the presence of fentanyl, ketamine, gamma hydroxybutyric acid, or any analog of fentanyl.” Currently, *OD2A Strategy 5: Integration of Local and State Prevention and Response Efforts* deliverables include the distribution of fentanyl test strips via the naloxone distribution contract and through SSP activities.

SUBJECT: RECEIVE UPDATE ON DECLARING ILLICIT FENTANYL A PUBLIC HEALTH CRISIS; ADD STAFF YEARS; APPROVE USE OF AMERICAN RESCUE PLAN FUNDING; AND AUTHORIZE APPLICATION FOR FUTURE FUNDING OPPORTUNITIES (DISTRICTS: ALL)

The passing of this bill presents the opportunity to explore and develop drug checking services which include distribution of fentanyl test strips and the application of FTIR technology in combination with other harm reduction services. SSPs are often a core support system for those at high risk for overdose, and thus well positioned to offer drug checking. Therefore, Objective D2 in Strategy D specifically recommends integrating drug checking services into the existing regional SSP planning work, including fentanyl test strip distribution, and potentially FTIR technology. These services would support not only overdose risk mitigation, but also behavior changes among people who use drugs, and possibly offer information on drug supply trends on the population level.

LINKAGE TO THE COUNTY OF SAN DIEGO STRATEGIC PLAN

Today's proposed action supports the County of San Diego's 2022-2027 Strategic Plan initiatives of Equity (Health) and Community (Quality of Life) as well as the regional *Live Well San Diego* vision, by transforming care to support people who misuse substances through strategic partnerships and implementation of data-driven and evidence-based harm reduction strategies.

Respectfully submitted,

A handwritten signature in black ink, appearing to read "H. Robbins-Meyer", with a stylized flourish at the end.

HELEN N. ROBBINS-MEYER
Chief Administrative Officer

ATTACHMENT(S)

ATTACHMENT A – COUNTY OF SAN DIEGO RECOMMENDED STRATEGIES TO ADDRESS ILLICIT FENTANYL AS A PUBLIC HEALTH CRISIS

Item #28: Receive Update on Declaring Illicit Fentanyl a Public Health Crisis; Add Staff Years; And Authorize Application for Future Funding Opportunities

Nick Macchione, Agency Director, Health and Human Services Agency
 Wilma Wooten, MD, MPH, Public Health Officer, Public Health Services
 Luke Bergmann, PhD, Director, Behavioral Health Services
 Cameron Kaiser, MD, MPH, Deputy Public Health Officer, Public Health Services
 Nicole Esposito, MD, Chief Population Health Officer, Behavioral Health Services

December 13, 2022

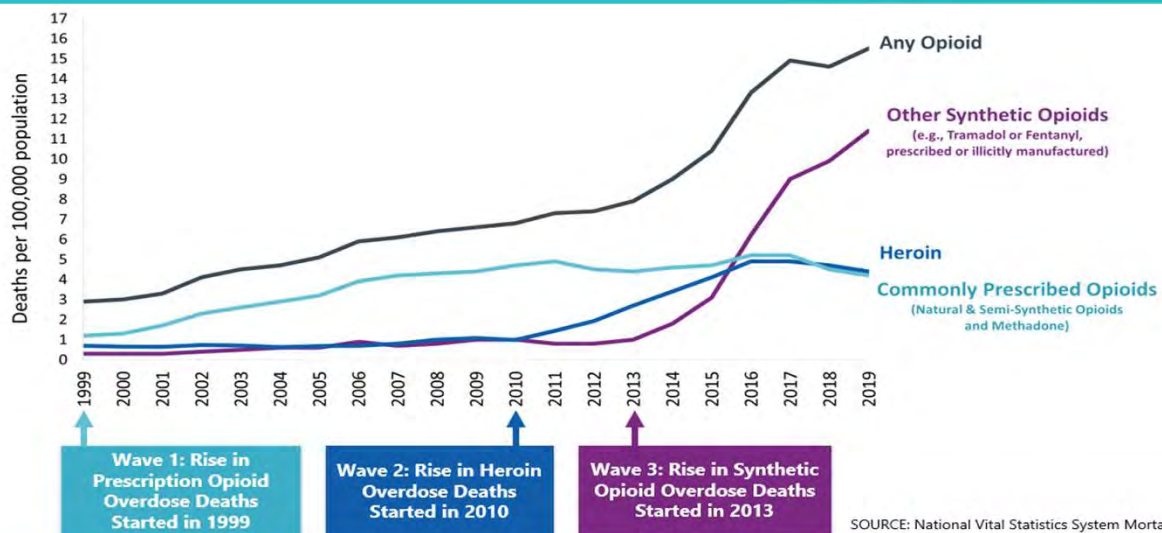


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Opioid Overdose Waves 1999-2019



LIVE WELL
SAN DIEGO



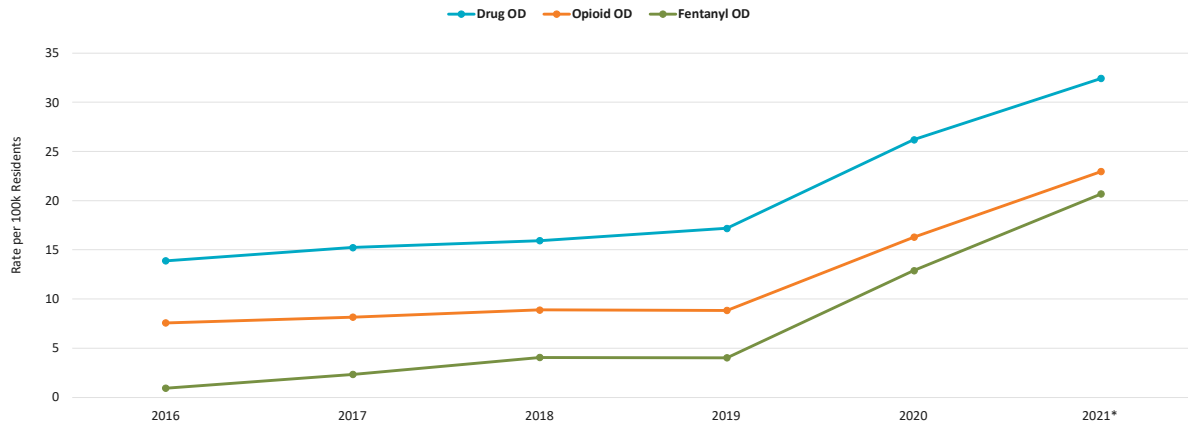
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Trend in Drug Overdose Death Rates 2016 - 2021



LIVE WELL
SAN DIEGO

DRUG OVERDOSE DEATH RATES AMONG SAN DIEGO COUNTY RESIDENTS, 2016-2021*



Includes accidental, acute poisonings where drugs, opioids, or fentanyl was a causative factor in death. Excludes deaths due to natural causes.

*2021 death data are preliminary - rates may change when pending cases are resolved.

NOTE: Rates and counts are suppressed for <5 deaths and include resident deaths that occurred within San Diego County only. See ME disclaimer for more information.

Source: County of San Diego, Department of the Medical Examiner (v. 6/2022); SANDAG 2020 Population Estimate (v. 9/2/2021)

Prepared by: County of San Diego, Behavioral Health Services, Clinical Director's Office, Population Health Unit. Date: 11/2022

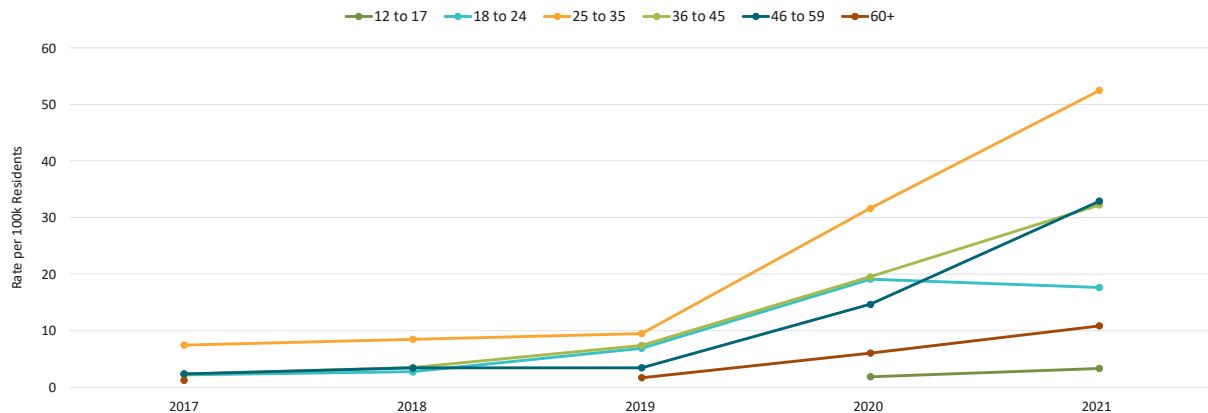
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Fentanyl Deaths by Age



LIVE WELL
SAN DIEGO

FENTANYL OVERDOSE DEATH RATES AMONG SAN DIEGO COUNTY RESIDENTS BY AGE GROUPS, 2017-2021



Includes accidental, acute poisonings where fentanyl was a causative factor in death. Excludes deaths due to natural causes.

*2021 death data are preliminary - rates may change when pending cases are resolved.

NOTE: Rates and counts are suppressed for <5 deaths. Counts include all deaths occurring in San Diego County regardless of residence, whereas rates are inclusive of SD County residents only. See ME disclaimer for more information.

Source: County of San Diego, Department of the Medical Examiner (v. 10/2022); SANDAG 2020 Population Estimate (v. 9/2/2021)

Prepared by: County of San Diego, Behavioral Health Services, Clinical Director's Office, Population Health Unit. Date: 11/2022

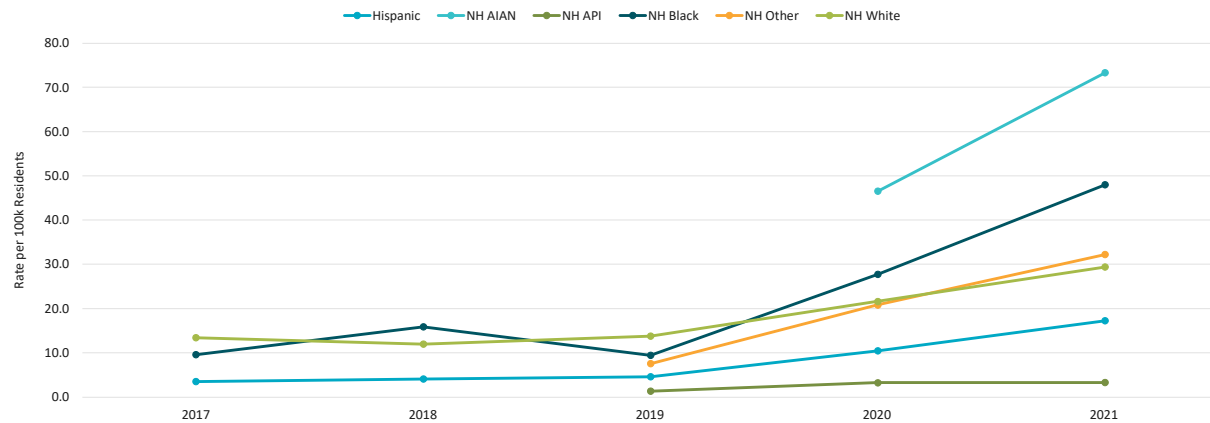
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Fentanyl Deaths by Race/Ethnicity



LIVE WELL
SAN DIEGO

OPIOID OVERDOSE DEATHS AMONG SAN DIEGO COUNTY RESIDENTS BY RACE/ETHNICITY, 2017-2021



Includes accidental, acute poisonings where any opioid (incl. fentanyl) was a causative factor in death. Excludes deaths due to natural causes.

*2021 death data are preliminary - rates may change when pending cases are resolved.

NOTE: Rates and counts are suppressed for <5 deaths. Counts include all deaths occurring in San Diego County regardless of residence, whereas rates are inclusive of SD County residents for more information.

Source: County of San Diego, Department of the Medical Examiner (v. 10/2022); SANDAG 2020 Population Estimate (v. 9/2/2021)

Prepared by: County of San Diego, Behavioral Health Services, Clinical Director's Office, Population Health Unit. Date: 11/2022

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Actions to Addressing the Local Illicit Fentanyl Crisis

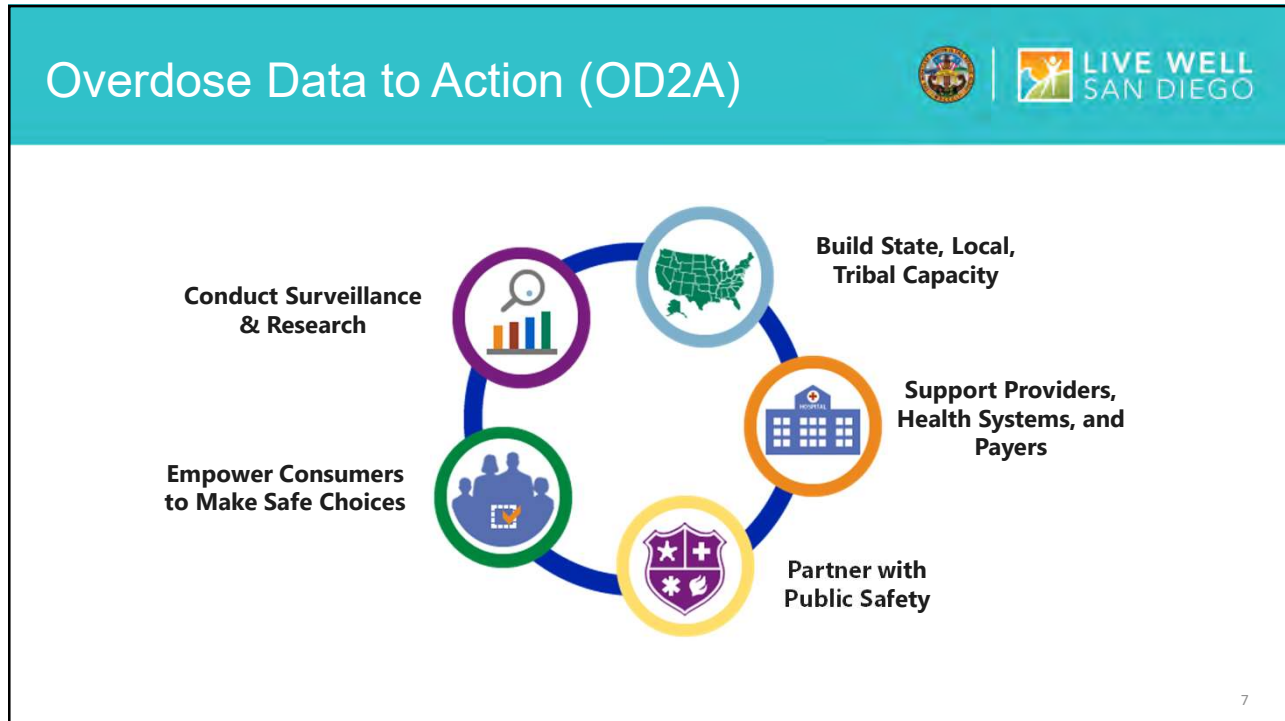


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SAN DIEGO

- Overdose Data to Action (OD2A)
- Opioid Settlement Framework
- Population Health Steering Committee
 - County of San Diego Harm Reduction Strategy



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Opioid Settlement Framework

Addressing the fentanyl crisis through education and outreach, harm reduction, and treatment

Charting the Course
Opioid Settlement Planning, Engagement Summary and Op Utilizing Funds
SUMMARY REPORT
October 2022

Background: Understanding the Opioid Landscape

Aligning Efforts and Opportunities: Proposed Structure for Allocating Funds

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Population Health Steering Committee



LIVE WELL
SAN DIEGO



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Illicit Fentanyl Crisis Strategies



LIVE WELL
SAN DIEGO

Strategy A: Conduct Overdose Prevention Education

Strategy B: Expand Naloxone Distribution Program

Strategy C: Intervene Early with Individuals at Highest Risk for Overdose

Strategy D: Improve Detection of Overdose Outbreaks to Facilitate More Effective Response

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Overdose Prevention Messaging and Education



Strategy A: Conduct Overdose Prevention Education

- *Increase awareness through messaging about the changing illicit drug supply, risk for overdose, and risk reduction strategies*
- 2021 illicit fentanyl awareness campaign with nearly 1 million impressions
- SABG funded community awareness and education efforts for youth, parents and community coalitions



Billboard ad from 2021 fentanyl awareness campaign

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Expanding Naloxone Distribution



Strategy B: Expand Naloxone Distribution Program

- *Increase the number of naloxone vending machines placed throughout the County*
- *Expand Emergency Medical Services Naloxone leave behind programs*
- Engagement with colleges and universities
- Purchase and placement of 12 naloxone vending machines throughout the County
- County EMS distributing naloxone “leave-behind” kits
- Naloxone access at County jails



Examples of naloxone vending machines

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Early Intervention through Outreach and Engagement



LIVE WELL
SAN DIEGO

Strategy C: Intervene Early with Individuals at Highest Risk for Overdose

- *Expand linkage to care efforts to offer peer specialist outreach and engagement to individuals who have recently experienced a non-fatal overdose*

- Peer specialist service model offering outreach and education to individuals who recently experienced an overdose

Services Include

- Developing an overdose response plan
- Naloxone training
- Strategies for reducing overdose risk
- Connection to syringe service programs

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Enhancing Overdose Data and Surveillance



LIVE WELL
SAN DIEGO

Strategy D: Improve Detection of Overdose Outbreaks to Facilitate More Effective Response

- *Expand the County of San Diego's overdose data and surveillance infrastructure*
- *Integrate and implement drug checking services into the County's existing regional Syringe Services Program planning work*

- Establishment of a cross-departmental **County of San Diego Overdose Unit**
- Increase access to drug checking services, to include:
 - Fentanyl test strips
 - Fourier-transform Infrared (FTIR) technology

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Recommendations



- Receive update on Declaring Illicit Fentanyl a Public Health Crisis.
- Approve the addition of a total of 20 staff years for positions in Behavioral Health Services, Public Safety Group, County Fire, Emergency Medical Services, and Public Health Services for:
 - The development and dissemination of strategic overdose prevention education and public health messaging (4.0 FTEs)
 - Development and oversight of countywide integration of Overdose Mapping and Application Program and implementation and tracking of the Emergency Medical Services Leave Behind Naloxone program (2.0 FTEs)
 - Conducting overdose surveillance, investigation, response, evaluation, and administration in response to the fentanyl public health crisis and broader response to opioid misuse (14.0 FTEs)
- Authorize the Agency Director to apply for additional funding opportunities as needed.

