

# Children, Youth and Families (CYF) Behavioral Health System of Care Council



## Agenda

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

**Zoom meeting link for registration sent via Outlook meeting invitation:**

<https://us06web.zoom.us/join/ztEtdO6urDsiG9eGOW92r5wt31XfKoAuTvp#/registration>

- |   |                          |
|---|--------------------------|
| <p><b>I. Welcome Council members, alternates, and meeting attendees</b> - (Celica Garcia-Plascencia)</p> <p>Translation available</p> <ul style="list-style-type: none"> <li>November is: <a href="#">National Native American Heritage Month</a> – Handout – <b>Page 5</b><br/><a href="#">Home   Native Knowledge 360° - Interactive Teaching Resources (si.edu)</a></li> </ul>   | <p><b>10 minutes</b></p> |
| <p><b>II. Hot Topic:</b> Healthy Outcomes from Positive Experiences (HOPE) - (Stephanie Escobar)</p> <p>Handout - <b>Pages 6-22</b><br/><a href="#">Tufts HOPE – Healthy Outcomes from Positive Experiences</a></p> <ul style="list-style-type: none"> <li>Presenters: <ul style="list-style-type: none"> <li>Aimee Zeitz-Gruber, Executive Director of Community Well-Being, YMCA of San Diego</li> <li>Brandi Paniagua, Coordinator/Trainer, YMCA of San Diego</li> </ul> </li> <li>Dialogue</li> </ul> | <p><b>50 minutes</b></p> |
| <p><b>III. Culture Share</b> – Darwin Espejo - Handout – <b>Page 23</b></p> <ul style="list-style-type: none"> <li>Seeking volunteer for January 8, 2024 Culture Share</li> </ul>   | <p><b>5 minutes</b></p>  |
| <p><b>IV. Review of Meeting Summary</b> (Yael Koenig)</p> <ul style="list-style-type: none"> <li>September 11, 2023, Meeting Summary - Handout - <b>Pages 24-27</b></li> <li>Action Item: Hot Topic presentation by CFWB to be included in the meeting packet that is uploaded to the <a href="#">CYF Council webpage</a><br/>Completed on September 19, 2023</li> </ul>  | <p><b>20 minutes</b></p> |
| <p><b>V. Business Items</b> (Yael Koenig)</p>   | <p><b>20 minutes</b></p> |

**Public Comment** - Inviting all participants to unmute or enter public input in the chat

### Board Letters / Board Actions

#### September 12, 2023

- Item 08:** Authorize Acceptance of Federal Maternal, Infant, and Early Childhood Home Visiting Funding for the California Home Visiting Program
- Item 09:** Authorize Acceptance Federal Community Project Funding and Applications for Future Funding Opportunities
- Item 11:** Approve and Ratify the Children's Trust Fund Three-Year Funding Proposal – Handouts - **Pages 28-36**
- Item 13:** Receive the County-wide Plan for Equitable Data Access and Community Empowerment
- Item 22:** Combating the Childcare Crisis
- Item 23:** Assessing the Regional Capacity and Need for Board and Care and Subacute Services to Support Medi-Cal Eligible Adults with Behavioral Health conditions

#### September 26, 2023

- Item 01:** Making San Diego a Blue Envelope County– Handouts - **Pages 37-42**  
[Blue Envelope Program | San Diego County Sheriff \(sdsheriff.gov\)](#)
- Item 04:** Integration of Countywide Shelter Bed Mobile Network for County of San Diego Sheltering Agencies
- Item 05:** Approve Submission of the Federal Fiscal Years 2024-2026 Refugee Support Services Plan, Adopt a Resolution for the Refugee Support Services Plan, Accept Additional Ukraine Supplemental Appropriation Act Funding, Authorized Competitive Procurements, and Apply for Future Funding Opportunities
- Item 07:** Authorization to Accept Congressional Directive Spending Project Grant Funding Administered by the Substance Abuse and Mental Health Services Administration for Mobile Crisis Response Teams - Handout – **Pages 43-47**
- Item 16:** Declaring the Lack of Resources for Asylum Seekers from the Federal Government a Humanitarian Crisis

#### October 10, 2023

- Item 03:** Authorize Acceptance of Centers for Disease Control and Prevention Funding for Racial and Ethnic Approaches to Community Health, and Authorize Applications for Future Funding Opportunities
- Item 12:** Homeless Diversion: Investing in an Evidence-Based, Cost-Effective Approach to Address Homelessness
- Item 13:** Receive and Approve the Updated Opioid Settlement Framework: Direct Report Back on Significant Updates to the Opioid Settlement Framework; and Authorize One Staff Year for Toxicology Services to Expand Surveillance of Emerging Drug Trends  
Handouts include presentations – **Pages 48-85**

#### October 24, 2023

- Item 15:** Noticed Public Hearing: Truth Act Community Forum Regarding Immigration and Customs Enforcement Access to Individuals During 2022
- Item 17:** Receive Update on the Department of Homeless Solutions and Equitable Communities, Office of Immigrant and Refugee Affairs and Accept Funding from the Local Immigrant Integration and Inclusion Grant, and Request a Waiver of Board Policy B-29

November 7, 2023

- **Item 28:** Bridging the Gap for Those in Addiction Recovery: From Homelessness to Housing
- **Item 31:** Authorize Competitive Solicitations, Single Source Contract, Amendments to Extend Existing Contracts, Amendments to Reflect Change to Services and Increase to Funding, and Execution Intergovernmental Agreement with the State of California and Acceptance of Funding - Handouts include presentation - **Pages 86-110**

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 meeting packet. However, all Board Letters can be found at the Clerk of Board of Supervisors (BOS) website.

Meeting Agendas, Board Letters, and access to the BOS meetings: <https://www.sandiegocounty.gov/cob/bosa/index.html>

#### Information

- **[Behavioral Health Community-Based Organized Networks of Equitable Care and Treatment \(BH-CONNECT\) demonstration](#)**  
Handout- **Pages 111-114**
- **[Children and Youth Behavioral Health Initiative \(CYBHI\)](#)**
  - [CYBHI September 2023 Update](#) – Handout – **Pages 115-126**
  - [CYBHI October 2023 Update](#) – Handout – **Pages 127-137**
- [Live Well San Diego Networking and Engagement Platform](#) – Handout – **Page 138**
- [Behavioral Health Director's Report – October 2023](#) – Handout – **Pages 139-141**
- [Behavioral Health Director's Report -November 2023](#) – Handout – **Pages 142-145**  
[https://www.sandiegocounty.gov/content/sdc/hhsa/programs/bhs/mental\\_health\\_services\\_act/bhab\\_meeting\\_materials.html](https://www.sandiegocounty.gov/content/sdc/hhsa/programs/bhs/mental_health_services_act/bhab_meeting_materials.html)
- Fiscal Year 2023-24 **Mental Health External Quality Review** – November 7-9, 2023
- **Youth Services Survey (YSS)** - May 2023 -Handouts -**Pages 146-147**
- [I Choose My Future - San Diego County Office of Education \(sdcoe.net\)](#) - Handout - **Page 148**  
[New drug-prevention videos highlight dangers of fentanyl, cannabis for San Diego County kids - The San Diego Union-Tribune \(sandiegouniontribune.com\)](#)
- Fiscal Year 2023-24 **CYF System of Care Principles Awards** – Handout - **Page 149**  
Submission deadline is **December 15, 2023**  
Link: [Children, Youth and Families System of Care 2023 Advancing Principles Recognition Form \(smartsheet.com\)](#)
- CYF Council Committee mid-year updates scheduled for the January and February 2024 meetings