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Item #28: Receive Update on Declaring Illicit Fentanyl a Public Health Crisis; Add Staff Years; And Authorize Application for Future Funding Opportunities

Nick Macchione, Agency Director, Health and Human Services Agency
 Wilma Wooten, MD, MPH, Public Health Officer, Public Health Services
 Luke Bergmann, PhD, Director, Behavioral Health Services
 Cameron Kaiser, MD, MPH, FAAFP, Deputy Public Health Officer, Public Health Services
 Nicole Esposito, MD, Chief Population Health Officer, Behavioral Health Services

December 13, 2022



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NATHAN FLETCHER

**SUPERVISOR, FOURTH DISTRICT
SAN DIEGO COUNTY BOARD OF SUPERVISORS**

**COSD CLERK OF THE BOARD
2022 DEC 5 PM 12:21**

AGENDA ITEM

DATE: December 13, 2022

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TO: Board of Supervisors

SUBJECT

**ESTABLISH THE INTERFAITH BEHAVIORAL HEALTH WORKFORCE CENTER
OF EXCELLENCE (DISTRICTS: ALL)**

OVERVIEW

In August 2022 the San Diego Workforce Partnership released a report titled "Addressing San Diego's Behavioral Health Worker Shortage" which quantified the need to educate, train, recruit, employ, and retain an additional 18,500 behavioral health workers by 2027 to manage the growing need for behavioral health services.¹ This report outlines recommendations to meet that goal and highlights the need to create regional training centers that create a pipeline for new workers while meeting local needs. On October 11, 2022 (10), San Diego County (County) received the report with direction to implement the report's recommendations with the overarching goal of investing in solutions to build the behavioral health workforce. One of the recommendations was to evaluate the feasibility and develop a plan to create regional behavioral health centers of excellence, which are multiple-purpose sites that serve the public and develop core competencies in training and supervision programs. A unique opportunity now exists to establish a pilot program with Interfaith Community Services (Interfaith), a local non-profit organization providing behavioral health services to individuals in need, and invest in solutions to build the behavioral health workforce.

The five-year pilot program is to be known as the Interfaith Behavioral Health Workforce Center of Excellence (COE). This program will provide training, education, and licensure to Interfaith's existing and future workforce and enable them to advance in their careers, fill hard-to-recruit behavioral health positions, and develop a sustainable funding model to continue the pilot program beyond the grant term. It is my hope that this pilot program can help be a model for future COEs, and to particularly target communities disproportionately impacted by the behavioral health crisis.

The creation of this first pilot COE is just one step among many that the County will be taking to invest in our behavioral health workforce. Myriad strategies are needed in order to address issues

¹ [Addressing San Diego's behavioral workforce shortage - San Diego Workforce Partnership](#)

**SUBJECT: ESTABLISH THE INTERFAITH BEHAVIORAL HEALTH WORKFORCE
CENTER OF EXCELLENCE (DISTRICTS: ALL)**

around wages, recruitment, and retention. Ensuring our workforce is well-trained and prepared is just one of many steps we will be taking.

Approval of today's recommendations will leverage significant funding of \$2.5 million from the Price Philanthropies Foundation with \$1 million of the County of San Diego Mental Health Services Act funding to establish a five-year pilot program for Behavioral Health Workforce Center of Excellence managed by Interfaith Community Services.

**RECOMMENDATION(S)
CHAIR NATHAN FLETCHER**

1. Find that establishment of the pilot COE and the potential grant to administer the program do not constitute a project subject to the California Environmental Quality Act (CEQA), because pursuant to Sections 15060(c)(3) and 15378(b)(4) and (b)(5) of the CEQA Guidelines, funding and administrative activities of government will not result in a direct or indirect physical change in the environment.
2. Pursuant to Government Code section 26227, find that the proposed Behavioral Health Workforce Center of Excellence program is necessary to meet the social needs of the County's population.
3. Authorize the Chief Administrative Officer, upon successful negotiations, to execute a grant agreement with Interfaith Community Services of up to \$1 million over a term of five years to administer the Behavioral Health Workforce Center of Excellence program, and to amend the grant agreement as necessary.

EQUITY IMPACT STATEMENT

We need a behavioral health workforce that reflects the diversity of the population it aims to serve and is culturally competent, linguistically diverse, and representative. Not only do we have a workforce shortage, but our workforce is not representative of our diverse communities. Cultural competency and humility are key components in most training programs, yet the workforce fails to represent the population it services either in language or cultural background. Regional training centers can be an accessible opportunity for a diverse population to enter the behavioral health workforce and provide connected care to historically underserved communities.

SUSTAINABILITY IMPACT STATEMENT

The proposed action to advance efforts to recruit, train, and retain the local behavioral health workforce will contribute to goals in the behavioral health continuum of care to provide services in the communities where people live and reduce the need to travel long distances to find a care provider. Increasing the behavioral health workforce could result in positive social and economic enhancements, contributing to the overall sustainability of the region by providing a robust workforce that provides support for the most vulnerable of our community. Behavioral health workers provide many necessary services to our community that creates a healthier, stronger, and more resilient San Diego. Their dedication to the well-being of others provides positive social contributions to our communities and therefore, positive social sustainability for our region.

FISCAL IMPACT

**SUBJECT: ESTABLISH THE INTERFAITH BEHAVIORAL HEALTH WORKFORCE
CENTER OF EXCELLENCE (DISTRICTS: ALL)**

Funds for this request are included in the Fiscal Year (FY) 2022-24 Operational Plan in the Health and Human Services Agency. If approved, today's recommendations will result in estimated costs and revenue of \$0.2 million in FY 2022-23 and \$0.2 million in FY 2023-24. Total cost for grant agreement with Interfaith Community Services is \$1.0 million over five years. The funding source is Mental Health Services Act. Funds for subsequent years will be incorporated into future operational plans. There will be no change in net General Fund cost and no additional staff years.

BUSINESS IMPACT STATEMENT

N/A

ADVISORY BOARD STATEMENT

N/A

BACKGROUND

In August 2022, the San Diego Workforce Partnership released a report titled "Addressing San Diego's Behavioral Health Worker Shortage." The report quantified the need to educate, train, recruit, employ, and retain an additional 18,500 behavioral health workers by 2027 to manage the growing need for behavioral health services.² On October 11, 2022 (10), San Diego County (County) received the report with direction to implement its recommendations for growing the behavioral health workforce. One of the strategies presented in the report and recommendations in the board letter supported the creation of a broad, regional concept centered around developing core competencies in training and supervision programs to expand the region's behavioral health workforce infrastructure - referred to as regional training centers of excellence (COE).

COEs are an opportunity to build a pipeline for in-demand behavioral health jobs. COEs can also provide technical assistance and operational support to other community-based organizations to establish their own training programs, and provide applied research opportunities for innovations in service delivery, training efficacy, and workforce optimization.

Behavioral health training and education program coordinators have identified the lack of quality training sites as one of the primary obstacles to increasing the number of students and graduates in their programs.³ Through COEs, future and existing workers can be trained in real-world environments, supported through technical assistance, and can contribute to a culture of innovation. Recently, a unique opportunity was presented to establish a pilot of this strategy with a local community-based organization, Interfaith Community Services (Interfaith).

Interfaith, founded in 1979, is a comprehensive human services organization in North San Diego County. The organization administers more than 75 programs that provide immediate safety net services and long-term, wraparound supports to help people in crisis stabilize and rebuild their lives. Its programs are organized into six main areas: Housing, Short-Term Housing, Homeless Outreach and Shelter, Recovery and Wellness, Employment and Economic Development, and

² Addressing San Diego's behavioral workforce shortage - San Diego Workforce Partnership

³ Id.

**SUBJECT: ESTABLISH THE INTERFAITH BEHAVIORAL HEALTH WORKFORCE
CENTER OF EXCELLENCE (DISTRICTS: ALL)**

Supportive Services. With 2,830 volunteers and 220 staff, Interfaith serves nearly 22,000 people a year.

Programs administered by Interfaith play an important role in bridging the continuum of care from crisis management to coordinated care. Interfaith's Recuperative Care Center (RCC) provides short-term respite care to people with acute medical or psychiatric problems discharged from the hospital. The goal of the RCC is to stabilize clients' medical or mental health conditions and engage them in managing their care to reduce the overutilization of emergency departments, reduce hospital readmissions, and function independently. The RCC aligns with the County of San Diego's Behavioral Health Continuum of Care vision. On June 25, 2019 (15) the County entered into a partnership with Interfaith to build out this program to meet the growing needs of the community and bring essential services to North County.

Expansion of programs like the RCC will require increased staffing for those recently discharged from acute care. Establishing a COE at Interfaith can help build the talent pipeline for existing and future staff at the RCC and other core programs. Interfaith employs a growing, highly diverse workforce representing the communities it serves, of which 61 percent identified as Black, Indigenous, and/or People of Color and 67 percent identified as women. Interfaith estimates that the COE will serve a total of 31,000 people over 5 years. The COE program can provide a new cohort of behavioral health workers that can staff step-down services and serve the larger regional behavioral health needs.

The Interfaith COE will advance a plurality of positions needed in the regional behavioral health workforce. The COE is expected to develop apprenticeships and on-the-job training for positions such as Psychiatric Technicians, Marriage and Family Therapists, Licensed Professional Clinical Counselors, Substance Abuse Counselors, Certified Nursing Assistants, Licensed Vocational Nurses, Registered Nurses in Behavioral Health, Peer Support Specialists, Occupational Therapists, and entry-level Social Workers. The COE will also develop scholarships and programs to enable trainees to be eligible for a Masters in Social Work.

The five-year pilot COE program will provide training, education, and licensure to the existing Interfaith workforce enabling them to advance in their careers and fill hard-to-recruit behavioral health positions. Once established, Interfaith is expected to develop a sustainable funding mechanism to continue operating the COE through a combination of Federal and State investments, grants, funding opportunities, Medi-Cal reimbursement, private insurance, and healthcare provider contracts. Interfaith needs seed funding to start up the COE and be afforded an opportunity to hire staff and create a sustainable program that justifies future revenue streams. The outcomes of this program should be analyzed and lessons learned from Interfaith should be incorporated into future COEs across the region.

The Price Philanthropies Foundation, a nonprofit corporation, will provide \$2.5 million of funding to support the implementation of the pilot program with Interfaith to fund and administer the Interfaith Behavioral Health Workforce Center of Excellence program. The County will also provide \$1 million of Mental Health Services Act funding over a term of five years, for up to \$200,000 annually, to support the effort. Implementing this transformative pilot program will

**SUBJECT: ESTABLISH THE INTERFAITH BEHAVIORAL HEALTH WORKFORCE
CENTER OF EXCELLENCE (DISTRICTS: ALL)**

operationalize the region's ability to expand the size and diversity of the behavioral health workforce.

This COE is the first in a series of opportunities that may be replicated across the region and serve San Diego's diverse populations. San Diego is home to many distinguished educational institutions, community-based organizations, and philanthropic entities that would be ideal candidates for future partnerships with this COE or the creation of new COEs. It is imperative that COEs be made accessible to all communities. COEs should be created across the region and Interfaith can serve as a model for future implementation.

The County has a duty to provide services to the San Diego community. The behavioral health crisis is growing and we lack the necessary workforce to meet the demand. Establishing a COE with Interfaith can build out a pipeline for behavioral health workers while providing services to those with unmet needs. I encourage you to support this board letter today.

LINKAGE TO THE COUNTY OF SAN DIEGO STRATEGIC PLAN

Today's proposed actions supports the Equity Strategic Initiative of the County of San Diego's 2022– 2027 Strategic Plan by supporting opportunities to create a behavioral health workforce that serves our community.

Respectfully submitted,

A handwritten signature in black ink that reads "Nathan Fletcher". The signature is fluid and cursive, with a long horizontal stroke extending from the end.

CHAIR NATHAN FLETCHER
Supervisor, Fourth District

ATTACHMENT(S)

N/A



COUNTY OF SAN DIEGO

AGENDA ITEM

BOARD OF SUPERVISORS

NORA VARGAS
First District

JOEL ANDERSON
Second District

TERRA LAWSON-REMER
Third District

NATHAN FLETCHER
Fourth District

JIM DESMOND
Fifth District

DATE: February 7, 2023

03

TO: Board of Supervisors

SUBJECT

RECEIVE THE FIRST 5 COMMISSION OF SAN DIEGO ANNUAL REPORT FOR FISCAL YEAR 2021-22 (DISTRICTS: ALL)

OVERVIEW

In November 1998, voters passed the California Children and Families Act (Proposition 10). This statewide ballot initiative increased the tax on cigarettes and tobacco products and created local county commissions to oversee funding decisions. Locally, the First 5 Commission of San Diego (Commission) utilizes revenue that became available as a result of this initiative to promote early childhood development for children ages zero to five. On October 13, 2022, the Commission completed and approved its year-end report, providing a summary of the Commission's activities for Fiscal Year (FY) 2021-22. Today, the San Diego County Board of Supervisors is requested to receive the First 5 Commission of San Diego Annual Report for FY 2021-22.

This item supports the County of San Diego's vision of a just, sustainable, and resilient future for all, specifically those communities and populations in San Diego County that have been historically left behind, as well as our ongoing commitment to the regional *Live Well San Diego* vision of healthy, safe, and thriving communities. This will be accomplished by seeking to improve early childhood health and development in the San Diego region as well as the Commission's long-term goal to ensure that "all children in San Diego County enter school ready to learn."

RECOMMENDATION(S)

CHIEF ADMINISTRATIVE OFFICER

1. Receive the First 5 Commission of San Diego Annual Report for Fiscal Year 2021-22.

EQUITY IMPACT STATEMENT

The First 5 Commission of San Diego (Commission) has over 20 years of history providing high quality early care and education support services that are available to every child throughout the San Diego County region. This work is led through various contracted partners who provide families of children ages zero to five with comprehensive services that support their development

SUBJECT: RECEIVE THE FIRST 5 COMMISSION OF SAN DIEGO ANNUAL REPORT FOR FISCAL YEAR 2021-22 (DISTRICTS: ALL)

and overall well-being as well as the Commission's vision that all children ages zero through five are healthy, loved, and nurtured, and enter school as active learners.

The Commission provides services through partnerships with local community-based organizations and engages targeted populations including but not limited to refugee and immigrant families, teen parents, as well as military families and families that are low-income. The Commission aims to ensure services are equitably available to all families that have a need, regardless of their race, ethnicity, national origin, religion, gender identity, and/or sexual orientation.

Additionally, the Commission strives to meet the needs of underserved communities and is an advocate for systems change efforts to support the continuity of care for children and their families. This work is accomplished by the approved First 5 San Diego Strategic Plan 2020-2025 (Strategic Plan), which is informed by an ad hoc committee made up of diverse and cross sector community stakeholders. The committee provided valuable input to inform the Commission of the comprehensive and emerging needs of pregnant women and children zero to five years of age.

The Strategic Plan elevates four priorities as follows: Resilient Families; Equity-Centered Coordinated Systems of Care; Integrated Leadership; and Sustained Funding. The Commission is committed to developing and enhancing its services to address the needs of the community through an expanded equity-focused approach. To that end, every contract for services that is developed by the Commission includes performance measures and equity requirements that must be met and are reported on a quarterly basis so that barriers that impact the development and overall well-being of children ages zero to five in San Diego County can be reduced and/or eliminated.

SUSTAINABILITY IMPACT STATEMENT

The First 5 Commission (Commission) offers families a reliable resource that impacts the wellness of parents and children alike, by potentially reducing stress and creating opportunities to increase the likelihood that their children will enter school as active learners. The Commission's programs contribute to and enhance sustainability in the areas of child and family well-being, the environment, and the economy. Providing opportunities for parents and providers to partner and participate in decisions that directly impact them and their children supports the County of San Diego's Sustainability Goal #1 to engage the community in meaningful ways. The Commission also supports Sustainability Goal #2 to provide just and equitable access to resources for children ages zero to five. This is accomplished by providing opportunities to Family Child Care Providers who were significantly impacted by the COVID-19 pandemic to increase childcare provider capacity and enhance business resilience, therefore providing parents an opportunity to return to their jobs confident that their children are well cared for. Additionally, the Commission supports Sustainability Goal #3 to support green job creation. Through the Commission's programs, Family Child Care Providers will be able to expand their business infrastructure through a shared services alliance that supports their business resiliency, thus maximizing their enrollment and revenue generation.

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FISCAL IMPACT

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

BUSINESS IMPACT STATEMENT

N/A

ADVISORY BOARD STATEMENT

On October 13, 2022, the First 5 Commission voted to approve the First 5 Commission of San Diego Annual Report for Fiscal Year 2021-22.

BACKGROUND

In November 1998, California voters passed the California Children and Families Act (Proposition 10). This statewide ballot initiative increased the tax on cigarettes and tobacco products and created local county commissions to oversee funding decisions. The revenue is used to facilitate the development of comprehensive, integrated services and systems that promote early childhood development from the prenatal period through age five. The goal of the First 5 Commission of San Diego (Commission) is to ensure that “all children in San Diego County enter school ready to learn.”

The Commission receives approximately \$24 million per year from the State First 5 Commission to support the First 5 San Diego Strategic Plan 2020-2025 (Strategic Plan), which guides the Commission’s actions and funding decisions. Adopted by the Commission on April 18, 2019, the Strategic Plan has four areas of focus for funding: 1) Health, 2) Learning, 3) Community, and 4) Family. For each focus area, the plan identifies the Commission’s objectives and priority strategies.

The report submitted today (Attachment A) highlights the comprehensive outreach and impact of the Commission during Fiscal Year (FY) 2021-22 including:

- Screened 13,613 children for developmental delays and treated 4,721 children with developmental concerns;
- Provided high-quality early learning and care to 14,422 children;
- Served 523 pregnant women and caregivers and 477 children with intensive home visits; and
- Provided 25,365 health and social service referrals for families.

Additionally, the Commission continues to fund various efforts that support the County’s vision of a just, sustainable, and resilient future for all, as well as the regional *Live Well San Diego* vision of healthy, safe, and thriving communities. To highlight the Commission’s accomplishments in FY 2021-22, today’s action requests that the San Diego County Board of Supervisors receive the First 5 Commission of San Diego Annual Report. The First 5 Commission approved the First 5 Commission of San Diego Annual Report for FY 2021-22 on October 13, 2022.