#### VI. Announcements (Celica Garcia-Plascencia)

5 minutes

- Poll Question
- **NAMI San Diego Trainings via Zoom** – Fliers – **Pages 150-151**
  - **Community Advocacy “Telling Your Story”**  
November 15, 2023 from 1:30 to 3:30 p.m. [Registration Link](#)
  - **Reimagining Crisis Response**  
November 29, 2023 from 2 to 4 p.m. [Registration Link](#)
- **2023 Western States Marijuana Summit** -November 14-15, 2023 (Virtual) - Handout - **Page 152**
- **National Overdose Prevention Leadership Summit** - November 16-17, 2023 (Virtual) - Handout - **Page 152**
- **Fourth Annual Birth of Brilliance Virtual Conference** on February 29, 2024) and **Cultural Fair** on March 1, 2024 – (Aisha Pope and Melanie Morones)  
Theme: **“Don’t Just Think...Feel”** - Handout – **Pages 153-155**  
Call for breakout sessions proposals available now – submit proposal here: <https://tinyurl.com/BoBProp2024>  
Video highlight for 2023: [https://www.youtube.com/watch?v=e\\_SZVY6wVrl](https://www.youtube.com/watch?v=e_SZVY6wVrl)
- **44<sup>th</sup> Annual California Mental Health Advocates for Children and Youth (CMHACY) Conference**  
May 15-17, 2024 – Handout – **Page 156**
- **The CYF Council is “Dark” in December. Happy 2024!**

#### Next Executive Committee Meeting:

**Date:** Thursday, December 28, 2023

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

#### Next Meeting: Combined Councils

**Date:** Monday, January 8, 2024

**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/CYFBHSOCCouncil.html](https://www.sandiegocounty.gov/content/sdc/hhsa/programs/bhs/mental_health_services_children/CYFBHSOCCouncil.html)

# Children, Youth and Families Behavioral Health System of Care Council 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.



# 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

## HEALTH FACTORS



### 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

- 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

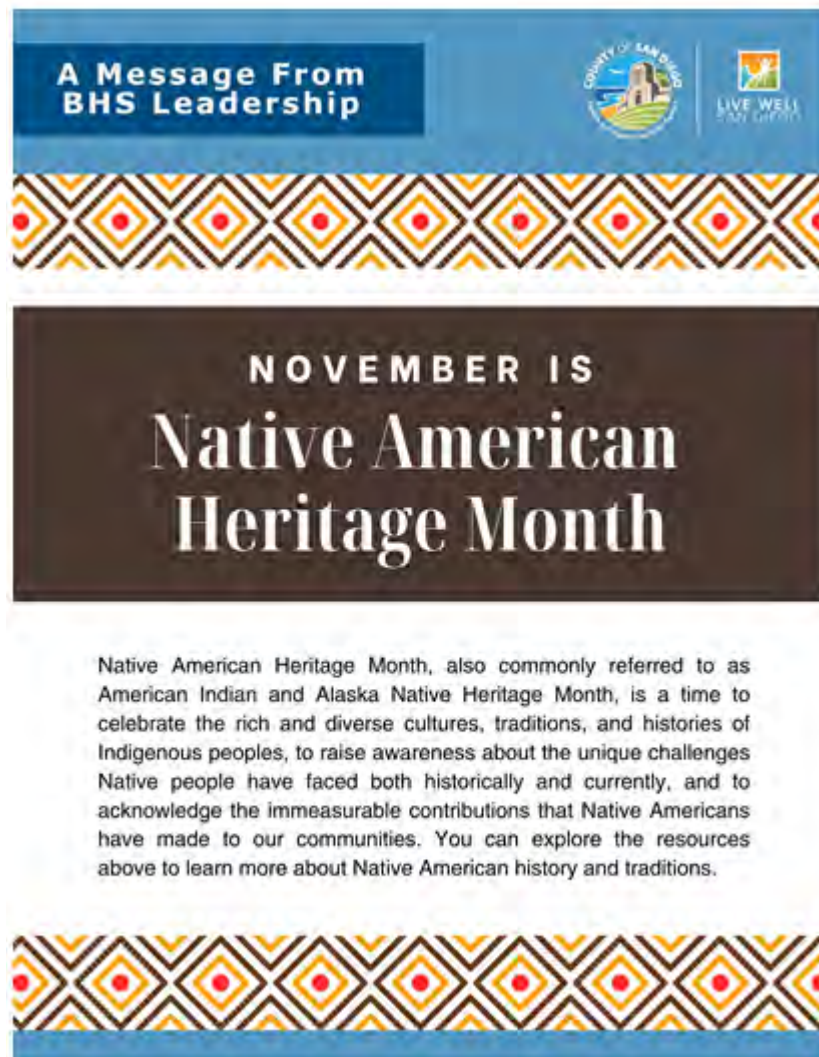
- Supportive Families
- Nurturing Communities
- Connection to Natural Supports
- Positive Social Interactions



### 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

During the month of November, we celebrate and honor the contributions and heritage of Native American communities. In recognition of this observance, the County Administration Center will be lit up on November 1<sup>st</sup>.



[National Native American Heritage Month](#)

[Home | Native Knowledge 360° - Interactive Teaching Resources \(si.edu\)](#)