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LINKAGE TO THE COUNTY OF SAN DIEGO STRATEGIC PLAN

Today's proposed action supports the County of San Diego's 2023-2028 Strategic Plan Initiatives of Sustainability (Resiliency), Equity (Health), and Community (Quality of Life and Partnership) by ensuring access for all children ages zero to five, through a fully optimized early care and education system of care, as well as providing programs and services that enhance the community through increasing the well-being of our families and providers.

Respectfully submitted,

A handwritten signature in black ink, appearing to read 'H. Robbins-Meyer', with a stylized flourish at the end.

HELEN N. ROBBINS-MEYER
Chief Administrative Officer

ATTACHMENT(S)

Note: Due to the size of the attachments, the documents are available online through the Clerk of the Board's website at www.sandiegocounty.gov/content/sdc/cob/bosa.html.

Attachment A - First 5 Commission of San Diego Annual Report for Fiscal Year 2021-22

Child and Family Well-Being

The new Child and Family Well-Being (CFWB) Department will integrate First 5 and Child Welfare Services (CWS), along with the childcare system and other essential resources for families, to reimagine prevention and protection services to create a partnership that will shift our traditional approach to child protection.



What is it?

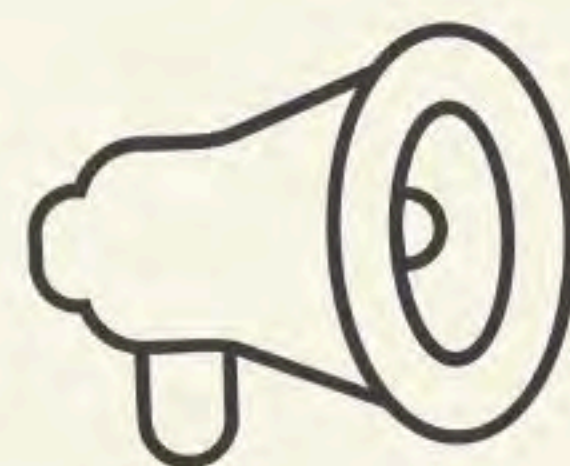
The new CFWB Department aims to provide family strengthening and prevention services to keep families together.

- Prevent children and youth from entering the child welfare service system by providing family strengthening services in a more holistic and integrated way.
- If further involvement is needed, CWS will still be present to provide protection services for children, youth, and families to ensure that foster care is a support for families, not a replacement.
- Keep families together and hold the family as the expert in how to best keep their children and youth safe.
- Reduce unnecessary child protective actions that have historically harmed and separated families.

GOALS

How can I get involved?

We are respectfully requesting permission to gather your expert knowledge, thoughts, questions, and concerns to join in on existing discussions so we can build and learn more about your family and the community. Scan and save the QR code to get additional information - this link will continue to provide updates as CFWB progresses. We hope to learn from you!



DID YOU KNOW?

We want to help families before crisis occurs. Our goal is to provide family strengthening support to families, help child well-being, and prevent children and youth from entering the child welfare system.





GOVERNOR'S BUDGET 2023-24

Fact Sheet

The Governor's Budget keeps promises to Californians and invests in our values:

- **Transforming public education and higher ed**
- **Addressing the homelessness crisis**
- **Expanding housing affordability**
- **Increasing health care access**
- **Fighting climate change**
- **Keeping Californians safe**
- **Investing in economic development**

Governor Newsom and the Legislature have made unprecedented investments in the people of this state, addressing our most pressing challenges and building a more prosperous future.

The Governor's budget proposal reflects our values and priorities. It will provide free school meals to every student, create a new grade, expand before- and after-school programs, forge pathways to debt-free college, protect Californians from climate change, expand health care and reproductive rights, cut costs for prescription drugs, build more housing, get people off the streets, and keep Californians safe.

While today's economic outlook is dramatically different from the previous two years, it is not unexpected – California has planned for this. That's why Governor Newsom and lawmakers have dedicated tens of billions of dollars over the last several budgets to reserves and resiliency: 1) Building healthy reserves; 2) Eliminating budgetary debt; 3) Reducing retirement liabilities; and 4) Focusing on one-time spending over ongoing investments. Because of our prudent planning, the state is in the best position in recent memory to withstand the economic slowdown and declining revenues while safeguarding critical programs.

TRANSFORMING EDUCATION

HIGHEST STATE PER-PUPIL FUNDING EVER & TRANSFORMING EDUCATION. California is taking unprecedented steps to support the whole child from birth to higher education, investing \$23,723 per student – the highest state per-pupil spending in our history – and directing tens of billions specifically to address learning loss, expand programs like those before and after school, get more teachers and guidance counselors in the classroom, and more.



A BRAND NEW GRADE: IMPLEMENTING UNIVERSAL TRANSITIONAL KINDERGARTEN.

California will add a new grade underneath kindergarten, serving 450,000 children per year. The Governor's budget includes \$690 million to further implement the expansion and serve an additional 46,000 children, and another \$165 million for more school staff in these classrooms.

FREE MEALS FOR EVERY STUDENT. California is investing \$1.3 billion for all students, regardless of income, to access two free school meals per day – up to 12 million meals per day statewide.

AFFORDABLE CHILD CARE FOR MORE PARENTS. Invest over \$2 billion annually to expand subsidized child care slot availability, providing thousands more slots that are more affordable for parents.

BETTER, MORE AFFORDABLE HIGHER EDUCATION. Continue historic reinvestment into public universities through the higher education compacts that Governor Newsom brokered with the UC, CSU, and Community College systems – increasing seats, closing equity gaps, creating debt-free pathways, and improving job pipelines.

MOVING TOWARD DEBT-FREE COLLEGE. Following through on the promise of providing more affordable pathways to the state's premier higher education institutions, the Governor's budget continues advancing programs like College Corps, Cal Grant, Middle Class Scholarships, and college savings accounts to cut costs of higher education.

TACKLING HOMELESSNESS & HOUSING SUPPLY

CALIFORNIA HAS NEVER INVESTED MORE TO FIGHT HOMELESSNESS. In only two years, Governor Newsom has invested \$15.3 billion to address homelessness – up from \$500 million when he took office and more than ever before in state history. The Governor's budget maintains billions of dollars for aid to local governments, Homekey, encampment resolution grants, Project Roomkey, and more. With this funding comes new accountability – no more investing in the status quo.

INCREASING THE HOUSING SUPPLY. In the last four years, California invested more to increase housing supply than ever before in state history. The Newsom Administration is also holding local governments accountable like never before – enforcing state housing law and ensuring that every community plans for its fair share of housing. The state continues to deploy a comprehensive set of strategies – improving state financing programs, targeting housing investments, providing technical assistance to rural, tribal, and urban areas, eliminating burdensome regulations, and leveraging land use tools. The state adopted a legally binding goal that local governments must plan to build approximately 2.5 million new units by 2030, and 1 million of these units must be affordable.



INCREASING HEALTH CARE ACCESS

IMPLEMENTING NATION-LEADING HEALTH CARE ACTIONS. Following Governor Newsom's actions to expand health care access and reduce costs, the Governor's budget invests billions to continue implementing these measures – programs like CalAIM to transform Medi-Cal, follow through on the promise to extend health care to low-income Californians regardless of immigration status, make prescriptions more affordable through CalRX, and more.

MORE FAMILY PLANNING & PROTECTING THE RIGHT TO ABORTION. In addition to maintaining Governor Newsom's \$200 million investment in reproductive health care, the Governor's budget proposes an additional \$200 million for family planning services.

EXPANDING ACCESS TO MENTAL HEALTH. Sustaining \$8 billion to continue expanding mental and behavioral health services, especially for children and youth. The Governor's budget further implements the state's transformation of how and when people get care, including the Master Plan for Kids' Mental Health and billions for behavioral health housing and infrastructure.

BETTER CARE FOR THE DEVELOPMENTALLY DISABLED. The Governor's budget sustains an annual \$1.2 billion to fully implement service provider rate reform with a focus on improving outcomes and quality of services.

CARE COURT. Investing \$215 million to implement the CARE Act, the Governor's nation-leading approach to get those dealing with untreated and severe mental health or substance use disorders – who too often suffer in homelessness or incarceration – the help they need.

FIGHTING CLIMATE CHANGE

CALIFORNIA'S CLIMATE COMMITMENT. California is advancing a \$48 billion multi-year commitment to implement its world-leading agenda to achieve carbon neutrality, protect communities from harmful oil drilling, deliver 90% clean energy by 2035, and more.

ACCELERATING THE TRANSITION TO CLEAN ENERGY & CUTTING POLLUTION. The Governor's budget invests tens of billions of dollars to get more Californians into zero-emission vehicles, advance clean energy, dramatically cut pollution, and more.

PROTECTING CALIFORNIANS FROM EXTREME WEATHER. California continues to face extreme weather conditions amid a changing climate, and the Governor's budget prioritizes keeping people safe from wildfires, drought, extreme heat, and flooding.



KEEPING CALIFORNIANS SAFE

CRACKING DOWN ON FENTANYL, ORGANIZED RETAIL THEFT & OTHER CRIMES. The Governor's budget sustains **\$564.4 million** to bolster law enforcement efforts to address retail theft and other crimes. These investments help local law enforcement agencies:

- Implement and expand anti-theft, anti-crime, and retail theft task forces
- Provide body cameras for CHP officers
- Combat fentanyl and expand drug interdiction
- Improve emergency response times and prosecution efforts
- Combat human trafficking and child sexual exploitation
- Get guns off the street

ECONOMIC DEVELOPMENT

RURAL & INDUSTRIAL ECONOMIC AGENDA. Maintaining funds for rural communities and industrial industries to continue expanding economic opportunities, the Governor's budget will continue getting hundreds of millions of dollars to communities for economic development, local government projects, grants for businesses and workforce development, and more.

ADVANCING WORKFORCE DEVELOPMENT PROGRAMS. The Governor's budget invests \$1.65 billion to create new apprenticeships, bolster training opportunities for jobs that are leading the clean energy transition, workforce development efforts for the justice-involved population, and create new opportunities for a diverse health and human services workforce.

STRONG FISCAL FOUNDATION

CALIFORNIA HAS BEEN PLANNING FOR THIS. Amidst global inflation, a tight labor market, and high interest rates, the Governor's budget bolsters budgetary resiliency while sustaining key investments:

- **BUILDING UP & MAINTAINING RESERVES:** Part of the state's planning has focused on building up reserves. To maintain the ability to respond to any negative economic downturns, the Governor's budget doesn't draw from the state's \$35.6 billion in total budgetary reserves to close the budget gap.
- **ONE-TIME SPENDING:** Previous budgets focused primarily on one-time and near-term spending, instead of implementing costly long-term obligations.
- **PAYING DOWN DEBTS:** Through strong fiscal planning and surpluses, previous budgets focused on debt obligations – eliminating budgetary debts and paying down other debts and long-term liabilities.



1	Putting Our Kids First
2	The Children and Youth Behavioral Health Initiative
2	Centering the Needs of Youth and Families
3	Initiative Structure
4	Our Progress
4	Workforce Training and Capacity
6	Behavioral Health Ecosystem Infrastructure
10	Coverage Architecture
10	Public Awareness
11	Initiative-Wide

[Link to Full Report](#)

[Link to the full document](#)

**Working Paper:
California's Children &
Youth Behavioral Health Ecosystem**

**Authored by a multidisciplinary team led by
Breaking Barriers California**

Commissioned by CalHHS



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Overview of Grant Funding Opportunity

Established in 2021, the Children and Youth Behavioral Health Initiative (CYBHI) is a \$4.7 billion investment of state General Funds aimed at improving access to behavioral health services for all children and youth in California, regardless of payer (insurance coverage). The CYBHI is a multiyear, multi-department initiative focused on promoting social and emotional well-being, preventing behavioral health challenges, and providing equitable, appropriate, timely, and accessible services for emerging and existing behavioral health needs for children and youth ages 0-25 in California.

"In line with its legislative mandate,¹ the DHCS will distribute \$429 million in grants to organizations seeking to scale evidence-based and/or community-defined evidence practices (EBPs/CDEPs) that improve youth behavioral health (BH) based on robust evidence for effectiveness, impact on racial equity, and sustainability."

In line with its legislative mandate,¹ DHCS will distribute \$429 million in grants to organizations seeking to scale evidence-based and/or community-defined evidence practices (EBPs/CDEPs) that improve youth behavioral health (BH) based on robust evidence for effectiveness, impact on racial equity, and sustainability. By scaling EBPs and CDEPs throughout the state, DHCS aims to improve access to critical behavioral health interventions, including those focused on prevention, early intervention, and resiliency/recovery for children and youth, with a specific focus on children and youth who are from either or both of the following groups: Black, Indigenous, and People of Color (BIPOC) and the LGBTQIA+ community.

Through an extensive community engagement process, DHCS selected a limited number of EBPs and CDEPs to consider for scaling throughout the state, subject to further refinement based on an assessment of sustainable financing mechanisms, including Medi-Cal and commercial coverage and/or other funding streams. DHCS' approach to scaling these practices varies depending on program type, but generally falls into one of three categories:

- 1. Expanding an organization's operations and capacity to provide services** by supporting training for BH professionals (both clinical and non-clinical), community-based or faith-based organizations, parents and caregivers, and others, as appropriate, to provide culturally responsive and gender-affirming behavioral health care and supports to children, youth, and their families and caretakers.
- 2. Enabling the replication and adaptations of well-established practices** (e.g., practices contained in the Substance Abuse and Mental Health Services Administration's [SAMHSA] EBP Resource Center or the California Evidence-Based Clearinghouse for Child Welfare [CEBC] or practices that have been manualized for others to implement with fidelity; as well as practices determined to be effective by communities) by funding organizations that will expand the practices geographically or for additional populations of focus, and those organizations that will newly deliver the practices with additional implementation support
- 3. Exploring potential policy innovations** that could lead to sustainable funding strategies.

During Fiscal Year 2022-2023, DHCS will scale the identified practices through six competitive grant rounds in the following areas of focus:



Round 1
Parent/caregiver support programs
and practices (December 2022)



Round 4
Youth-driven programs
(March 2023)



Round 2
Trauma-informed programs and
practices (January 2023)



Round 5
Early intervention programs and
practices (March/April 2023)



Round 3
Early childhood wraparound
services (February 2023)



Round 6
Community-defined evidence
programs and practices (approximate
timeline for release: April 2023)

DHCS is partnering with the Mental Health Services Oversight & Accountability Commission (MHSOAC) to scale specified prevention and early intervention practices. An estimated \$43 million of the total funding will be disbursed to MHSOAC as part of an interagency partnership agreement between DHCS and MHSOAC. DHCS is working closely with MHSOAC to define the terms of the interagency agreement, including the scope of work.

Round 1: Parent/caregiver support programs and practices

*"Research echoes the importance of early intervention with roughly 30 percent of California caregivers reporting moderate concerns over their child's social and emotional development and behavioral health, and 20-40 percent of those same caregivers reporting engaging in some ineffective type of parenting."*⁸

Description of Priority Focus Area: The first grant round will fund programs and practices to increase support for and improve parental and caregiver involvement.

Proposed Release Date: December 2022

Rationale: Implementing effective prevention and early intervention programs that build on the strength of diverse parents and caregivers could lead to positive impacts on children and youth facing BH challenges. Research echoes the importance of early intervention with roughly 30 percent of California caregivers reporting moderate concerns over their child's emotional and BH and 20-40 percent of those same caregivers reporting engaging in some ineffective type of parenting.⁸ This round of funding could complement work done to strengthen parenting practices by the First 5 Initiative, California Department of Social Services, and the Child Mind Institute, among others.

Priority Populations of Focus: To include populations identified by CRDP and OHE with a priority focus on parents and caregivers of children and youth with BH needs and parents and caregivers of children who benefit most from preventative strategies (e.g., young children 0-5 years of age).

Expected Outcomes/Key Metrics: Through funding these EBPs and CDEPs, DHCS expects to strengthen positive parenting practices, improve the response to emotional and behavioral challenges commonly experienced in childhood, promote child social and emotional development, improve caregiver involvement and relationships with children, and increase support for individuals that may be experiencing heightened levels of caregiver-related stress among other outcomes.

Example EBPs/CDEPs in Priority Category: Potential EBPs/CDEPs to be funded in this round include but are not limited to HealthySteps/ Dyadic Care Services; Incredible Years; Parent-Child Interaction Therapy; Positive Parenting Program (Triple P); and, Parents Anonymous®. DHCS will release the final list of selected programs and practices in the RFA for this grant round and will include allowances for other EBPs with demonstrated efficacy including, but not limited to, those that have a minimum of "promising" or "supported" rating in the Title IV-E Clearinghouse Prevention Services or the California Evidence-Based Clearinghouse for Child Welfare,⁹ as well as CDEPs that have reached a strong level of efficacy within specific communities based on their perceived or reported positive outcomes. Selected programs and practices may be refined based on insurance coverage.

Round 2: Trauma-informed programs and practices

"Research indicates that 36 percent of children in California have been exposed to one or more ACEs." ¹⁰

Description of Priority Focus Area: Round 2 will fund trauma-informed programs and practices to increase access to services that address BH needs and the impact of Adverse Childhood Experiences (ACEs).

Proposed Release Date: January 2023

Rationale: DHCS stakeholders emphasized that intervening early and increasing the availability of interventions that are trauma-informed can help reduce the negative effects of ACEs. Research indicates that 36 percent of children in California have been exposed to one or more ACEs¹⁰ and 63.5 percent of all adults were exposed before age 18.¹¹ This round of funding could build upon work being done by DHCS, the California Department of Education, MHSOAC, and the California Office of the Surgeon General.¹²

Priority Populations of Focus: To include populations identified by CRDP and OHE

Expected Outcomes/Key Metrics: Through funding these EBPs and CDEPs, DHCS expects to expand access to early interventions, support the resilience of children and youth by mitigating the adverse effects of ACEs, build knowledge of trauma-informed support and communication, increase the capacity of child-serving service

systems on trauma-informed practices, improve the understanding of how community trauma and racism impact child and youth well-being, and improve grief support for children and youth with COVID-related trauma among other outcomes.

Example EBPs/CDEPs in Priority Category: Potential EBPs/CDEPs to be funded in this round include but are not limited to Child-Parent Psychotherapy; Cognitive Behavioral Interventions for Trauma in Schools; Dialectical Behavioral Therapy; Family-Centered Treatment; Modular Approach to Therapy for Children with Anxiety, Depression, Trauma, or Conduct Problems; and Trauma-Focused Cognitive Behavioral Therapy. DHCS will release the final list of selected programs and practices in the RFA for this grant round and will include allowances for other EBPs with demonstrated efficacy including, but not limited to, those that have a minimum of "promising" or "supported" rating in the Title IV-E Clearinghouse Prevention Services or the California Evidence-Based Clearinghouse for Child Welfare,¹³ as well as CDEPs that have reached a strong level of efficacy within specific communities based on their perceived positive outcomes. Selected programs and practices may be refined based on insurance coverage.

Round 3: Early childhood wraparound services

"65 percent of California's children aged 0-3 have one or more risk factors for BH conditions." ¹⁴

Description of Priority Focus Area: Round 3 will fund early childhood wraparound services to build family strength and overall well-being.

Proposed Release Date: February 2023

Rationale: 65 percent of California's children ages 0-3 have one or more risk factors for BH conditions,¹⁴ and less than 50 percent of young children with emotional, behavioral, or relationship disturbances receive any treatments.¹⁵ The inclusion of this round is consistent with stakeholder feedback that early engagement is crucial to mitigating BH issues in adulthood. This round of funding could complement other statewide behavioral health initiatives for young children, such as the Maternal Infant and Early Childhood Home Visiting Program, Early Childhood Mental Health Consultation Network, and Black Infant Health Program, all of which are implemented by various state and local agencies including First Five County Commissions.

Expected Outcomes/Key Metrics: Through funding these EBPs and CDEPs, DHCS expects to increase access to home visiting services and consultation services, improve coordination of services between pregnant and parenting/caregiving people and their support systems, improve parent/caregiver and child health, reduce ACEs, and reduce emergency department visits and substantiated child abuse calls due to child maltreatment among other outcomes.

Priority Populations of Focus: To include populations identified by CRDP and OHE, with a priority focus on parents and caregivers with young children (e.g., 0-5 years of age)

Example EBPs/CDEPs in Priority Category: Potential EBPs/CDEPs to be funded in this round include, but are not limited to, Healthy Families America, Nurse Family Partnership, and Infant and Early Childhood Mental Health Consultation. DHCS will release the final list of selected programs and practices in the RFA for this grant round and will include allowances for other EBPs with demonstrated efficacy, including, but not limited to, those that have a minimum of "promising" or "supported" rating in the Title IV-E Clearinghouse Prevention Services or the California Evidence-Based Clearinghouse for Child Welfare,¹⁶ as well as CDEPs that have reached a strong level of efficacy within specific communities based on their perceived positive outcomes. Selected programs and practices may be refined based on insurance coverage.

Round 4: Youth-driven programs

“Research indicates that not only are youth peer coaches qualified to support other youth “because of their experience facing similar challenges” but this support is crucial for their peers suffering from serious mental health conditions.” ¹⁷

Description of Priority Focus Area: Round 4 will fund youth-driven programs to provide California children and youth the opportunity to shape their behavioral health services.

Proposed Release Date: March 2023

Rationale: Stakeholders expressed the importance of the youth voice in developing interventions that reach, are wanted by, and are appropriate for youth in their communities. Research indicates that not only are youth peer coaches qualified to support other youth “because of their experience facing similar challenges,” but this support is crucial for their peers suffering from serious mental health conditions.¹⁷ Youth expressed similar sentiments during the stakeholder engagement process, highlighting the potential for youth-driven programs and practices to make an impact on BH. This round of funding could serve to scale efforts by DHCS and California Department of Health Care Access and Information in creating a robust peer support specialist ecosystem in California by increasing foundational skills and fostering interest in mental health workforce pathways in youth, especially youth of color.

Expected Outcomes/Key Metrics: Through funding these EBPs and CDEPs, DHCS expects to increase accessibility to peer-to-peer support and other related programs that are informed

through youth voice, provide non-clinical access to BH support, improve engagement in other BH-related services, improve self-reported well-being, and promote long-term recovery among other outcomes.

Priority Populations of Focus: To include populations identified by CRDP and OHE with a priority focus on youth between the ages of 12-25

Example EBPs/CDEPs in Priority Category: Potential EBPs/CDEPs to be funded in this round include, but are not limited to, peer support and youth drop-in centers (e.g., Allcove™). DHCS will release the final list of selected programs and practices in the RFA for this grant round and will include allowances for other EBPs with demonstrated efficacy including, but not limited to, those that have a minimum of “promising” or “supported” rating in the Title IV-E Clearinghouse Prevention Services or the California Evidence-Based Clearinghouse for Child Welfare,¹⁸ as well as CDEPs that have reached a strong level of efficacy within specific communities based on their perceived positive outcomes. Selected programs and practices may be refined based on insurance coverage.

Round 5: Early intervention programs and practices

“National research has shown that 50 percent of all mental health conditions appear before age 14.” ¹⁹

Description of Priority Focus Area: Round 5 will fund early intervention programs and address BH needs more effectively earlier, and reduce reliance on more intensive services. This round of funding may include funding administered by an interagency agreement with MHSOAC.

Proposed Release Date: March/April 2023

Rationale: Research indicates that early BH intervention can reduce premature death, social isolation, poor function, and increase educational and vocational prospects;¹⁹ however, less than 5 percent of eligible children covered by Medi-Cal receive a single mental health service.²⁰ National research has shown that 50 percent of all mental health conditions appear before age 14.²¹ Early intervention programs and practices were identified by stakeholders as an important way to improve children and youth outcomes in adulthood.

Expected Outcomes/Key Metrics: Through funding these EBPs and CDEPs, DHCS expects to increase early identification of BH concerns, improve or properly address BH challenges preventing escalation to more intensive services, and improve coordination of services among other outcomes

Priority Populations of Focus: To include populations identified by CRDP

Example EBPs/CDEPs in Priority Category: Potential EBPs/CDEPs to be funded in this round include but are not limited to early psychosis programs (e.g., Coordinated Specialty Care) and Youth Crisis Peer Mobile Response. DHCS will release the final list of selected programs and practices in the RFA for this grant round and will include allowances for other EBPs with demonstrated efficacy including, but not limited to, those that have a minimum of “promising” or “supported” rating in the Title IV-E Clearinghouse Prevention Services or the California Evidence-Based Clearinghouse for Child Welfare,²² as well as CDEPs that have reached a strong level of efficacy within specific communities based on their perceived positive outcomes. Selected programs and practices may be refined based on insurance coverage.

Round 6: Community-defined evidence programs and practices

"DHCS expects to increase the availability of culturally relevant BH services to communities across the state among other outcomes."

Description of Priority Focus Area: Round 6 will be dedicated specifically to community-defined evidence programs and practices to provide culturally competent prevention and early intervention services. While this round is dedicated to CDEPs, potential grantees that implement CDEPs are welcome to apply in any of the six funding rounds.

Approximate timeline for release: April 2023

Rationale: During Phase I of their research, CRDP found that marginalized communities have historically struggled to achieve "optimal mental health" despite a statewide system that was designed to provide services without regard to ethnicity or sexual orientation.²³ This lived experience was echoed during the stakeholder engagement process, in which several communities expressed their struggle to access culturally relevant and linguistically appropriate BH services. With its commitment to increasing health equity through the EBP/CDEP workstream, DHCS and its stakeholders recognize the importance of these CDEPs as an alternative to "traditional" BH services for populations of focus.

Expected Outcomes/Key Metrics: Through funding these EBPs and CDEPs, DHCS expects to increase the availability of culturally relevant BH services to communities across the state among other outcomes.

Priority Populations of Focus: To include a priority focus on populations of focus identified by CRDP

Example EBPs/CDEPs in Priority Category: Potential EBPs/CDEPs to be funded in this round include but are not limited to the 35 pilot projects funded during CRDP Phase II which include services for children and youth under 25. DHCS will release the final list of selected programs and practices in the RFA for this grant round. Selected programs and practices may be refined based on insurance coverage.



**Children and Youth Behavioral Health Initiative
California Department of Health Care Services**

**Evidence-Based Practices and Community-Defined
Evidence Practices Grant Program**

**Round Two: Trauma-Informed Programs and
Practices**

Request for Applications

Release date: February 9, 2023

Application deadline: April 10, 2023

Round Two: Trauma-Informed Programs and Practices

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County of San Diego

NICK MACCHIONE, FACHE
AGENCY DIRECTOR

HEALTH AND HUMAN SERVICES AGENCY
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SAN DIEGO, CA 92108-3806
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LUKE BERGMANN, Ph.D.
DIRECTOR, BEHAVIORAL HEALTH SERVICES

December 22, 2022

TO: Behavioral Health Advisory Board (BHAB)

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

BEHAVIORAL HEALTH SERVICES (BHS) DIRECTOR'S REPORT – FEBRUARY 2023

BHS DEPARTMENTAL OPTIMIZATION UPDATES

With the exponential growth over the last few years of the County's Behavioral Health Services (BHS) department, and its increasing budget, BHS has pursued ensuring that there is adequate support and infrastructure in place to sustain the growth and increasing complexity of services. Over the past year, through a phased approach, BHS has been restructuring our internal structure, resources, and staffing to optimize the configuration of key activities and functions that support the delivery of data-driven, quality mental health and substance use disorder (SUD) services to the most vulnerable individuals and families within our community.

Adequate support for department growth includes additional BHS staff positions and opportunities for employee growth. There has been no job attrition as a result from this restructuring process. BHS has maintained continuity of current functions and activities during the transition to ensure services and current activities are not disrupted.

BHS Organizational Changes



Below are highlights of the some of the key organizational changes implemented in four phases over the past year. The implementation timeline of each phase is as follows: Phase 1-December 2021; Phase 2-February 2022; Phase 3-July 2022; and Phase 4-October 2022.

Key organizational changes to highlight, include:

Operations Unit

- Established the **Health Plan Operations Team**, under the BHS Operations Unit, comprised of Quality Assurance (QA), Management Information Systems (MIS) and the **newly established Health Plan Administration** team. The team handles critical functions and activities in fulfilling

BHS's role as the Specialty Mental Health Plan and is responsible for mandated audit and documents coordination, Optum reporting collaboration activities, and Network Adequacy requirements support, along with key efforts related to CalAIM.

- Established a **new Business Operations team** under the Operations Unit to oversee BHS facilities, including new BHS capital project planning, information technology (IT), and project management functions within BHS. The Project Management Office (PMO) provides centralized project management for large bodies of work within the department, including Behavioral Health Continuum of Care projects, new capital projects, and other new critical bodies of work that require intensive cross-collaboration. Centralizing these multiple functions within Business Operations ensures optimal efficiency to support the delivery of excellent customer service.

The BHS Operations Team is led by Assistant Director and Chief Operations Officer, Aurora Kiviat Nudd.

Programs and Services Unit

- Renamed the Prevention and Community Engagement (PCE) team to the **Prevention and Support Services team**. The team will oversee BHS-level prevention services, such as regional prevention contracts governing councils and coalitions, and other contracted work funded by the Mental Health Services Act – Prevention and Early Intervention (PEI) funds, and Substance Abuse Block Grant funds, which will align services that have direct upstream benefit across behavioral health services.
- Shifted the **Office of the Public Conservator** to BHS, which previously was a part of the Public Administrator/Public Guardian/Public Conservator. supporting the alignment of resources, services, and policies to address the needs of conservatees and inform the implementation of upstream interventions to ensure access to care in the least restrictive environment. It will also align services as BHS moves to implement the new mandated Community Assistance, Recovery and Empowerment (CARE) Court by October 2023, as part of the first cohort of California counties.

The BHS Programs and Services team is led by Assistant Director and Chief Program Officer, Cecily Thornton-Stearns.

Population Health Unit

- Established the **Population Health Unit** under the leadership of the Chief Population Health Officer, Dr. Nicole Esposito. The Population Health Unit implements a population health approach to support access to behavioral health care by ensuring those in need have access to services, working to identify and eliminate health disparities, driving excellent health outcomes, and supporting continuous improvement.
- **Shifted system-level prevention functions** to the BHS Population Health Unit, including contracts that support systemwide prevention and future evaluation initiatives, to support broader prevention efforts across the department. These contracts are focused on public health planning and strategy, which will serve to advance community-wide equity in behavioral health outcomes. This work aligns with the data surveillance and epidemiology functions of the unit and will thread with prevention initiatives currently underway across the enterprise, such as efforts in collaboration with public safety and justice partners.

The BHS Population Health Unit is led by Dr. Nicole Esposito, Chief Population Health Officer.

Healthcare Oversight Unit

- To align programming, BHS will begin shifting **contracts with a justice focus** to the Healthcare Oversight Unit. The Healthcare Oversight Unit currently oversees the Forensic Evaluation Unit, a County-operated program that provides psychiatric and psychological evaluations ordered by the court for adults facing criminal charges. Shifting contracted justice programs to this team will align County-operated and contracted services that support individuals with justice involvement. The contracted collaborative courts, including the drug courts, re-entry court, and behavioral health court, will begin transitioning to the Healthcare Oversight Unit in late 2022, followed by the transition of other contracts over the next few months, which include justice assertive community treatment (ACT) programs, AB 109 programs, jail in-reach programs, and the serial inebriate program.

The BHS Healthcare Oversight Unit is overseen by Dr. Michael Krelstein, the Chief Medical Officer for Behavioral Health Services.

Strategy and Finance Unit

- Established the **Data Science team** under the Strategy and Finance Unit. The Data Science team is responsible for acquiring, synthesizing, integrating, and interpreting mental health and substance use disorder data, including the development of dashboards and establishing data governance. The team serves as the centralized, integrated data hub to coordinate BHS and other data, and supports data needs related to public presentations, program and clinical design, outcomes, and fulfills various reporting requirements and supports general departmental strategies. The Data Science team collaborates with the Epidemiology team within the Population Health Unit to ensure access and availability of community behavioral health data as needed.
- Shifted the **BHS Budget team**, which oversees a budget of nearly \$1 billion, to the Strategy and Finance Unit. The BHS Budget team leads budget development and implementation activities for BHS units, including BHS Administration, the San Diego County Psychiatric Hospital, the Edgemoor Distinct Part Skilled Nursing Facility (DPSNF), and County-operated services.
- Shifted **BHS Fiscal team** to the Strategy and Finance Unit. The BHS Fiscal team is responsible for all fiscal functions to support the 300+ contracts currently within BHS, including contract budgets, revenues, contractor invoices, contract spending, year-end activities, and other tasks related to the fiscal management of contracts.
- Shifted “community engagement” functions to the **BHS Communication and Engagement team** to align key functions and further bolster the department’s community engagement efforts. The current community engagement activities and media advocacy contracts were shifted to the Communication and Engagement team within the BHS Strategy and Finance Unit. The team provides broad support across BHS to support rapid response, public records act and media requests, Behavioral Health Advisory Board (BHAB) activities, Board Letters and presentations, and employee engagement. Shifting community engagement activities to this team supports broader departmental, Agency and enterprise efforts around community engagement, including public messaging campaigns, establishing new BHS services and capital projects, messaging about the Community Experience Partnership (CEP), and integration of community members into various aspects of programming. Additionally, existing health promotion work done countywide and funded by the Mental Health Services Act (MHSA), along with community health outreach work, will transition to this team.

The BHS Strategy and Finance Unit is led by the Assistant Director and Chief Strategy and Finance Officer, Nadia Privara Brahms.

BHS Workforce Growth

BHS continues to experience growth and as part of the FY 2022-23 Operational Plan, the department added new dedicated workforce through the **addition of 115 new County positions** as follows:

Direct Services

- 15 positions to provide custodial services within the San Diego County Psychiatric Hospital (SDCPH) and Edgemoor.
- 12 positions to provide behavioral health services that support youth in County care due to changes to the State's Juvenile Justice Division.
- 37 positions to provide outpatient and case management services, including new peer support positions, within County-operated mental health clinics.

Clinical and Administrative Oversight and Support

- 5 positions to support harm reduction efforts.
- 46 positions to enhance and oversee contracted services across BHS, and to support critical administrative functions across the department.

BHS SPECIAL EVENTS AND ANNOUNCEMENTS

7th Annual Live Well Advance Conference – December 7, 2022

The County of San Diego welcomed more than 2,000 attendees to the San Diego Convention Center on Wednesday, December 7, 2022, for the 7th Annual Live Well Advance Conference & School Summit. The event brought community partners and stakeholders together to network, learn about new tools and best practices, and participate in breakout sessions, workshops, and interactive activities. More than a third of this year's content concentrated on mental health and substance use prevention topics in alignment with local priorities. Featured speakers included contractors and partner organizations, as well as representatives from the County's Behavioral Health Services (BHS) department.

Behavioral health highlights from the conference include:

- The highest attended behavioral health breakout sessions (with over 100 participants per individual session), included: Community and Parent Guide to Fentanyl (115 attendees); Finding Help for Behavioral Health Crises: Response Teams and Lifelines for Support (105 attendees); and Pediatric Integrated Care: Together Tackling Our Youth Mental Health Crisis (113 attendees).
- Nearly 70 participants attended input sessions with UC San Diego to learn about the Mental Health Services Act (MHSA) Community Program Planning Process and provide input on local behavioral health priorities; an additional 50 attendees participated in the demonstration of BHS' Community Experience Partnership data dashboards.
- BHS staff also facilitated interactive booths throughout the day focused on stigma reduction and harm reduction.
- Nearly 2,000 doses (997 two dose kits) of naloxone were distributed to participants in partnership with the Harm Reduction Coalition of San Diego.
- *It's Up to Us* #StigmaFreeSD Photo Booth was well visited throughout the day by attendees who had their photo taken with selected statements that resonated with them related to mental health and/or substance use disorders.
- After the main conference, more than 50 partners gathered for a reception to network and specifically discuss programming opportunities related to behavioral health.

Birth of Brilliance "Be the Change" Conference- February 23, 2023

The third annual Birth of Brilliance "Be the Change" virtual conference is scheduled for Thursday, February 23, 2023, from 8:15 A.M. to 5:00 P.M. A cultural fair will take place in-person the following day

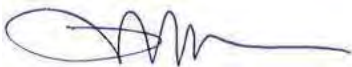
Behavioral Health Services
Director's Report – January 2023

on Friday, February 24, 2023, from 4:00 P.M. to 7:00 P.M. Registration is now open at www.BirthofBrilliance.com

Critical Issues in Child and Adolescent Mental Health (CICAMH) Conference – April 21, 2023

Save the Date for the hybrid 8th Annual Critical Issues in Child and Adolescent Mental Health (CICAMH) Conference: Building Resilience through Family Engagement scheduled for Friday, April 21, 2023. More information will be available soon. For questions email: CICAMH.CONFERENCE@GMAIL.COM.