# Spreading HOPE



HEALTHY OUTCOMES  
FROM POSITIVE EXPERIENCES



# Introduction to HOPE





HEALTHY OUTCOMES  
FROM POSITIVE EXPERIENCES

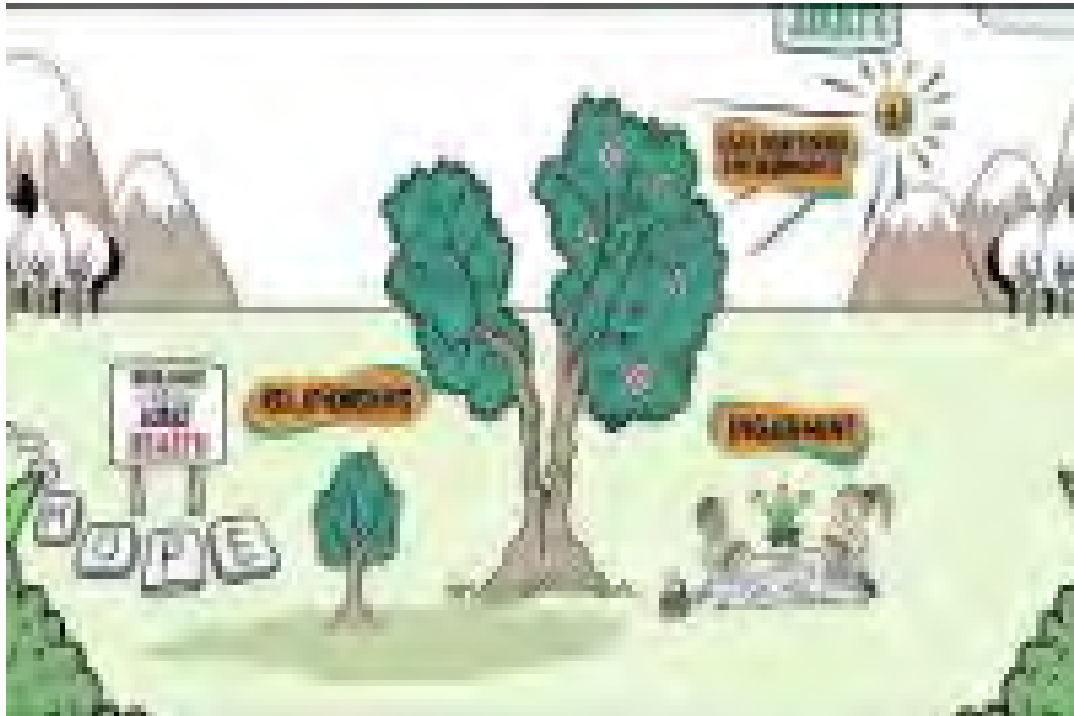
# Why HOPE Exists

Positive experiences help children grow into more resilient, healthier adults. HOPE aims to better understand and support these key experiences.





HEALTHY OUTCOMES  
FROM POSITIVE EXPERIENCES





# Core assumption

from the Science of the Positive:

The **positive** exists, it is real and worth growing.

**Positive** experiences:

- Promote children's **health and well-being**
- Allow children to form strong **relationships** and connections
- Cultivate positive self-image and **self-worth**
- Provide a sense of **belonging**
- Build skills that promote **resilience**





## Many systems focus on the negative

Screening tools, many of which codify implicit bias, create a presumption of deficit

**HOPE** shifts the narrative: people are defined by their strengths as well as their challenges.

**HOPE** creates a presumption of strength



# Type 1 vs. Type 2 thinking

Implicit biases are imbedded in Type 1 thinking



Unconscious, immediate reactions to difference

Type 2 thinking can help us notice and navigate our biases



Slow, conscious strategies to mitigate bias





# ACEs and PCEs

## ACEs

- 1998 study of employed people in Southern California
- Patients answered questions about their childhood
- Correlated with mental and physical health

## PCEs

**NEW**

- 2015 population study in Wisconsin
- Part of the Behavioral Risk Factor Surveillance Survey
- Asked about ACEs
- Asked about Positive Childhood experiences
- Correlated with mental health



# Adverse Community Environments are the root causes of ACEs





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2015 population study in  
Wisconsin

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Part of the BRFSS

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Asked about ACEs

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Asked about Positive  
Childhood experiences

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Correlated with mental  
health

# Developing the Positive Childhood Experiences (PCEs) score







# Positive Childhood Experiences scale questions

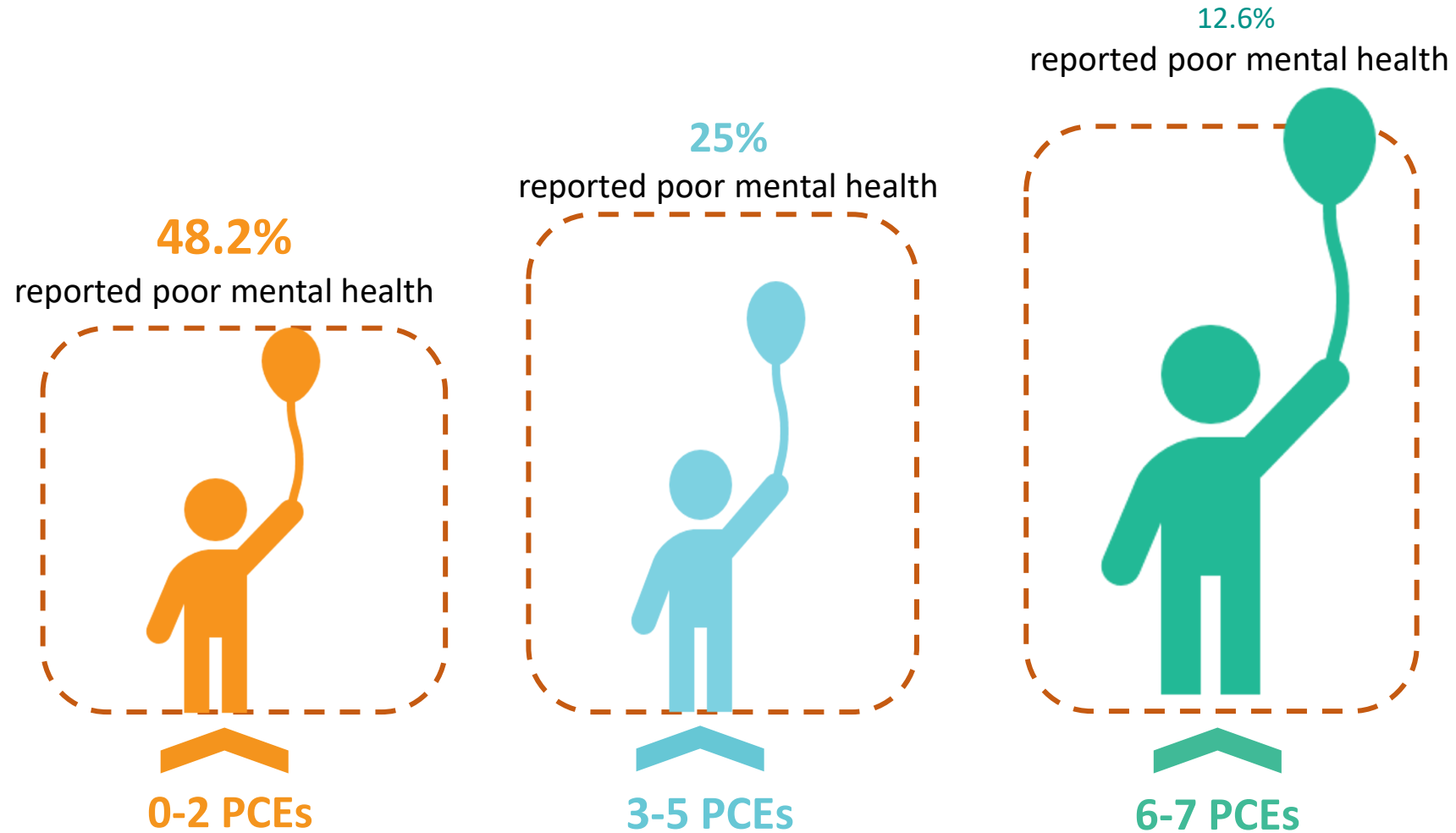
*As a child, how often did you ...*

1. Feel able to talk to your family about feelings
2. Feel your family stood by you during difficult times
3. Enjoy participating in community traditions
4. Feel a sense of belonging in high school
5. Feel supported by friends
6. Have at least two non-parent adults who took genuine interest in you
7. Feel safe and protected by an adult in your home





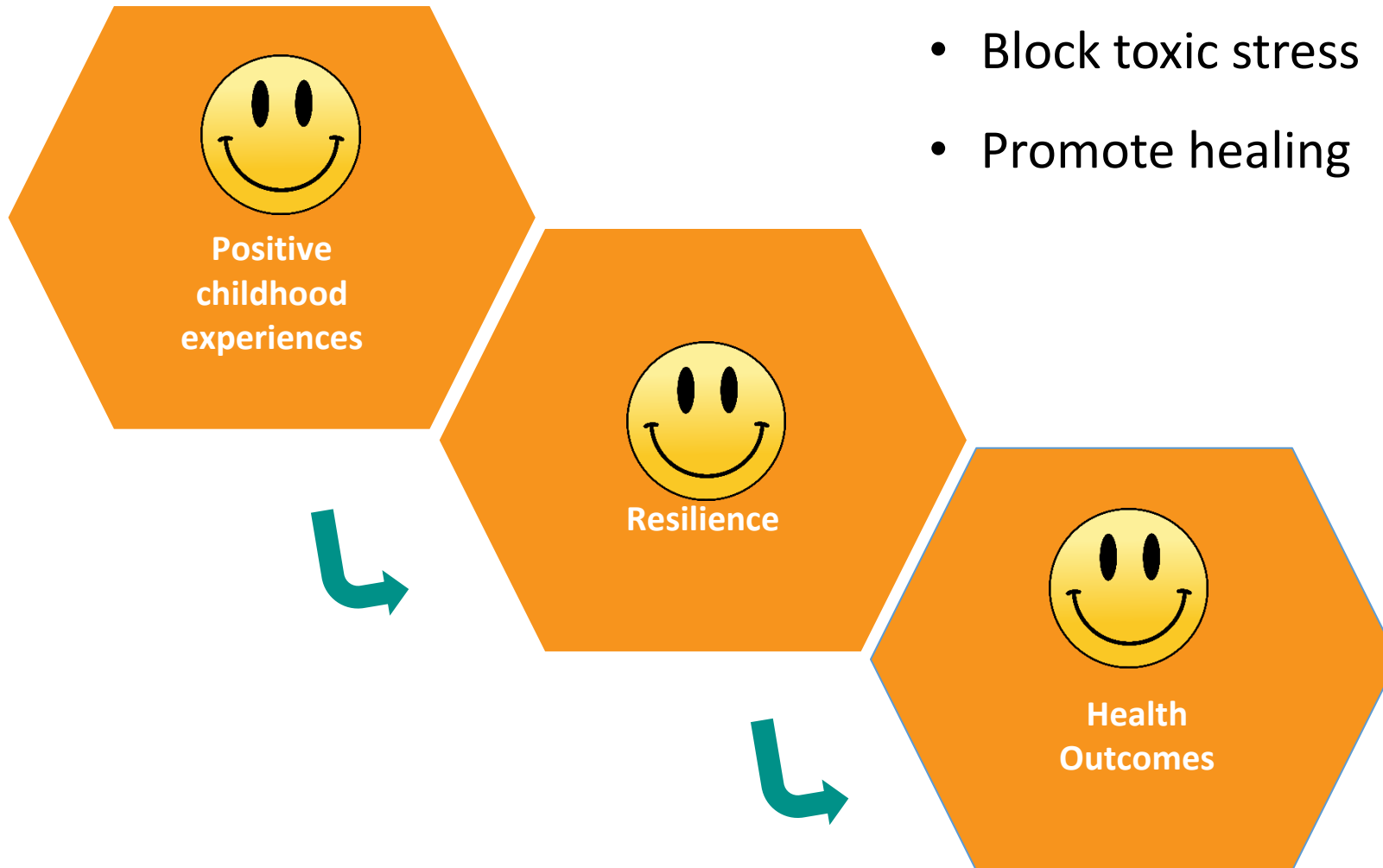
# Positive Childhood Experiences (PCEs) Protect Adult Mental Health