Respectfully submitted,



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

c: Nick Macchione, Agency Director
Aurora Kiviat Nudd, Assistant Director and Chief Operations Officer
Cecily Thornton-Stearns, Assistant Director and Chief Program Officer
Nadia Privara Brahms, Assistant Director and Chief Strategy & Finance Officer

Children, Youth and Families

SERVICES DIRECTORY



BEHAVIORAL HEALTH SERVICES

3255 CAMINO DEL RIO SOUTH, SAN DIEGO, CA 92108 | 619-563-2700

[Health & Human Services Agency \(sandiegocounty.gov\)](https://www.sandiegocounty.gov) [Behavioral Health Services \(sandiegocounty.gov\)](https://www.sandiegocounty.gov)

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Please send all directory corrections and updates to Yvonne.Gage@sdcounty.ca.gov

YOUR VOICE
MATTERS!

San Diego Advancing and Innovating Medi-Cal

Community Listening Session

New services are available for Medi-Cal members with complex health and social needs.

The **COUNTY** invites you to a **LISTENING SESSION** to:

- Learn about Enhanced Care Management and Community Supports offered through California Advancing and Innovating Medi-Cal (CalAIM)
- Share **your input** on how San Diego's most vulnerable Medi-Cal members can improve their health and wellness

We want to hear from you!

Together, we can create the County's "Roadmap" for CalAIM.

Healthcare organizations, community-based organizations, consumer advocates, and other stakeholders who serve Medi-Cal members are encouraged to attend.

Register to attend one of the following virtual sessions:

Wednesday, February 15, 2023
3:30 - 5 PM

Click here to
Register



Tuesday, February 21, 2023
3:30 - 5 PM

Click here to
Register



- For **language interpretation** or **special accommodations**, please register at least 3 business days prior to the session to submit your request.
- After you register, you will receive a confirmation email with information about joining the meeting.
- Email questions or feedback to: SDAIM.HHSA@sdcounty.ca.gov

County of San Diego Health and Human Services Agency



LIVE WELL
SAN DIEGO



Critical Issues in Child and Adolescent Mental Health Conference

Building Resilience through Family Engagement

APRIL 21, 2023

EARLY BIRD
REGISTRATION
ENDS APRIL 1

WHO SHOULD ATTEND:

Mental Health Professionals, Psychologists, Therapists, Social Workers, Counselors, Psychiatrists, Pediatricians, Nurses, Education, Students, Probation Officers, Child Welfare Workers, Case Managers, Advocates and Parents will find this meeting of importance and value in enhancing their effectiveness in serving children in need

REGISTRATION:

VIRTUAL	Student	Professional
Early Bird	\$50	\$75
Regular	\$75	\$100
IN PERSON	Student	Professional
Early Bird	\$100	\$125
Regular	\$125	\$150



REGISTRATION
app.ce-go.com/cicamh2023



Children, Youth & Families Council

February 12, 2023 & March 13, 2023 CYF Council Meeting
Constituencies Updates

Juvenile Court
Judge Ana España
Staff Attorney Beth Brown

Areas of Focus

July to December 2022

Highlights from
constituency
which is not
meant to be all
inclusive

- Institutional and community programming for youth in the juvenile justice system, with an emphasis on the new secure youth treatment facility (Youth Development Academy)
- Alternatives to detention
- Use of case plans in all juvenile justice cases
- Wrap services for families in crisis, regardless of funding source
- FFPSA – child specific funding and Children's Crisis Continuum Pilot



Looking Ahead to 2023

Highlights as it relates to
CYF Council
Not All Inclusive of this
Group's Work

We plan to continue to work collaboratively with our justice partners on the work of the last six months, with a focus on:

- Programs and services to help youth and families
- Use of case plans that are tailored to the youth and family
- Breaking down systemic barriers that cause disruptions and delays in services

Where to Learn More

- For information about the San Diego Juvenile Court, visit:
<https://www.sdcourt.ca.gov/sdcourt/juvenile3>

Creating Opportunities in Preventing & Eliminating Suicide (COPES) School District Meeting

Education Sub-Committee

February 13, 2023

Background

- The Mental Health Student Services Act (MHSSA) was passed in 2019 to establish partnerships between County Behavioral Health Departments and County Offices of Education to expand mental health services to students across the State of California
- The San Diego County Behavioral Health Department and San Diego County Office of Education were awarded a four-year \$7 million grant from January 2022 to December 2026.

Participating School Districts

1. Bonsall Unified
2. Cajon Valley Union
3. Chula Vista Elementary
4. Fallbrook Union Elementary
5. JCCS
6. Lakeside Union
7. La Mesa-Spring Valley
8. Lemon Grove
9. Mountain Empire Unified
10. National
11. Poway Unified
12. San Marcos Unified
13. San Diego Unified
14. Santee
15. Spencer Valley
16. Sweetwater Union High

Participating Charter Schools

Single Site Charters

1. City Heights Preparatory Charter School
2. Compass Charter Schools of San Diego
3. Empower Language Academy
4. Feaster Charter School
5. Helix Charter High
6. Motivated Youth Academy
7. Mueller and Bayfront Charter School
8. San Diego Global Vision Academy
9. San Diego Virtual School
10. Scholarship Prep Oceanside
11. School for Entrepreneurship and Technology
12. Urban Discovery Schools

Multi-Site Charters

1. Audeo Charter Schools
2. Julian Charter Schools
3. High Tech High
4. Learning Choice Academy
5. SIA Tech Charter Schools

Grant Goals & Objectives

Mental Health Promotion & Stigma Reduction

Trainings

Resources/Tools

Student Programming

Cultivate Staff, Student &
Caregiver Wellness

Suicide Prevention, Intervention & Postvention

Policy to Practice

Screenings/Assessments

Data Collection

Trainings

School Mental Health Referral Pathways

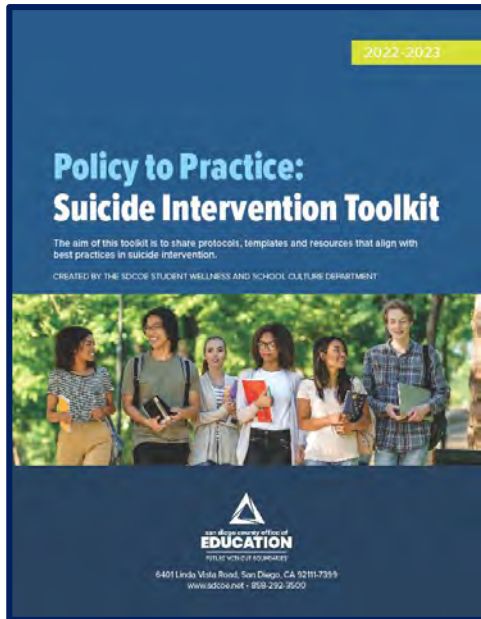
Multi-year process

Needs Assessments

Resource Mapping

Build Partnerships

Suicide Risk Screenings



- Adapting evidenced based suicide risk screening tool
- Policy to Practice: Suicide Intervention Toolkit
- Enhancing intervention protocols
- Reporting suicide risk screening data

Comprehensive Needs Assessments

**Student Mental
Health Referral
Processes**

**Mental Health
Services and
Supports for
Students**

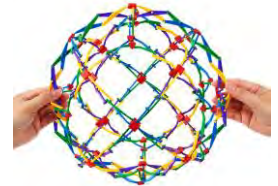
**Suicide
Prevention,
Intervention &
Postvention**

**Mental Health
Promotion**

Peer Engagement

Calming Corners in 466 COPES Schools

- ❖ 1 calming corner kit/school
- ❖ Arriving in January-February
- ❖ Will include:
 - Bean bag chair
 - Fidget set
 - Hug ball
 - Breathing ball
 - Liquid timers
 - Weighted lap puppy
 - Mental health posters
 - Noise cancelling headphones



Grant Year 2 Focus: Jan. 2023-Dec. 2024

Evaluation and Data Collection/Annual Brief



Identified Needs Assessment Areas



Ongoing Training and Technical Assistance



Implement Programming

Questions & Comments

Student Wellness & School Culture



Heather Nemour
Coordinator

[*heather.nemour@sdcoe.net*](mailto:heather.nemour@sdcoe.net)

Children, Youth & Families Council

February 13, 2023

Cultural Competence Resource Team (CCRT) Update

Rosa Ana Lozada, LCSW



Areas of Focus

July to December 2022

- Health Care Disparities discussions
- Provided recommendations to the Community Experience Partnership (CEP) dashboard:
<https://www.communityexperiencepartnership.com/>
- Participation in the Statewide Interdisciplinary Collaboration and Cultural Transformation Model (ICCTM) Learning

Looking Ahead 2023

- Implementation of Cultural Competence Plan: Review of three Legal Entities' practices in implementing Culturally and Linguistically Appropriate Services (CLAS) Standards
- Coordination of Efforts/Enhanced Cross Threading: Expand CCRT membership
- Health Care Disparities:
 - ✓ Participate in the Community Experience Partnership (CEP) community engagement focus groups
 - ✓ The CCRT Education and Training committee will work with the BHS Data Team to review selected dashboard metrics to identify strengths and areas of further development and present to CCRT for input and recommendations to BHS

Ways to get involved with Constituency

The Cultural Competence Resource Team (CCRT) meets on the first Friday of the month via Zoom.

To be added to the e-mail invitation, please contact Andrea Durón at:

Andrea.Duron@sdcounty.ca.gov

Introducing Culture Share

Cultural Share

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 Principle #8: Culturally Competent: Services and supports respect diverse beliefs, identities, cultures, preference, and represent linguistic diversity of those served.

About CYF Council Cultural Share:

Culture share is a time to advance and integrate cultural learning, understanding, and practices into our work. This sharing experience can honor and celebrate family, history, traditions, and practices that may bring joy and well-being. It can also bring discomfort, curiosity and bias awareness. Ultimately, it is an opportunity for self reflection and enlightenment that can enhance our capacity to provide culturally responsive services to the children, youth, and families in our community.

Structure:

- ❖ One individual shares a **2-minute Culture Share** at the beginning of each CYF Council meeting
 - Rotate between sectors
- ❖ Sharing of a personal or work-related cultural experience and connecting it to how it has enhanced culturally responsive practices/services.

Cultural Share

Did you know that...



There are many legends on
the origin of Valentine's
Day,
typically celebrated on
February 14th

Día del Amor y la Amistad

- ❖ In México, Valentine's Day is known as El Día del Amor y la Amistad (The Day of Love and Friendship)
- ❖ The Mexican culture embraces this day by appreciating family and friends through unique traditions and expressions of love

My Experience...

- ❖ **Family gathering**
 - The meal has a theme of pink and red
 - verbal and written appreciation messages



Why is it important in behavioral health?

Acknowledges that some may experience:

- ❖ Feelings of loneliness and isolation
- ❖ Lack of connection
- ❖ Low self worth

Expands:

- ❖ Connections and relationships with ourselves and with others



At Harmonium, we will..

Spread the connection, love and friendship by:

- ❖ Staff will be provided a template to create a heartfelt message to send to at least one person outside of the agency



**How will you spread the
connection, love, and Friendship?**



Black History Month

Honoring Jacob Armstead Lawrence's artwork

Jacob Armstead Lawrence was an American painter known for his portrayal of African-American historical subjects and contemporary life. Lawrence referred to his style as "dynamic cubism", although by his own account the primary influence was not so much French art as the shapes and colors of Harlem.

- [Wikipedia](#)



September 7, 1917 - June 9, 2000



DEPARTMENT OF HOMELESS SOLUTIONS AND EQUITABLE COMMUNITIES

Rosa Gracian

Deputy Director

HHSA Office of Equitable Communities

*Department of Homeless Solutions & Equitable Communities
County of San Diego Health and Human Services Agency (HHSA)*





**Department of Homeless Solutions
and Equitable Communities**
Barbara Jiménez, Community Operations Officer



**Office of
Homeless
Solutions**
Dijana Beck
Director



**Office of
Equitable
Communities**
**Jennifer
Bransford-Koons**
Director



**Office of
Immigrant and
Refugee Affairs**
**Lucero
Chavez Basilio**
Director

Department Focus: To achieve better coordination of existing and new County homeless and equitable community efforts and serve as a central point of collaboration for outside partners to ensure equity among all San Diegans and reduce homelessness in the region.

OFFICE OF HOMELESS SOLUTIONS (OHS)



LIVE WELL
SAN DIEGO

Focus

Homeless Housing,
Assistance, and
Prevention Program

Community Care
Coordination for
Veterans

Housing and Disability
Income Advocacy
Program

Domestic Violence
Shelter Based Programs
Services

Housing Our Youth

Whole Person Care
One-Time Housing
Funds Program

Direct outreach & system coordination

Systems &
Integration Branch

Services & Outreach
Branch

Highlighted Projects

Safe Parking at Magnolia

Housing Our Youth



OFFICE OF EQUITABLE COMMUNITIES (OEqC)



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Programs and Projects

Regional
Community
Coordination

Community
Health
Engagement
Team (CHET)

Community
Action
Partnership

Community
Health Worker
(CHW) Liaisons
and CHWs

Community engagement at the core:

Outreach is
culturally
appropriate,
trauma-
informed and
inclusive

Highlighted Projects

Community Health Workers

Family First



OFFICE OF IMMIGRANT AND REFUGEE AFFAIRS (OIRA)



LIVE WELL
SAN DIEGO

Focus

Regional expert
and leader in
immigrant and
refugee affairs

Provider of
information,
referrals, and
resources

Programs:

Refugee Employment
Services

Support & Connect to
Public Defender Legal
Defense Program

Other OIRA Programs

Highlighted Projects

First 5 CA Refugee Family
Support Program



LIVE WELL SAN DIEGO REGIONAL COMMUNITY LEADERSHIP TEAMS



LIVE WELL
SAN DIEGO

WE ENCOURAGE YOUR PROGRAMS TO JOIN US!



South

- 2nd Monday at 2PM
- Focus Areas:
 - Mental Health
 - Food Insecurity
 - Homelessness



Central

- 4th Monday at 1:30 PM
- Focus areas:
 - Health & Well-Being
 - Housing for All
 - Education & Economic Vitality



North Central

- 2nd Wednesday at 11AM
- Focus areas:
 - Youth and Families
 - Food Security and & Homelessness Reduction
 - Behavioral Health



East

- 3rd Thursday at 10:30 AM
- Focus areas:
 - Behavioral Health /Prevention and Early Intervention
 - East Region Thriving Communities
 - Children and Families



North Region

- 1st Wednesday at 10 AM (dark quarterly)
- Focus Areas:
 - Mental Health
 - Substance Abuse
 - Homelessness



THANK YOU!

Rosa Gracian, MBA

Office of Equitable Communities

Department of Homeless Solutions & Equitable Communities

Rosa.Gracian@sdcounty.ca.gov



LIVE WELL
SAN DIEGO

Children, Youth & Families Council

February 12, 2023 & March 13, 2023 CYF Council Meeting
Constituencies Updates

Public Health

Dr. Tom Coleman and Rhonda Freeman

Areas of Focus

July to December 2022

Highlights from
constituency
which is not
meant to be all
inclusive

- COVID-19, MPX, RSV, Influenza
- Continued to assess the impact of the sunset of the Child Health and Disability Prevention (CHDP) Program → due to sunset July 1, 2024
- Began an assessment of the impact of the transition of the Comprehensive Perinatal Services Program (CPSP) to Medi-Cal Managed Care
- Continued implementation of the Tobacco Retail License program in the incorporated area to prevent youth from purchasing tobacco products



Looking Ahead to 2023

Highlights as it relates to
CYF Council
Not All Inclusive of this
Group's Work

- Determining challenges and opportunities as CalAIM/SDAIM progresses (e.g., now that the Children & Youth Populations of Focus, and Pregnant and Postpartum Individuals at Risk for Adverse Perinatal Outcomes areas will begin implementation within the next year) → plan for sunset of CHDP and transition of CPSP
- Expand Black Infant Health and California Home Visiting Program programmatic areas, as well as other “birth equity” initiatives (e.g., continuation of the Perinatal Equity Initiative)
- Continue our Local Oral Health Program efforts to ensure that children are given every opportunity to grow and learn optimally → signature Give Kids A Smile event on Saturday, February 25th and March 4th



Looking Ahead to 2023 (cont.)

Highlights as it relates to
CYF Council
Not All Inclusive of this
Group's Work

- Implement a comprehensive assessment of the current system for children and youth with special health care needs
- Continue implementation of the Tobacco Retail License program in the unincorporated area

Fun Fact About Public Health



Of the eleven identified County/City of San Diego Public Health Officers, only two women have occupied the post and Dr. Wilma Wooten has been one of the longest serving incumbents, as she has occupied the post since February 2, 2007.

Ways to get involved with Constituency

- The Public Health Services website is located at [Public Health Services \(sandiegocounty.gov\)](https://www.sandiegocounty.gov/publichealthservices)
- And the Maternal, Child, and Family Health Services website is located at [Maternal, Child and Family Health Services \(sandiegocounty.gov\)](https://www.sandiegocounty.gov/maternalchildfamilyhealthservices)
- And, of course, please reach out to me, thomas.coleman@sdcounty.ca.gov, or Rhonda, rhonda.freeman@sdcounty.ca.gov, for any questions about our Branch or the Public Health Services Department as well.

Children, Youth & Families Council

February 12, 2023 and March 13, 2023 CYF Council Meeting
Constituencies Updates

Heather Summers, SDAIM Deputy Director
Medical Care Services

Medical Care Services Areas of Focus

July to December 2022

- Public Health Nursing
- CalAIM
- Juvenile Justice
- Outreach and Education to Health Professionals – COVID and beyond

MCS Leadership Team



Eric McDonald, MD
Chief Medical Officer



Jamie Beam, MPA
Assistant Director



Denise Foster, DNP
Chief Nursing Officer



Kelly Motadel, MD
Child Health Officer



Heather Summers, MSW
Deputy Director, Depart Ops



Jennifer Tuteur, MD
Deputy Chief Medical Officer



Emily Do, PharmD
Chief Pharmacy Officer



Lindsey Yourman, MD
Chief Geriatric Officer



Tom Olinger, DDS
Chief Dental Officer



Sayone Thihalolipavan, MD
Public Health Medical Officer,
Justice-Involved Health



Public Health Nursing Update

- The Public Health Nurses provided home visiting services to 270 families enrolled in the evidence-based Nurse Family Partnership Program.
- The Public Health Nurses provide home visiting services to 528 families enrolled in the HHSA developed Maternal Child Health home visiting program.
- The Regional Public Health Centers administered over 37,000 childhood vaccinations.
- The Public Health Centers and the COVID response team administered over 6,400 COVID vaccinations to pediatric patients.