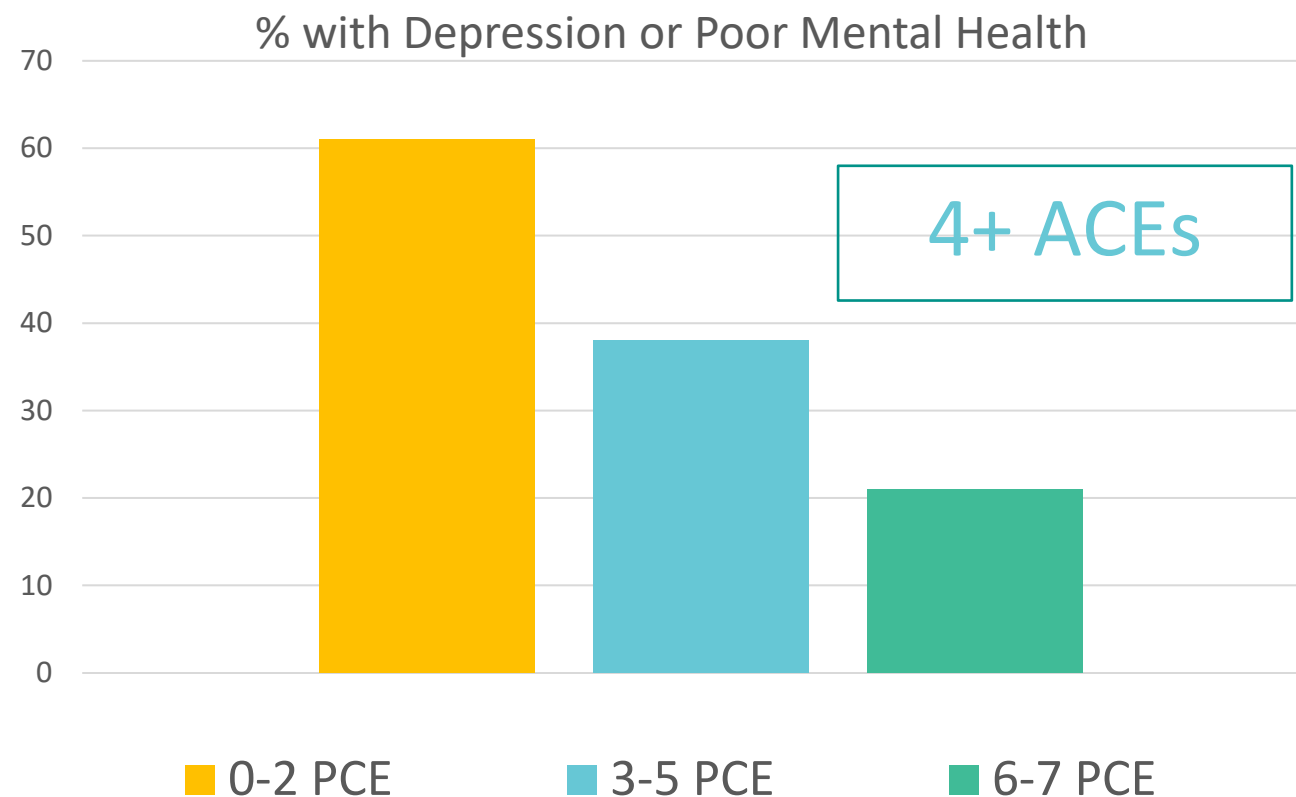


# Positive Childhood Experiences:

- Prevent ACEs
- Block toxic stress
- Promote healing



# Positive Childhood Experiences Mitigate ACEs Effects



Bethell C, Jones J, Gombojav N, Linkenbach J, Sege R. Positive Childhood Experiences and Adult Mental and Relational Health in a Statewide Sample: Associations Across Adverse Childhood Experiences Levels. *JAMA Pediatr.* 2019 Sep 9; e193007



RELATIONSHIPS

**Relationships** with other children and with other adults through interpersonal activities.

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ENVIRONMENT

**Safe, equitable, stable environments** for living, playing, learning at home and in school.

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ENGAGEMENT

**Social and civic engagement** to develop a sense of belonging and connectedness.

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EMOTIONAL GROWTH

**Emotional growth** through playing and interacting with peers for self-awareness and self-regulation.

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# The Four Building Blocks of HOPE







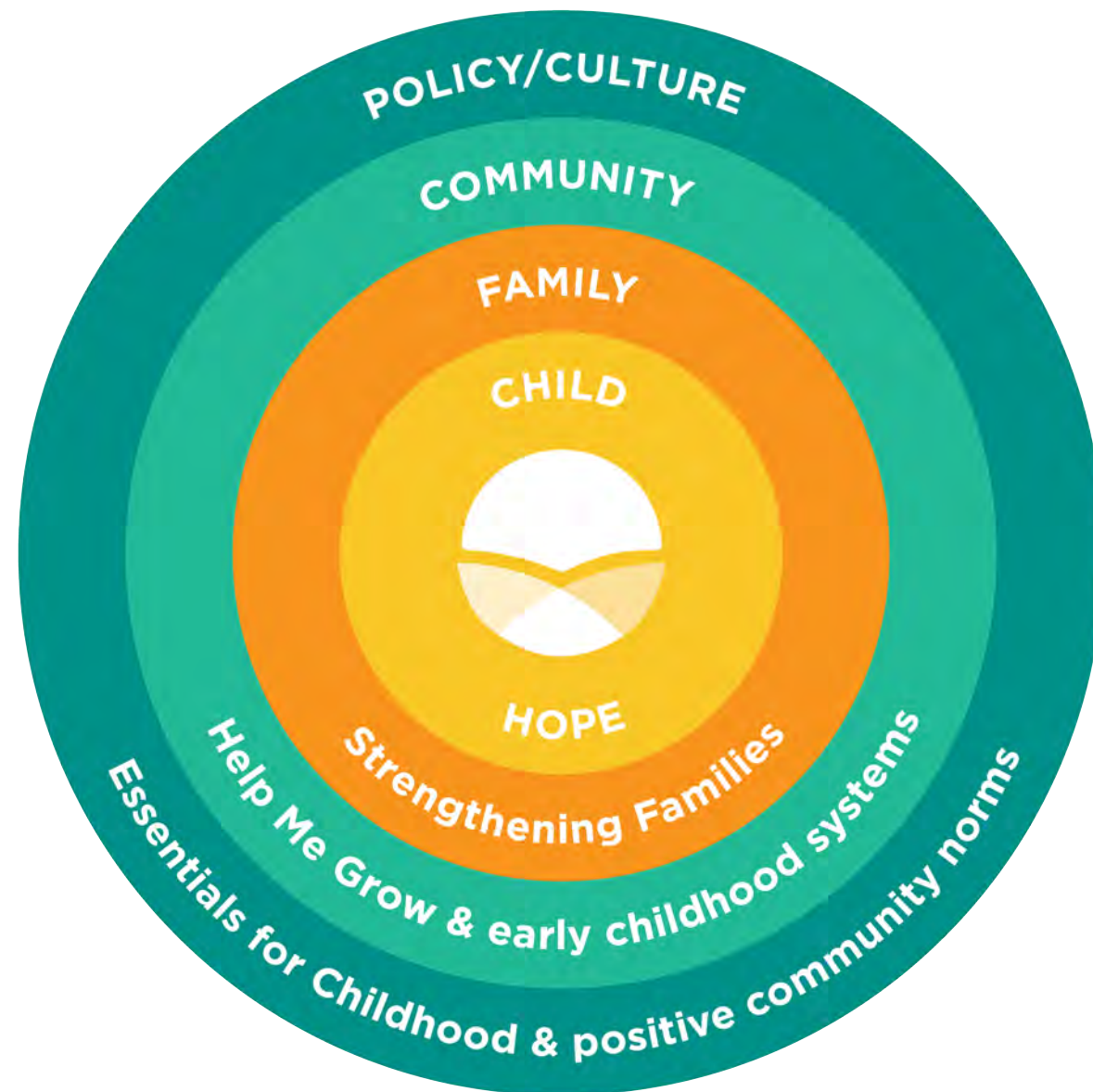
HEALTHY OUTCOMES  
FROM POSITIVE EXPERIENCES

Strengths-based,  
Child-centered,  
Family-led innovating  
around promoting  
access to the Four  
Building Blocks





HOPE focuses on the  
child



# BH-SOC Children, Youth, and Families

## Culture Share

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### What is Culture Share?

Culture share is a time to advance and integrate cultural learning, understanding, and practices into our work. This experience can honor and celebrate family, history, traditions, experiences, 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 to enhance our capacity to provide culturally responsive services to the children, youth, and families in our communities.

### Structure

1. Present a **3 minute Culture Share**.
2. Introduce a personal or work related experience from a cultural lens.
  - This can be verbal and/or you can share a story, an object, song, or anything else
3. Describe how this experience influences your work
4. Open for any group reflection



# Children, Youth and Families Behavioral Health System of Care Council CYF Council – Meeting Summary



September 11, 2023 | 9 to 10:30 a.m.