California Advancing and Innovating Medi-Cal (CalAIM)

- CalAIM is an initiative of the Department of Health Care Services to improve the quality of life and health outcomes for Medi-Cal members.
- Key features of CalAIM are Enhanced Care Management (ECM) and Community Support services.
- ECM provides comprehensive care management using a whole-person, interdisciplinary approach to address clinical and non-clinical needs of the most vulnerable Medi-Cal members.
- Beginning July 1, 2023, children and youth Medi-Cal members who meet the below criteria will be eligible to receive ECM services:
 - Homeless Families or Unaccompanied Children/Youth Experiencing Homelessness
 - At Risk for Avoidable Hospital or ED Utilization
 - Serious Mental Health and/or Substance Use Disorder Needs
 - Enrolled in California Children's Services (CCS) or CCS Whole Child Model (WCM) with Additional Needs Beyond the CCS Condition
 - Involved in Child Welfare
 - Intellectual/Developmental Disability
 - Youth Pregnant and Postpartum Individuals At Risk for Adverse Perinatal Outcomes



Justice Involved Health

- San Diego County Probation Dept. has an RFI#12199 for Medical Care Services in the Juvenile Detention System, and MCS has been supporting them with updating their contract with medical, nursing, and pharmacy guidance.
- MCS continues to assist Probation with updating their COVID protocols in juvenile detentions as new corrections guidance is released.
- MCS is supporting CalAIM efforts in juvenile detentions to enhance the pre-release Medi-Cal enrollment process. The County has received PATH Justice Involved round one funding and are applying for round two funding to support coordination, planning, and implementation efforts.



Looking Ahead to 2023

- CalAIM – pediatric implementation
- Home Visiting Program – improved timeliness in referral response
- GREAT: Grand Rounds Educational Alliance & Transformation – continuing education for healthcare professionals within the County
- Intergenerational collaboration with Chief Geriatrics Officer and Chief Pediatric Officer
- Funding and CalAIM benefits for Justice Involved Juveniles
- Full-time Chief Dental Officer

The MCS Outreach and Education Team, MCS provided academic detailing and successfully engaged with 881 healthcare practices in 25 zip codes with the lowest health equity quartile in the County.



Fun Fact About Medical Care Services



Ways to get involved with Constituency

- [Medical Care Services \(sandiegocounty.gov\)](https://sandiegocounty.gov)
 - [Child Health \(sandiegocounty.gov\)](https://sandiegocounty.gov)
- [CalAIM](#)
- [MCS Outreach and Education \(smartsheet.com\)](https://smartsheet.com) – join the distribution list
- [SDAIM \(sandiegocounty.gov\)](https://sandiegocounty.gov)

Children, Youth & Families Council

February 12, 2023 & March 13, 2023 CYF Council Meeting
Constituencies Updates

Child Welfare Services
Jerelyn Bourdage, Policy Analyst
Norma Rincon, Deputy Director

Areas of Focus

July to December 2022

Highlights from
constituency
which is not
meant to be all
inclusive

- **Annual Statistic: Fiscal Year 2021-2022**
 - As of July 1, 2022, there were 2,967 children and youth in open CWS cases
 - 39.9% fewer children in care from previous fiscal year
- **Faith In Motion**
 - Collaboration with faith-based organizations (goal is to have 100 churches participate) focusing on recruitment and support of relative caregivers and foster/adoptive parents
- **Live Well Center for Innovation and Leadership**
 - Partnership with HHSA and SDSU to increase internship options and hands-on training opportunities for students in child welfare, aging, behavioral health, and housing insecurity
- **Consulate General of Mexico**
 - Signed a renewed agreement for consular assistance in cases of custody involving Mexican children in San Diego
 - Expand and include staff training about services available for Mexican national children and families to better engage families and connect them to culturally relevant supports and services
- **Secondary Traumatic Stress (STS) Initiative**
 - Ongoing implementation of CE-CERT (Components for Enhancing Clinical Engagement and Response to Trauma) Training for staff to manage STS in real time

Areas of Focus

July to December 2022

Highlights from
constituency
which is not
meant to be all
inclusive

- **AB2083**

- MOU approved 3/15/21
 - Outlines roles and responsibilities of system partners serving children and youth in foster care who have experienced severe trauma
 - System partners include CWS, BHS, Probation, SDCOE, and SDRC
- Interagency Leadership Team (ILT)
 - Executive leadership of all involved system partners engage in shared responsibility to address the needs of children and youth in care, address service gaps, and to provide guidance, leadership, and engage in solution focused discussions about children and youth with complex care needs
 - System partners include CWS, Probation, SDRC, Education, Juvenile Court, and BHS
- AB2083 Operations Team
 - Improves service coordination, identify and address service gaps and system barriers, increase collaboration, explore and evaluate data related to cross system efforts, and discuss case specific strategies for youth with complex care needs
 - Team includes CWS, BHS, Probation, SDRC, Voices for Children, SDCOE, Department of Rehabilitation, and Tribal Services



Looking Ahead to 2023

Highlights as it relates to
CYF Council
Not All Inclusive of this
Group's Work

- **Child and Family Well Being Department**
 - Office of Child and Family Strengthening
 - Office of Child Safety
 - Administration
- **Family First Prevention Services Act (FFPSA) Pilot**
 - North County Lifeline
 - South Bay Community Services
 - San Diego Center for Children
- **Rite of Passage**
 - Assuming operations at San Pasqual Academy on March 4, 2023
- **Community Response Guide**
 - Help communities develop accurate and equitable reporting practices to the Child Abuse Hotline
 - Reporters have clear support for their decisions
 - Prevention providers understand their responsibility for supporting children and families

Fun Fact About Child Welfare Services

Camp Connect is a public-private partnership between Child Welfare Services and [Promises2Kids](https://www.promises2kids.org) that provides monthly activities for siblings that are separated by their placement in the foster care system.

Events occur throughout the year, including a four-day summer camp in Julian.



CAMP CONNECT

EVENTS

Check out our upcoming events this year!

Jan 21-22	SeaWorld Overnight Throughout the day siblings can go on rides, explore the park, and see Orcas, Sea Lions, Penguins, Otters, Turtles, Manta Rays, Sharks, Dolphins and more.
Feb 18	Deep Sea Fishing Camp Connect will enjoy the finest half day fishing on the West Coast. We can expect to catch a variety of gamefish including Yellowtail, Bass, Barracuda, Bonito, or Rock Fish.
Mar 18	Camp Connect Carnival Camp Connect will host a Spring Carnival for all ages! We are hoping to "spring" into the new season with classic carnival games, popcorn, face painting, balloon art and lots of fun prizes.
Apr 29-30	Roar & Snore Let's pack our "trunks" for a sleepover adventure at the Safari Park! This sleepover includes an after-hours look at wild life, guided walks, a campfire program, dinner, and breakfast the following morning.
May 27	Legoland Camp Connect will host a day at Legoland. With a day full of thrill rides and Lego people, Camp Connect will "build" sibling relationships and lasting memories.
Jun 24	Lagoon Day Camp Connect youth will spend a day in the California sunshine with access to a private lagoon and outdoor activities. The adventure is not complete without BBQ food and all the fixings.

Scan below to register



For more information:
(858) 290-8571 or christy@promises2kids.org

Ways to get involved with Constituency

- [Child Welfare Services](#) or call the KidsLine at 877-792-KIDS (5437)
- [Child and Family Well-Being](#) (CFWB)
 - CFWB One Pager ([English](#), [Spanish](#))
 - [Request a presentation](#)
- [Camp Connect](#)
 - To learn more about Camp Connect, contact [Christy Mader](#) at 858-751-6613
 - To learn more about volunteering for Camp Connect, contact [Jenn Belgrade](#) at (858) 751-6633
 - [Camp Connect FAQ](#)
- Foster Youth Mentors
 - Email [Kim Hinck](#) or call 858-614-9146
- [Voices for Children](#) (Volunteer to be a Court Appointed Special Advocate)

Children, Youth & Families Council

February 12, 2023 & March 13, 2023 CYF Council Meeting
Constituencies Updates

Health Care / Pediatricians Voice
Dr. Pradeep Gidwani

Areas of Focus

July to December 2022

Highlights from
constituency
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meant to be all
inclusive

- The local Chapter of the American Academy of Pediatrics (AAP-CA3) convenes a regular Developmental/Behavioral Pediatrics committee meeting
- Pediatricians are the number referral source for Healthy Development Services who provides behavioral health services for children 0-5
- Address mental health issues in general and are experiencing greater needs and number with COVID



Looking Ahead to 2023

Highlights as it relates to
CYF Council
Not All Inclusive of this
Group's Work

- Encouraging the AAP-CA3 to hire some to develop and coordinate a system of care similar to HDS for older children and their families
- Incorporating the Health Outcomes from Positive Experiences (HOPE) into the ACEs screening work

Fun Fact
About Health
Care /
Pediatricians
Voice



When parents are concerned for their children health including their mental health, their pediatrician is often the first person they talk to.

Ways to get involved with Constituency

- AAPCA3.org
- Contact me – at pgidwani@aapca3.org or 619-886-6562

Children, Youth & Families Council

February 12, 2023 & March 13, 2023 CYF Council Meeting
Constituencies Updates



San Diego Regional Center
Zach Guzik, Manager of Client Services
Children and Transitional Aged Youth

Areas of Focus

July to December 2022



Highlights from
constituency
which is not
meant to be all
inclusive

Initiatives we've focused on in partnership with DDS include:

- The American Rescue Plan Act (ARPA) Part C Project is a pilot project to increase Early Start enrollment for children from communities with low participation rates.
- The Language Access & Cultural Competency (LACC) initiative will facilitate consistent access to information and services for multi-lingual, monolingual, and diverse cultural groups.
- Early Start outreach for Tribal Communities is an initiative where we are taking the lead to raise awareness and knowledge of Early Start services.
- Expansion of Social Recreation programs that have been restored to include broader activities.



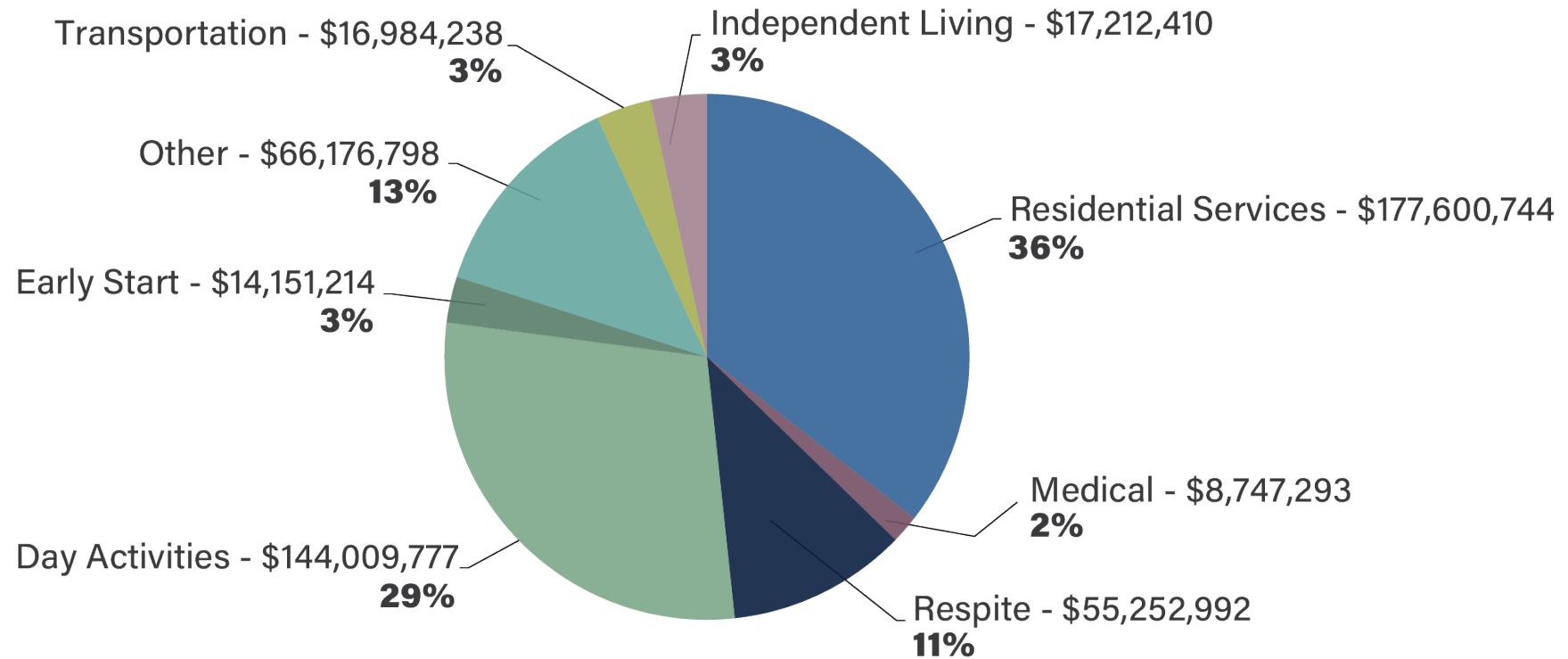
Looking Ahead to 2023

- Mark Klaus, Executive Director, is working with State legislators on continued improvements in the IDD landscape.
- The initiatives we implemented in 2022 will continue developing in 2023

Purchase of Services Expenditures

2021-2022

\$500,135,466 (Estimated)



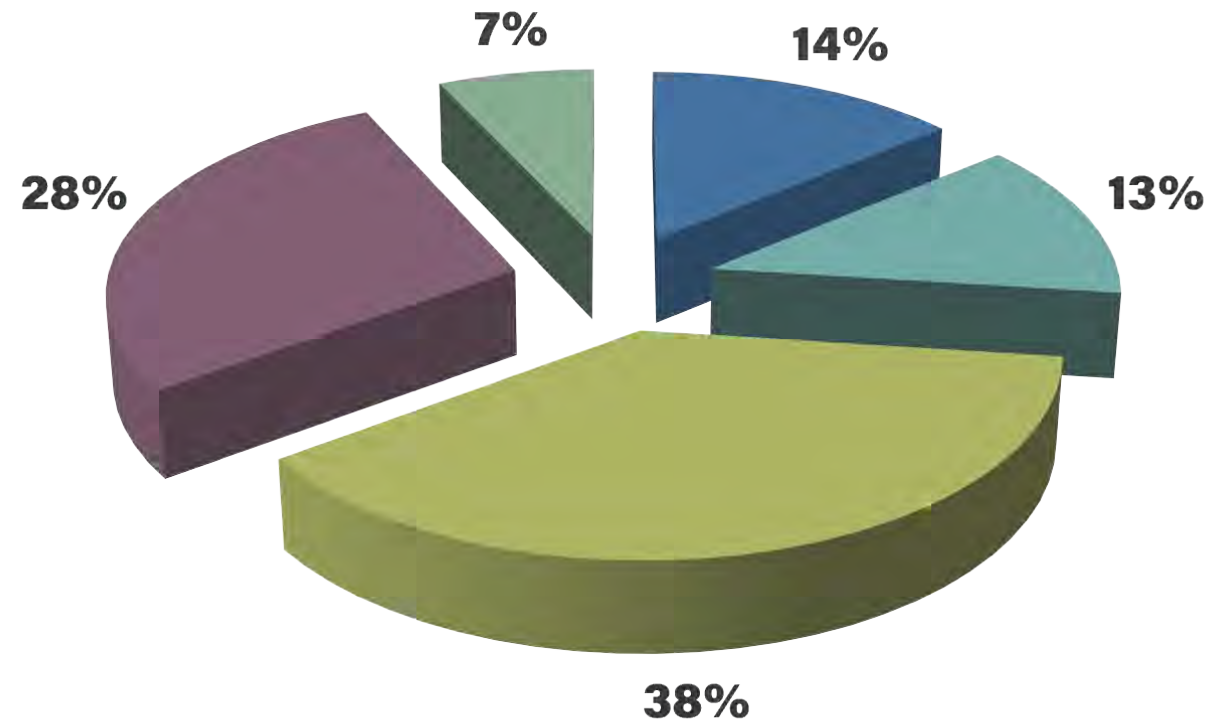
SDRC Growth

2021-2022



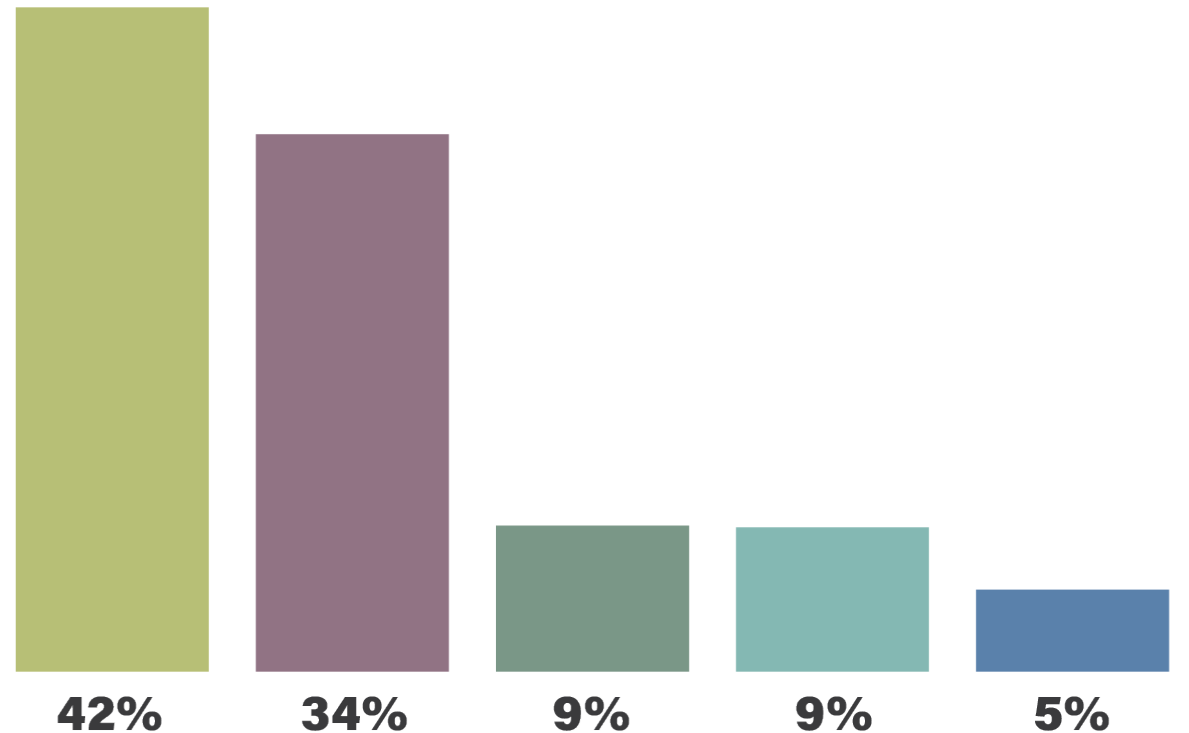
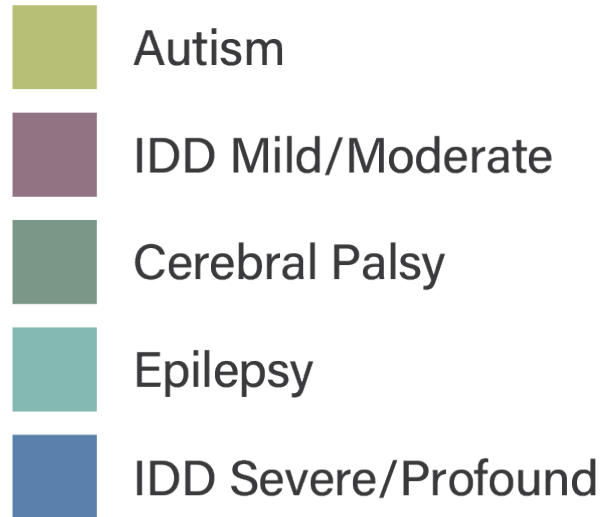
Age of Clients

Age of Clients



Diagnosis of Clients

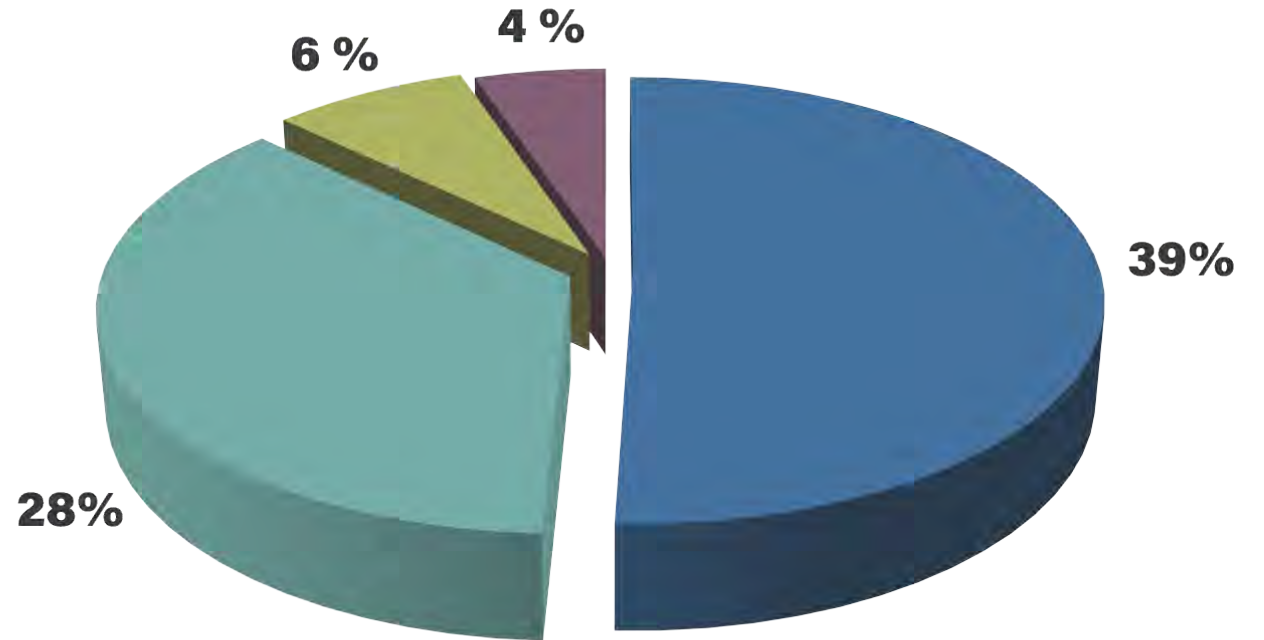
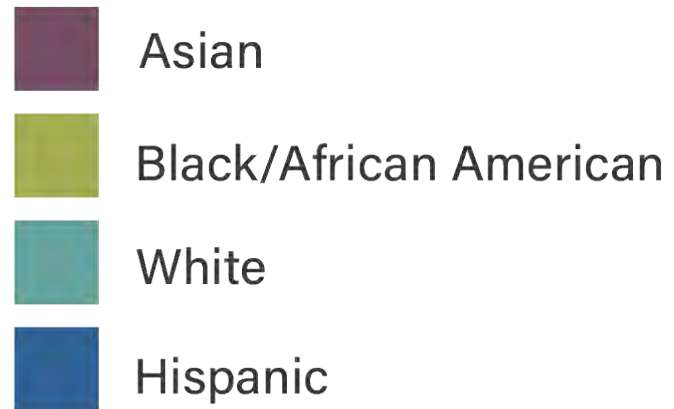
Diagnosis of Clients



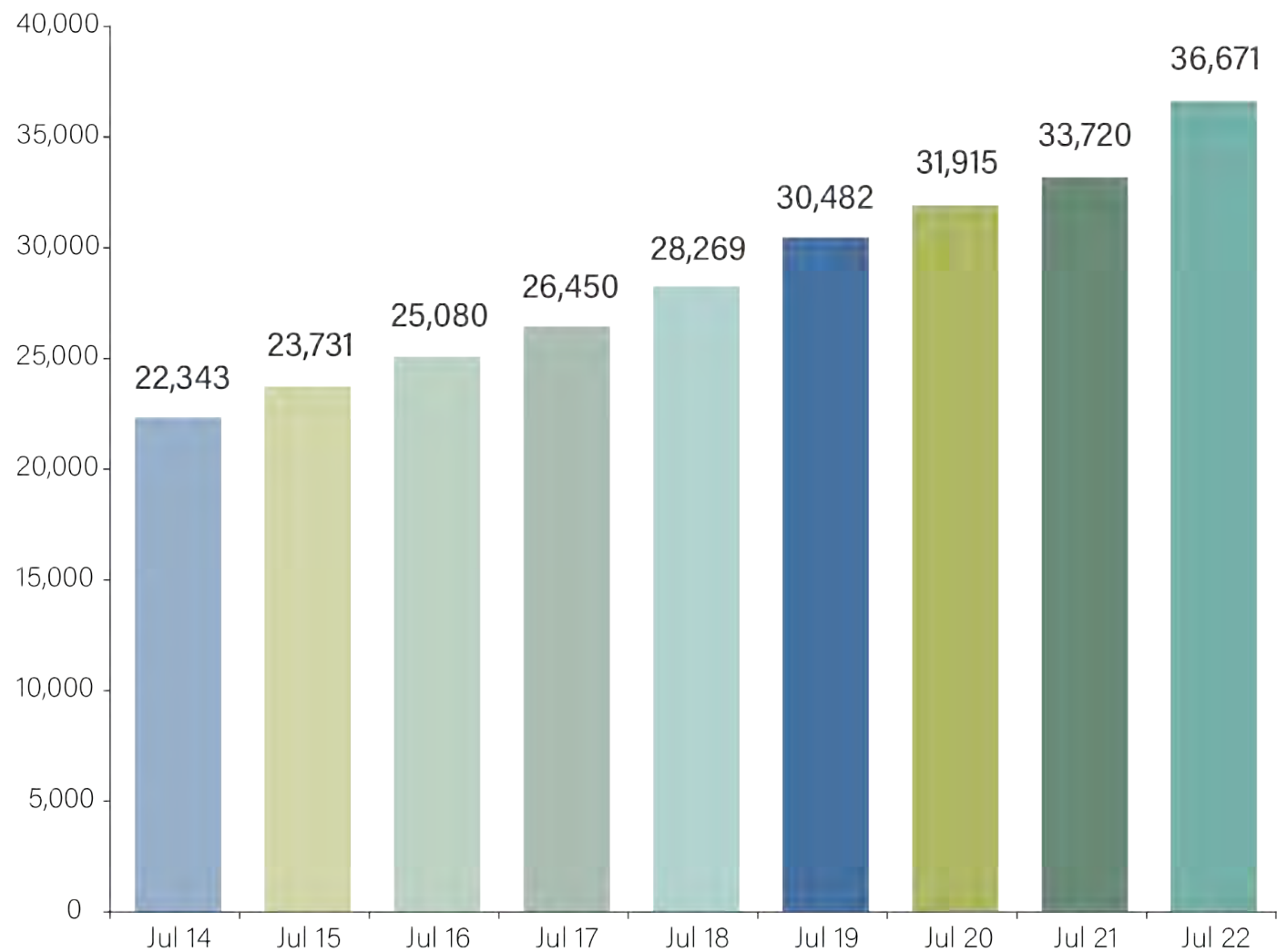
(Clients may have more than one diagnosis)

Ethnicity of Clients

Ethnicity of Clients

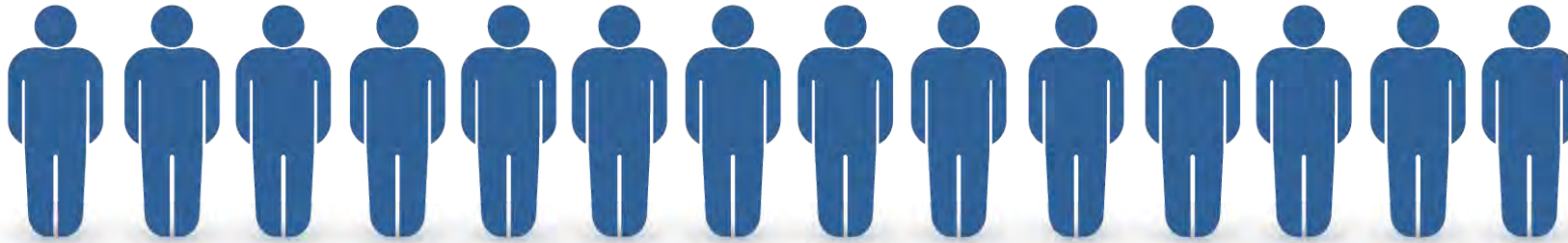


Total Clients



Where Clients Live

Home of Parent/Guardian **84%**



Community Care Facility/
Intermediate Care Facility
8%



Independent Living Services/
Supported Living Services
6%



Family/
Foster Home
1%



Other
1%





SDRC serves more than 37,500 people with developmental disabilities in San Diego & Imperial counties.

Ways to get involved with Constituency

www.sdrc.org

Supporting our service providers, advocating for people with developmental disabilities, attending board meetings, and joining one of our committees.

Children, Youth & Families Council

February 12, 2023 & March 13, 2023 CYF Council Meeting
Constituencies Updates

Alcohol and Drug Service Provider Association
Marisa Varond

Areas of Focus

July to December 2022

Highlights from
constituency
which is not
meant to be all
inclusive

- Responding to the behavioral health workforce crisis
- CalAIM reform
- Reducing administrative burdens
- Network adequacy, access times, data entry
- Peer Support Specialist certification
- Comprehensive Harm Reduction Strategy
- Contracting and procurement advocacy



Looking Ahead to 2023

Highlights as it relates to
CYF Council
Not All Inclusive of this
Group's Work

In addition to the work already under way...

- Implementation of the Behavioral Health Workforce Shortage BOS action
- Responding to the overdose epidemic
 - Increasing access to care for folks who have not historically engaged in care
 - Supporting community awareness of available resources
 - Expanding Naloxone distribution practices
 - Assessing provider readiness and developing capacity to respond to overdoses in real time

Fun Fact About
Alcohol and
Drug Service
Provider
Association

ADSPA's membership includes:

- 36 legal entities
- 75 SUD-related programs
- 160+ BHS contracts



Ways to get involved with Constituency

Email us at admin@adspa.org!

Children, Youth & Families Council

February 12, 2023 & March 13, 2023 CYF Council Meeting
Constituencies Updates

Mental Health Contractors Association
Laura Beadles, Golby Rahimi Saylor

Areas of Focus

July to December 2022

Highlights from
constituency
which is not
meant to be all
inclusive

- Focused on the following areas in meeting with BHS Executive team:
 - Operational contracting improvements for improved program design and service delivery
 - Fiscal contract improvements for improved service delivery, fiscal management, and maximizing budgets
 - CalAIM implementation impact on contractors
 - Quality assurance and transition to CalAIM reform
 - Data quality and reliability



Looking Ahead to 2023

Highlights as it relates to
CYF Council
Not All Inclusive of this
Group's Work

- Collaborate with BHS on issues around workforce recruitment and retention to minimize service interruptions and meet community need, with a focus on DEI
- Support contracts in implementation of Peer Support Specialist Certification
- Collaborate with ADSPA and BHS to align goals for all service levels
- Continue focus on operational and fiscal contracting improvements in collaboration with BHS
- Continue to work with BHS and QI on rollout of CalAIM
- Continue to co-chair Financial Workgroup
- Continue to support the QI Leadership Workgroup

Fun Fact About Mental Health Contractors Association



- MHCA is a 501(c)(6) corporation
- MHCA was form in 1981, representing the interest of San Diego County contractors for 42 years. MHCA currently has nearly 30 member agencies
- MHCA is an affiliate member for the California Council of Community Behavioral Health Agencies (CCBHA)
- The MHCA Board is culturally diverse, including diversity in culture, gender, and lived experience. The board is comprised of representatives in leadership positions from 9 BHS contracting agencies

Ways to get involved with Constituency

- Agencies contracting with BHS can join MHCA. Please contact MHCA Coordinator Teresa Brady, mhcasandiego@gmail.com
- www.mhcasandiego.org

Children, Youth & Families Council

February 12, 2023 & March 13, 2023 CYF Council Meeting
Constituencies Updates

Managed Care Plans – Healthy San Diego
Dr. Kathleen Lang

Areas of Focus

July to December 2022

Highlights from
constituency
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- California Department of Health Care Services (DHCS) for Medi-Cal Managed Care Plans procurement
 - San Diego County results, confirmed by DHCS on 12/30/22, effective 01/01/2024
 - Blue Shield Promise
 - Community Health Group
 - Kaiser Permanente
 - Molina
- California Advancing and Innovating Medi-Cal (**CalAIM**) – transform and strengthen Medi-Cal, offering Californians a more equitable, coordinated, and person-centered approach to maximizing their health and life trajectory
- Housing and Homelessness Incentive Program (**HHIP**) – voluntary incentive program that will enable Medi-Cal managed care plans (MCPs) to earn incentive funds for making progress in addressing homelessness and housing insecurity as social determinants of health
- Student Behavioral Health Incentive Program (**SBHIP**) – support new investments in behavioral health services, infrastructure, information technology and data exchange, and workforce capacity for school-based and school-affiliated behavioral health providers
- CalAIM Providing Access and Transforming Health Initiative (**PATH**) – build up the capacity and infrastructure of on-the-ground partners, such as community-based organizations (CBOs), public hospitals, county agencies, tribes, and others, to successfully participate in the Medi-Cal delivery system



Looking Ahead to 2023

Highlights as it relates to
CYF Council
Not All Inclusive of this
Group's Work

- New CalAIM ECM Children and Youth Populations of Focus goes live statewide on July 1, 2023
 - Children and Youth Experiencing Homelessness
 - Children and Youth At Risk for Avoidable Hospital or Emergency Department (ED) Utilization (Formerly “High Utilizers”)
 - Children and Youth with Serious Mental Health and/or Substance Use Disorder (SUD) Needs
 - Children and Youth Enrolled in California Children’s Services (CCS) or CCS Whole Child Model (WCM) with Additional Needs Beyond the CCS Condition
 - Children and Youth Involved in Child Welfare
 - Children and Youth with Intellectual or Developmental Disabilities (I/DD)
 - Children and Youth who are Pregnant and Postpartum At Risk for Adverse Perinatal Outcomes

It's like competing with your best friend right beside you. They are phenomenal competitors who only make each other better.

Bev Kearney



Fun Fact About Managed Care Plans

Ways to get involved with Constituency

- San Diego Collaborative Planning and Implementation Group
[PATH | TPA \(ca-path.com\)](http://ca-path.com)
 - San Diego's PATH Collaborative Planning and Implementation (CPI) Initiative consists of a diverse set of stakeholders from across the system of care
 - The CPI Collaborative works to identify and address specific implementation issues related to the implementation of Enhanced Care Management (ECM) and Community Supports (CS) as a part of CalAIM
 - Initial areas of focus of the San Diego Collaborative may be homelessness, severe mental health / substance use disorder (SMI/SUD) and other chronic conditions / comorbidities
 - Thus far, 30 organizations from across the system of care have registered as a Collaborative participant

Children, Youth & Families Council

February 12, 2023 & March 13, 2023 CYF Council Meeting
Constituencies Updates

Outcomes Committee

Eileen Quinn-O'Malley & Emily Trask

Areas of Focus

July to December 2022

- Identified quality of care indicators for STRTPs
- Reviewed new STRTP dashboards to improve quality of care
- Developed Outcomes sub-committee of LGBTQ+ stakeholders
 - Stakeholders reviewed data for LGBTQ+ clients as part of the PIP project



Looking Ahead to 2023

- Review group work data (e.g., SchooLink dashboard)
 - What data is missing?
 - What does data suggest for increasing access to group therapy?
 - What are the barriers to providing group therapy?
- Review PIP Intervention data
 - Did clients report more satisfaction?
 - Did clients report more access to LGBTQ+ specific services?