ITEM	SUMMARY AND ACTION ITEMS
<b>II. Welcome</b> Council members, alternates, and meeting attendees – Translation available (Celica Garcia-Plascencia) translation <ul style="list-style-type: none"> <li>• <a href="#">Remembering September 11 2001 (defense.gov)</a></li> <li>• Culture Share – Divya Kakaiya Ph.D M.S. – Handout – <b>Page 5</b> <ul style="list-style-type: none"> <li>◦ Seeking volunteer for November 13, 2023 Culture Share</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• Celica Garcia-Plascencia welcomed meeting attendees and acknowledged September 11, as a Patriot Day, National Day of Service, and Remembrance</li> <li>• Dr. Divya Kakaiya described her “tri-cultural” upbringing and how it has influenced her in her work/life. Dr. Kakaiya highlighted: <ul style="list-style-type: none"> <li>◦ Annual event she hosts at her home where she promotes inclusivity, understanding, and equity</li> <li>◦ <a href="#">Students Speaking Out</a>, a San Diego County Crime Stoppers program</li> </ul> </li> </ul>
<b>III. Review of Meeting Summary</b> (Yael Koenig) <ul style="list-style-type: none"> <li>• August 14, 2023, Meeting Summary - Handout - <b>Pages 6-9</b></li> <li>• Action Item: Strategic Planning Summary - Handout - <b>Pages 10-11</b></li> </ul>	<ul style="list-style-type: none"> <li>• Yael Koenig reviewed the meeting summary from August 14, 2023</li> <li>• Strategic Planning summary was delivered to Luke Bergmann, BHS Director on September 1, 2023</li> </ul>
<b>IV. Business Items</b> (Yael Koenig)	
<b>Public Comment</b>	<ul style="list-style-type: none"> <li>• Angela Rowe highlighted that California Advancing and Innovating Medi-Cal (CalAIM) payment reform includes costs associated with families, not just individuals</li> </ul>
<b>Board Letters / Board Actions</b> August 29, 2023 <ul style="list-style-type: none"> <li>• <b>Item 04:</b> Adopt a Resolution Reauthorizing the Application of California Welfare and Institutions Code Section 5270.10 ET SEQ.</li> <li>• <b>Item 07:</b> Protecting Children from Human Trafficking Through Education Handout - <b>Pages 12-18</b></li> </ul> <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) website.</p>	<ul style="list-style-type: none"> <li>• Yael Koenig highlighted the Board Letters listed on the left, which were presented at the August 29, 2023 meeting</li> </ul> <p>Meeting Agendas, Board Letters and Access to the BOS meetings:  <a href="https://www.sandiegocounty.gov/cob/bos/index.html">https://www.sandiegocounty.gov/cob/bos/index.html</a></p>
<b>Information</b> <ul style="list-style-type: none"> <li>• <b>Children and Youth Behavioral Health Initiative (CYBHI)</b> <ul style="list-style-type: none"> <li>◦ <a href="#">CYBHI August 2023 Update</a> - Handout - <b>Pages 19-23</b></li> <li>◦ <a href="#">CYBHI Fee Schedule: An Introduction - YouTube</a> - Handout - <b>Page 24</b></li> </ul> </li> <li>• Behavioral Health Community-Based Organized Network of Equitable Care and Treatment (BH-CONNECT) Section 1115 Demonstration – Handout - <b>Pages 25-50</b> <ul style="list-style-type: none"> <li>◦ <a href="#">California Behavioral Health Community-Based Organized Networks of Equitable Care and Treatment Waiver</a></li> <li>◦ <a href="#">BH-CONNECT slides from DHCS Sec 1115 Public Hearing.pdf</a></li> </ul> </li> <li>• Behavioral Health Services California Advancing and Innovating Medi-Cal (CalAIM) Behavioral Health Payment Reform Overview – Handout - <b>Pages 51-66</b></li> <li>• <b>BHS Reorganization Program &amp; Services Update</b> – Contractor Information Notice Handout - <b>Pages 67-69</b></li> <li>• <a href="#">Behavioral Health Director's Report – September 2023</a> - Handout - <b>Pages 70-73</b>  <a href="https://www.sandiegocounty.gov/content/sdc/hhsa/programs/bhs/mental_health_services_act/bhab_meeting_materials.html">https://www.sandiegocounty.gov/content/sdc/hhsa/programs/bhs/mental_health_services_act/bhab_meeting_materials.html</a></li> <li>• Updated <a href="#">Children, Youth, and Families Services Directory</a> (September 2023) Handout - <b>Page 74-75</b></li> <li>• <a href="#">Early Childhood Resources</a> webpage page (Amanda Lance-Sexton) - Handout - <b>Page 76</b></li> <li>• <b>Fourth Annual Birth of Brilliance Virtual Conference</b> (February 29, 2024) and <b>Cultural Fair</b> (March 1, 2024)  Theme: “Don’t Just Think...Feel” (Aisha Pope and Melanie Morones - Conference Chairs)  Handout - <b>Page 77</b>  Call for breakout sessions proposals available now – submit proposal here:  <a href="https://tinyurl.com/BoBProp2024">https://tinyurl.com/BoBProp2024</a>  Video highlight for 2023: <a href="https://www.youtube.com/watch?v=e_SZVY6wVrI">https://www.youtube.com/watch?v=e_SZVY6wVrI</a></li> </ul>	<ul style="list-style-type: none"> <li>• Yael Koenig provided an overview of State and local updates, and informational items</li> <li>• Amanda Lance-Sexton announced the CYF webpage update that includes a section for <a href="#">Early Childhood Resources</a></li> <li>• Aisha Pope and Melanie Morones announced the Fourth annual Birth of Brilliance conference and Cultural Fair, and welcomed conference breakout proposals</li> </ul>



<p>V. <b>Hot Topic:</b> Child and Family Well Being – Mandated Reporting to Community Supporting</p> <p>Evident Change Community Response Guide - <b>Pages 78-79</b> <a href="https://evidentchange.org/">https://evidentchange.org/</a> Presentation handout – <b>Pages 80-96</b></p> <p>o Presenters:</p> <ul style="list-style-type: none"><li>o Wendy Curiel, Deputy Director, Departmental Operations, CFWB</li><li>o Elly Chung, Chief, Agency Operations, CFWB</li></ul> <p>o Dialogue</p>	<p>Celica Garcia-Plascencia introduced the Hot Topic focused on Mandated Reporting to Community Supporting</p> <p>Hot Topic Highlights:</p> <ul style="list-style-type: none"><li>• Wendy Curiel and Elly Chung led the presentation and discussion.</li><li>• Child and Family Well Being Department transformation as part of the mandated reporting to community supporting shift</li><li>• Child Abuse Online Reporting Portal-Pilot started in July 2023 with Escondido School District for non- urgent concerns. Projected to go completely live in early 2024</li><li>• General Neglect definition change</li><li>• Community Response Guide - Public online guide that includes decision trees for neglect or abuse concerns and will be linked to prevention agencies. Expected to commence in approximately 18 months</li><li>• Prevention Hub is a “no wrong door” service to families connected by Community Based Organizations</li><li>• CYF stakeholders expressed their interest and invited the presenters to use the CYF Council as a platform for input and feedback</li></ul>										
<p>VI. <b>Announcements</b> (Celica Garcia-Plascencia)</p> <ul style="list-style-type: none"><li>• Poll Question</li><li>• <b>NAMI San Diego Community Advocacy Trainings via Zoom – Fliers – Pages 97-98</b> “Telling Your Story” <a href="#">Registration Link</a> for September 14, 2023 from 2 to 4 p.m. <a href="#">Registration Link</a> for September 20, 2023 from 1 to 3 p.m. <b>Reimagining Crisis Response</b> on September 26, 2023 from 2 to 4 p.m. <a href="#">Registration Link</a></li><li>• <b>Live Well San Diego 5K and 1 Mile Run</b>, Sunday, September 17, 2023 - 7:30 a.m. – Waterfront Park - Flier - <b>Pages 99-100</b></li><li>• <b>Substance Use and Driving Under the Influence Discussion</b>, scheduled for September 20, 2023 at 10 a.m. via Zoom: <a href="#">Launch Meeting - Zoom</a> – Flier - <b>Page 101</b></li><li>• <b>14th Annual Early Childhood Mental Health Conference – We Can’t Wait:</b> Reimagining Prevention and Early Intervention in Communities of Hope. This hybrid event is scheduled for September 28-30, 2023 - Handout – <b>Page 102</b> <a href="#">ECMH – We Can't Wait! (earlychildhoodmentalhealth-sandiego.com)</a></li><li>• <b>October 9, 2023 Combined Councils Meeting – Note that meeting is from 10 to 11:30 a.m.</b> via Zoom - Flier - <b>Page 103</b> <a href="#">Meeting Registration - Zoom</a></li><li>• <b>2023 Western States Marijuana Summit</b> -November 14-15, 2023 (Virtual) - Handout - <b>Page 104</b></li><li>• <b>National Overdose Prevention Leadership Summit</b> - November 16-17, 2023 (Virtual) Handout - <b>Page 104</b></li><li>• <b>2023 Live Well Advance   School Summit</b> - November 1, 2023 at the Convention Center Flier - <b>Page 105</b></li><li>• <b>Grief Sensitivity Virtual Learning Institute</b> - November 1 and 2, 2023. Working with grief in the context of violence: <b>Strengthening our skills to strengthen ourselves.</b> No-cost training for the Mental Health and School Mental Health Workforce - Flier - <b>Page 106</b> <a href="#">2023 MHTTC Grief Sensitivity Virtual Learning Institute   Mental Health Technology Transfer Center (MHTTC) Network (mhttcnetwork.org)</a></li></ul> <p><b>Announcements made by meeting attendees:</b></p> <ul style="list-style-type: none"><li>• <a href="#">Project ROOTS: Human Trafficking Prevention in San Diego - YouTube</a></li></ul>	<ul style="list-style-type: none"><li>• Announcements included on the agenda and additional submitted announcements are listed on the left column</li><li>• Announcements can be sent in advance to Edith Mohler at: <a href="mailto:Edith.Mohler@sdcounty.ca.gov">Edith.Mohler@sdcounty.ca.gov</a></li></ul> <p><b>CYF Council Poll</b></p> <p>Poll ended   1 question   69 of 69 (100%) 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>69/69 (100%) answered</p> <table><tr><td>1 - Low Relevance</td><td>(0/69) 0%</td></tr><tr><td>2</td><td>(0/69) 0%</td></tr><tr><td>3 - Some Relevance</td><td>(6/69) 9%</td></tr><tr><td>4</td><td>(19/69) 28%</td></tr><tr><td>5 - High Relevance</td><td>(44/69) 64%</td></tr></table>	1 - Low Relevance	(0/69) 0%	2	(0/69) 0%	3 - Some Relevance	(6/69) 9%	4	(19/69) 28%	5 - High Relevance	(44/69) 64%
1 - Low Relevance	(0/69) 0%										
2	(0/69) 0%										
3 - Some Relevance	(6/69) 9%										
4	(19/69) 28%										
5 - High Relevance	(44/69) 64%										
<p><b>Action Item</b></p> <ul style="list-style-type: none"><li>• Hot Topic presentation by CFWB to be included in the meeting packet that is uploaded to the <a href="#">CYF Council webpage</a></li></ul>	<p><b>Action Due/Status</b></p> <ul style="list-style-type: none"><li>• Packet with September 11, 2023 presentation was uploaded in the meeting packet to the website on September 19, 2023</li></ul>										

**Next Executive Committee Meeting:**

Date: October 26, 2023

Time: 12:30 to 1 p.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/CYFBHSOCCouncil.html](https://www.sandiegocounty.gov/content/sdc/hhsa/programs/bhs/mental_health_services_children/CYFBHSOCCouncil.html)

**Next Meeting: Combined Councils**

Date: Monday, October 16, 2023

Time: 9 to 10:30 a.m.

		+=Member in Attendance    O=Absent		E=Excused	
CONSTITUENCY		MEMBER	STATUS	ALTERNATE	STATUS
<b>PUBLIC SECTOR</b>					
1	Behavioral Health Advisory Board (BHAB)	Bill Stewart	O	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 and Family Well Being (CFWB) Department – Office of Child Safety	Steven Wells	+	Norma Rincon	O
5	Homeless Solutions and Equitable Communities	Rosa Gracian	O	Liki Porotesano	+
6	Public Health	Dr. Thomas R. Coleman	O	Rhonda Freeman	O
7	Medical Care Services	Dr. Kelly Motadel	+	Heather Summers	+
8	Juvenile Court	H. Judge Ana España	O	Beth Brown	+
9	CFWB Department – Office of Child and Family Strengthening - First 5 San Diego	Alethea Arguilez	O	Stephanie Escobar	E
<b>EDUCATION SECTOR</b>					
10	Special Education Local Plan Area (SELPA)	Russell Coronado	O	Jaime Tate-Symons	+
11	Regular Education Pupil Personnel Services	Heather Nemour	+	Mara Madrigal-Weiss	O
12	School Board	Barbara Ryan	+	Debra Schade	+
13	Special Education	Yuka Sakamoto	+	Misty Bonta	O
<b>PRIVATE SECTOR</b>					
14	San Diego Regional Center (SDRC) for Developmentally Disabled	Zachary Guzik	+	Lori Sorenson	+
15	Alcohol and Drug Service Provider Association (ADSPA)	Angela Rowe	+	John Laidlaw	O
16	ADSPA	Marisa Varond	+	Claudette Allen Butler	O
17	Mental Health Contractors Association (MHCA)	Julie McPherson	E	Vanessa Arteaga	+
18	MHCA	Laura Beadles	+	Golby Rahimi	+
19	Fee- For-Service (FFS) Network	Dr. Sherry Casper	O	Marcelo A. Podesta	+
20	Managed Care Health Plans	Kathleen Lang	+	James Trout	O
21	Healthcare/ Pediatrician	Dr. Pradeep Gidwani	+	Vacant	
<b>FAMILY AND YOUTH SECTOR</b>					
22	Consumer Advocacy/Family Education Services	Khalif Kelly	+	Sten Walker	+
23	Caregiver of child/youth served by the Public Health System	Vacant		Karilyn “Kari” Perry	O
24	Youth served by the Public Health System (up to age 26)	Veronica Hernandez	O	Vacant	
25	Youth served by the public health system (up to age 26)	Caitlynn Hauw	O		
<b>COMMITTEES (Non-voting members unless a member of the Council)</b>					
-	Executive	Stephanie Escobar/Celica Garcia-Plascencia	E/+		
-	Cultural Competence Resource Team (CCRT)	Rosa Ana Lozada	+		
-	CYF CADRE	Julie McPherson/Marisa Varond	E/+		
-	Early Childhood	Stephanie Gioia-Beckman/Jennifer Kennedy	+/+		
-	Education	Heather Nemour	+		
-	Family and Youth as Partners	Sten Walker	+		
-	Outcomes	Emily Trask Eileen Quinn-O’Malley	+/+		
-	Training	Edith Mohler Jennifer Rusit	+/O		