Ways to get involved with Constituency

- Next Meeting is March 7th, 11:30-12:30pm via Teams
 - Contact Eileen Quinn-O'Malley for meeting link if you are interested in joining the discussion: eileen.quinn-omalley@sdcounty.ca.gov

Children, Youth & Families Council

February 12, 2023 & March 13, 2023 CYF Council Meeting
Constituencies Updates

Change Agents Developing Recovery Excellence
(CYF CADRE)
Marisa Varond and Julie McPherson

Areas of Focus

July to December 2022

Highlights from
constituency
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inclusive

- Technical assistance on the annual CCISC Report
- Teen vaping trends, resources and treatment, including new Early Intervention services in Teen Recovery Centers
- Community Experience Partnership as a tool to start identifying and responding to health disparities
- Assessing programs' co-occurring capability; review of the COMPASS, DDCMHT, DDCAT purpose and goals



Looking Ahead to 2023

Highlights as it relates to
CYF Council
Not All Inclusive of this
Group's Work

- Reinstating the DDCMHT evaluation of co-occurring capability among CYF MH programs with SUD counselors.
- Dialogue within the sectors to address changes to the system and impacts, both positive and negative, related to CalAIM.
- Continue to enhance ease of cross-referrals and access to services for children, youth, and families who are impacted by complex needs.
- Reinstate and maximize on-site SchoolLink behavioral health services as permitted.
- Keep providers up to date regarding specialized MAT services for youth in San Diego County.
- Engagement and participation in prevention, education and early intervention in SUD groups for youth and caregivers
- Identifying and addressing racial/ethnic and sex/gender disparities as it relates to increased co-occurring disorders and access to treatment

Fun Fact About CYF CADRE



- In 2017, Julie and Marisa used puppets to introduce the CADRE CYF Subcommittee to CYF Councilmembers. Check out our puppeteering debut here: <https://youtu.be/vxwGIQbZ0D0>

Join our team of providers who love working with amazing children and youth!



Ways to get involved with Constituency

Our quarterly meetings in January, April, July, and October are open to all CADRE graduates!

Marisa.Varond@mcalistterinc.org

jmcpherson@comresearch.org

Children, Youth & Families Council

February 12, 2023 & March 13, 2023 CYF Council Meeting
Constituencies Updates

Family & Youth Sector
Sten Walker

Areas of Focus

July to December 2022

Highlights from
constituency
which is not
meant to be all
inclusive

- Housing for families
- The emergence of SBHIP
- Fentanyl awareness
- Restructuring of services provided by CYFL
- Comprehensive trainings for parents and teachers



Looking Ahead to 2023

Highlights as it relates to
CYF Council
Not All Inclusive of this
Group's Work

- Support regarding the grandfathering process with Peer Support Partners
- Elevating the voice of peer youths
- Focusing on SBHIP and how it will progress moving forward
- Focusing more on means of early intervention
- Building on successes

Fun Fact About Family & Youth Sector



The Youth Mental Health Well Being Celebration is planned to be in person once again!

Ways to get involved with Constituency

- Join the May Event planning committee
(communityadvocacy@namisd.org)
- Bring a CYF perspective to the Peer Council
(communityadvocacy@namisd.org)
- Join the Live Well San Diego Youth Sector (livewellyouth@sdcounty.ca.gov)
- Sign up for the new NAMI San Diego Family Education classes
(f2f@namisd.org)
- Spread the word regarding NAMI on Campus
(communityadvocacy@namisd.org)

Children, Youth & Families Council

February 12, 2023 & March 13, 2023 CYF Council Meeting
Constituencies Updates

Early Childhood Mental Health Committee

Rosa Ana Lozada and Stephanie Gioia-Beckman

Early Childhood Mental Health Committee

PURPOSE:

The Early Childhood Mental Health (ECMH) Committee supports the Children, Youth and Family Behavioral Health System of Care by advancing the unique needs of the 0-5 population and their caregivers when making decisions on programming, policy, and training by:

- 1) **PROMOTE AND EDUCATE** by providing information to improve system-wide understanding of early childhood mental health and integrating the information throughout the system of care;
- 2) **ADVOCATE** by addressing key issues impacting young children and their families; and
- 3) **ADVANCE SYSTEM CHANGE** by increasing the system of care's understanding of services currently available and supporting culturally relevant and trauma informed system improvements.

Areas of Focus

July to December 2022

- 1.) Actively influence program design, services, resources workforce development, and funding that impacts the 0-5 population by advocating to local leaders, state and local decision-making initiatives, and other venues
2. Recommend behavioral health trainers/trainings, including reflective practice to advance early childhood mental health throughout all systems of care including key conferences (i.e., We Can't Wait; Birth of Brilliance)
3. Identify content for system wide distribution in early childhood designed for parents and caregivers
4. Partner with other Children Youth and Families System of Care Committees, County Departments, and County Collaboratives to identify and advance culture responsive practices specific to 0-5



2022 Accomplishments & Looking Ahead to 2023

Priority 1: Reflective Practice: Recognize and advance as a standard practice compensation in all County behavioral health contracts

- Mid-Year Accomplishment: Formal ECMH presentation to the CYFBHSOC, including: information on early childhood, reflective practice, program highlights and resource sharing
- Future Action: Develop one-page document to advance Reflective Practice system-side

Priority 2: Support & Expand Workforce: Advance early childhood and developmental workforce capacity

- Future Action: Ensure Early Childhood Workforce is included in county behavioral health workforce initiative discussions, planning process and implemented solutions

Priority 3: Identify content for systemwide distribution

- Mid-Year Accomplishment: Finalized and posted online tips sheet entitled, “The Importance of Touch” for parents and caregivers
- Future Action: Quarterly Distribution of ECMH Information and Best Practices to system partners

Priority 4: Partner with other Children Youth and Families System of Care Committees

- Mid-Year Accomplishment: Aligned ECMH committee priorities to support County Behavioral Health Director Priorities and cross walked priorities with specific strategies and outcomes
- Future Action: Collaborate with key county departments and initiative participants to advance common goals including integrating culturally responsive services



Fact About Early Childhood Mental Health

Children's mental health has a direct impact on their social and emotional development

- *Between 10-16% of young children experience mental health conditions, including PTSD and anxiety*
- *For babies in poverty that number is even higher – 22%*

Source: Think Babies. (2022). [Infant and early childhood mental health](#). Centers for Disease Control and Prevention (2022, June 3). [Data and statistics on children's mental health](#).

Ways to get involved with Constituency

Sub-committees:

- 1.) Promote and Educate (Lead: *Jennifer Kennedy*)
- 2.) Advocate (Lead: *Natalie Elms*)
- 3.) Advance System Change (Lead: *Ginger Bial*)

Children, Youth & Families Council

February 12, 2023 & March 13, 2023 CYF Council Meeting
Constituencies Updates

First 5 San Diego (F5SD) Commission
Stephanie Escobar

Areas of Focus

July to December 2022

Highlights from
constituency
which is not
meant to be all
inclusive

- First 5 supports the countywide mental health services system of care for children ages 0-5 and caregivers through the following programs: Healthy Development Services (HDS), KidSTART Center, Mi Escuelita, and First 5 First Steps.
- [First 5 San Diego 2021-2022 Annual Report](#)
- First 5 Commission approved a restoration of funding to HDS and KidSTART Center of \$3M annually over three fiscal years (FY22/23 - FY24/25) to mitigate major impacts to the system of care: increased developmental and behavioral needs among children and at a greater intensity, decreased funding and increased staffing costs.



Looking Ahead to 2023

Highlights as it relates to
CYF Council
Not All Inclusive of this
Group's Work

- Continue offering high quality early intervention services and be the best first referral to support parents in identifying a developmental or behavioral concern
- With increased funding, aim to build capacity to hire and maintain professional level staff that have the expertise in working with young children
- F5SD will join Child Welfare Services in new Child and Family Well-Being (CFWB) Dept. to provide family strengthening and prevention services in a more holistic and integrated way

Fun Facts About First 5 San Diego Commission



"My Family Support Specialist, Valerie, helped me recognize what stress is and how it impacts my life. Valerie has helped me learn how to balance my life. My relationships are stronger, I'm happier, and my children are doing better. I'm more excited about tomorrow than ever before!" -Ashley*

Figure 2.6

NUMBER OF CHILDREN WHO RECEIVED BEHAVIORAL SCREENINGS AND/OR SERVICES

11,321 Children Screened

1,290 Children with Behavioral Concerns

1,735 Children who Received Behavioral Treatment*

*Includes children referred by providers not funded by First 5 San Diego

Figure 2.7

PERCENTAGE OF CHILDREN WHO MADE BEHAVIORAL GAINS AFTER TREATMENT

79.7% Internalizing Behaviors

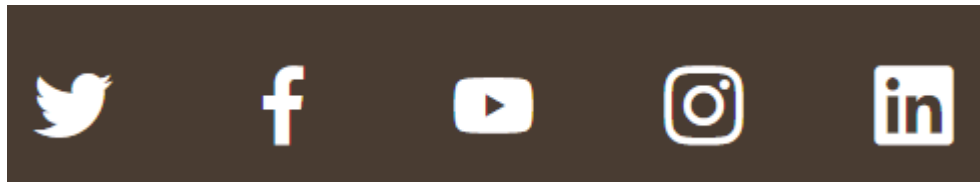
82.1% Externalizing Behaviors

80.7% Total Behaviors

**FY21-22 Annual Report*

Ways to get involved with Constituency

- Learn more at: <https://first5sandiego.org/>
- Get connected to resources: Call **1-888-5 FIRST 5** (Warm Line)
- Get involved: Attend a [F5SD Commission Meeting](#)
- Stay informed: <https://first5sandiego.org/newsletters/>
- Follow on social media:



Children, Youth & Families Council

February 12, 2023 & March 13, 2023 CYF Council Meeting
Committees/Sectors/ Groups Updates

TAY Council

Laura Tancredi-Baese & Michael Miller

Areas of Focus

July to December 2022

Highlights from
the TAY Council
which is not
meant to be all
inclusive

TAY Council has organized engaging and TAY-focused presentation content such as:

- Door of Change; helping disadvantaged and Homeless youth to better lives
- SOAP MAT-Opioid Treatment Program



Looking Ahead to 2023

Key areas that the TAY Council will likely focus on in 2023

- TAY Resource Guide
- Health Wellness & Healing
- Education/Employment Services
- Recruitment for new members
- Development of TAY-centric community content



Fun Fact
About
TAY Council

empathy

boundaries

supportive

strengths based

emotional intelligence

compassion

positivity

organization

patience

creativity

openness

tenacity

flexibility

modesty

understanding

ideation

self awareness

reliability

non reactivity

supportive team member

strategy

vulnerability

awesomeness

advocacy

relatable

independent

persistence

genuineness

imagination

goof ball

willing to engage

down to earth

seeing the best in others

reliability

motivation

good listener

compassionate

humor

connection

passion

energy

honesty

adaptable

internal

Ways to get involved with TAY Council

- TAY Council meetings are held via Microsoft TEAMS every 4th Wednesday at 3:00PM-4:30PM.
- To learn more information and/or attend a meeting, please contact Asheka Huey Asheka.huey@sdcounty.ca.gov or Aprille Pena Aprille.pena@sdcounty.ca.gov
- To review TAY Council meeting minutes, click this link: [Behavioral Health Services Council Minutes \(sandiegocounty.gov\)](https://www.sandiegocounty.gov/services/councilminutes/)

Children, Youth & Families Council

February 12, 2023 & March 13, 2023, CYF Council Meeting
Constituencies Updates

Public Safety Group/ Probation
Delona King

Areas of Focus

July to December 2022

Highlights from
constituency
which is not
meant to be all
inclusive

- County Self- Assessment
- System Improvement Plan Development
- Families First Prevention Services Act
- AB2083
- Secure Youth Track/Youth Development Academy
- Probation Equity, Diversity, Inclusion Efforts



Looking Ahead to 2023

Highlights as it relates to
CYF Council
Not All Inclusive of this
Group's Work

Continue Areas of Focus:

- System Improvement Plan Strategy Implementation
- Implementation of FFPSA Prevention Services
- AB2083
- Equity, Diversity and Inclusion

- Public Safety Group:
- Animal Services
- Medical Examiner
- Department of Child Support Services
- Probation
- District Attorney
- Public Defender
- Emergency Medical Services (EMS)
- San Diego County Fire
- Office of Emergency Services Sheriff

- Public Meetings
- San Diego Regional Human Trafficking Commercial Sexual Exploitation of Children Advisory Council
- Enhancing Human Trafficking Prevention and Service Coordination Project
- Juvenile Justice Coordinating Council
- Alternatives to Incarceration Project
- Proposition 47 Grant Program Local Advisory Committee
- Gun Violence Reduction Project



Ways to get involved with Constituency

- [Public Safety Group \(sandiegocounty.gov\)](https://sandiegocounty.gov/public-safety-group)
- Links to Public Meetings

Children, Youth & Families Council

February 12, 2023 & March 13, 2023 CYF Council Meeting
Constituencies Updates

Behavioral Health Services (BHS)
Public Sector
Dr. Laura Vleugels

Areas of Focus

July to December 2022

Highlights

not all
inclusive

- Advancing the BHS organizational structure
- Supporting the California Advancing and Innovating Medi-Cal (CalAIM)
- Early Intervention American Society of Addiction Medicine (ASAM) 0.5 services were added countywide to the Teen Recovery Centers (TRCs) as of October 2022
- CYF services implementation at the Youth Development Academy (East Mesa Facility) beginning in October 2022
- Screening to Care planning

Areas of Focus - Continued

July to December 2022

Highlights

not all
inclusive

- Collaboration with the San Diego Managed Care plan on the development of the Student Behavioral Health Incentive Program (SBHIP)
- Full Service Partnership website was launched in October 2022:
https://www.sandiegocounty.gov/content/sdc/hhsa/programs/bhs/Full_Service_Partnership.html
- Children's Crisis Continuum of Pilot Program grant application submitted through Child Welfare Services December 2022
- Continued planning of the Behavioral Health Hub for children and youth in partnership with Rady Children's Hospital – San Diego

Looking Ahead to 2023

- Promote the (CalAIM) implementation
- Continue to address access to care and workforce challenges
- Continue to support the County Substance Use Harm Reduction Strategy
- Continue collaborating and advancing partnerships within the sectors of the system of care
- Emphasize the **Children and Youth Strategy** as outlined in the September 27, 2022 Board Letter (Item 23)
- Maintain connection to statewide efforts, including Governor Newsom's California's Master Plan for Kids' Mental Health: https://www.gov.ca.gov/wp-content/uploads/2022/08/KidsMentalHealthMasterPlan_8.18.22.pdf?emrc=6d3847 and the Children and Youth Behavioral Health Initiative: <https://www.dhcs.ca.gov/CYBHI/Documents/DHCS-CYBHI-EBP-CDEP-Grant-Strategy-Overview-December-2022.pdf>
- Consider population health and social determinants/drivers of health in the system of Care and Council activities



Did you know?



Inception of the BHS Councils

- Children, Youth and Families Council (2004)
- Behavioral Health Services Housing Council (2006)
- Adult System of Care Council (2007)
- Older Adult System of Care Council (2007)
- Transition Age Youth (TAY) Council (2017)
- Peer Council (January 2023)

BHS Resources

- County of San Diego website link: <https://www.sandiegocounty.gov/>
- BHS website link: <https://www.sandiegocounty.gov/content/sdc/hhsa/programs/bhs.html>
- BHS Councils and Behavioral Health Advisory Board (BHAB) link:
https://www.sandiegocounty.gov/content/sdc/hhsa/programs/bhs/bhs_councils_homepage.html

Children, Youth & Families Council

February 12, 2023 & March 13, 2023 CYF Council Meeting
Constituencies Updates

Training Academy

Rose Woods

RIHS, The Academy for Professional Excellence

Areas of Focus

July to December 2022

Highlights from
constituency
which is not
meant to be all
inclusive

- *Strengthening Families and the Protective Factors Framework Webinar*, December 12, 2022
- *Trauma and Attachment in Children Ages 0-5*, November 29, 2022
- Planning for *Gender Identity and Youth and Affirming Care* training to support the 2022-23 County of San Diego BHS PIP focused on improving therapeutic services and/or supports for youth who identify as sexual and gender minorities.
- 2022 Advancing Principles Awards (application, anonymous selection, and selection of two recipients: Lesley Johnson and Vista Hill ADAPT Program)

Ways to get involved with Constituency

- The Children, Youth and Families System of Care (CYFSOC) Training Academy meets on the first Wednesday of the month from 9:00-10:00 AM, virtually.
- More information about the CYFSOC Training Academy can be found at our webpage: <https://theacademy.sdsu.edu/programs/rihs/cyfsoc/>

Birth of Brilliance

BE THE CHANGE

Building on the success and energy of our first two events, we are excited to present the 3rd annual Birth of Brilliance Conference on February 23rd, 2023.

The focus of this conference is to raise awareness about the effects of racial disparities and implicit bias in mental health, social services, developmental services, education, medical care, and juvenile justice.

If you are passionate about serving youth and families in a way that centers equity to amplify the brilliance of all children, this conference is for you!

REGISTER NOW

Event Details & Registration Information

Virtual Conference FEB. 23, 2023 | 8:15am-5:00pm
In-person Cultural Fair FEB. 24, 2023 | 4:00pm-7:00pm
\$115 | Registration
\$130 | Registration w/ CE's
\$20 | EARLY BIRD Cultural Fair
(\$25 at the door)

Questions? Connect with us at birthofbrilliance@gmail.com

Register at www.BirthofBrilliance.com



Shawn Ginwright, PhD
*A Pivot to Healing Centered Leadership:
Reimagining Justice, Reimagining
Ourselves*



Barbara Stroud, PhD
Reclaiming our Brilliance



Check out 2022 highlights [HERE!](#)



The Birth of Brilliance Conference Team in Collaboration with the San Diego Office of Equity and Racial Justice presents the

BIRTH OF BRILLIANCE Cultural Fair



COUNTY OF SAN DIEGO
**Office of Equity
& Racial Justice**

San Diego MAKE, 3745 30th Street, San Diego, CA 92104
FRIDAY FEBRUARY 24, 2023 | 4 PM - 7 PM

Come experience the brilliance of the cultures in our local San Diego community through Performances, Art, Music and more! Conference Swag available for sale and raffle! Contactless payments only. Event will be catered by San Diego MAKE.

Menu featuring small bites

Small bites and diverse flavors courtesy of Chef Andrew and team



MAKE PROJECTS
EAT WELL. DO GOOD.

Admission, food, and entertainment are covered with your pre-paid ticket. Tickets also available at the door - **\$20 in advance and \$25 on site.** Also, visit our vendor fair and support local artisans by purchasing their wares. Contactless payments preferred. Parking available at the North Park Garage or on the street.

Registration at www.BirthofBrilliance.org



[2023 Conference Info – CMHACY](#)

[Link for Registration](#)