**Total Attendees: 106**

Aisha Pope	Divya Kakaiya	Jennifer Busico	Pradeep Gidwani
Alexis Anderson	Donna Moore	Jennifer Kennedy	Rachel Chiang
Alexis Cabarga	Edith Mohler	Jody Erickson	Rafael Ortiz-Gomez
Amanda Lance-Sexton	Eileen Quinn-O'Malley	Joseph Henson	Rhonda Crowder
Angela Rowe	Elizabeth Dauz	Kacie Rodvill	Roberto Suarez
Angelina Puffelis	Elly Chung	Kathleen Lang	Rosa Ana Lozada
Aprille Peña	Emily Gaines	Kelly Bordman	Sade Carswell
Ashley Rambeau	Emily Trask	Kelly Motadel	Sarah Baldwin
Azmin Granados	Erick Mora	Kenia Urrutia	Serena Richards
Babbi Winegarden	Ericka Hernandez	Khalif Kelly	Shaun Goff
Barbara Ryan	Evan Hodges	Kristin Garrett	Shewa Legesse
Beth Brown	Fran Cooper	Laura Beadles	Stacey Musso
Brenda Estrada	Francisco Medrano	Laura Vleugels	Sten Walker
Bri Ferreira	Gabriela Contreras-Misirlioglu	Leslie Manriquez	Stephanie Gioia-Beckman
Carmen Pat	Gina Herbert	Liki Porotesano	Steven Wells
Celeste Hunter	Ginger Bial Cox	Lori Sorenson	Susana Antonio
Celica Garcia-Plascencia	Golby Rahimi Saylor	Marcelo Podesta	Tanya Mercado
Christine A. Davies	Grisel Ortega-Vaca	Mareeh Marquez	Terri Kang
Christine Maggio	Hannah Zimmerman	Margarita Hernandez	Vanessa Arteaga
Danyte Mockus-Valenzuela	Heather Nemour	Maria Norris	Wences Savaiki
Darwin Espejo	Heather Summers	Maria Ventura	Wendy Curiel
David Taylor	Jaime Tate-Symons	Marisa Varond	Wendy Maramba
Debra Schade	Jamie Pellegrino	Mayra Gonzalez-Munoz	Yael Koenig
Delona King	Janet Cacho	Melanie Morones	Yuka Sakamoto
Delrena Swaggerty	Janette Magsanoc	Melissa Penaflor	Yvette Leyva
Dina Ali	Jazmin Wali	Melizza Welton	Zach Guzik
		Michelle Houle	Unknown Caller

**Committees/Sectors/Workgroups Meetings Information:**

**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 the month alternating start times of 11:30 a.m. and 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

**Peer Council:** Every third Tuesday of each month at 2 p.m. via Zoom



# COUNTY OF SAN DIEGO

## AGENDA ITEM

### BOARD OF SUPERVISORS

NORA VARGAS  
First District

JOEL ANDERSON  
Second District

TERRA LAWSON-REMER  
Third District

VACANT  
Fourth District

JIM DESMOND  
Fifth District

**DATE:** September 12, 2023

**11**

**TO:** Board of Supervisors

### **SUBJECT**

**APPROVE AND RATIFY THE CHILDREN'S TRUST FUND THREE-YEAR FUNDING PROPOSAL (DISTRICTS: ALL)**

### **OVERVIEW**

The San Diego County Board of Supervisors (Board) has taken a strong leadership role in supporting efforts to prevent and respond to child abuse and neglect. The efforts focus on strengthening families by identifying and addressing the needs of children and youth who are in the public charge as well as those whose safety and welfare may be at risk. On March 26, 2019 (11), the Board adopted Ordinance No. 10598 (N.S.) repealing and replacing provisions in the San Diego County Administrative Code to establish the Child and Family Strengthening Advisory Board of San Diego County (CFSAB).

The CFSAB is charged with recommending funding proposals for child maltreatment prevention and intervention services for the Children's Trust Fund (CTF) to ensure the safety and well-being of children and families. California Welfare and Institutions Code Section 18966 directs the CTF to be used for child maltreatment prevention and intervention programs operated by private nonprofit organizations or public institutions of higher education with recognized expertise in fields related to child welfare. The CTF consists of funding from birth certificate fees, license plate fees, child maltreatment court restitution fines, Community-Based Child Abuse Prevention funds, grants, and gifts or bequests from private sources.

Today's actions request the Board approve and ratify the CTF Three-Year Funding Proposal for Fiscal Year (FY) 2023-24 through FY 2025-26 and authorize the Agency Director, Health and Human Services Agency, to approve expenditures in accordance with the CTF Funding Proposal.

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 upholding sustainable practices to provide just and equitable access to prevention, intervention, and family strengthening services, and opportunities for participation to ensure all children, families, and communities in the region flourish and thrive.

**SUBJECT:** APPROVE AND RATIFY THE CHILDREN’S TRUST FUND THREE-YEAR FUNDING PROPOSAL (DISTRICTS: ALL)

**RECOMMENDATION(S)**

**CHIEF ADMINISTRATIVE OFFICER**

1. Approve and ratify the Child and Family Strengthening Advisory Board of San Diego County Children’s Trust Fund (CTF) Three-Year Funding Proposal for Fiscal Year (FY) 2023-24 through FY 2025-26.
2. Authorize the Agency Director, Health and Human Services Agency, to approve expenditures in accordance with the CTF Three-Year Funding Proposal.

**EQUITY IMPACT STATEMENT**

The Child and Family Strengthening Advisory Board of San Diego County (CFSAB) represents a broad cross-section of community and stakeholders including individuals with lived experience; resource parents; public and private child and family-serving systems; judicial, health, and education systems; and representation from supervisorial districts. Some of the duties and responsibilities of the CFSAB include:

- Recommending improvements in services to families and victims who are in the public charge, as well as children, youth, and families whose safety and welfare may be at risk;
- Serving as the designated child abuse prevention coordinating body and local Children's Trust Fund (CTF) body as set forth in California Welfare and Institutions Code Sections 18965 et seq. and 18982 et seq. regarding proposals to be funded by the CTF; and
- Recommending proposals to the San Diego County Board of Supervisors that the CFSAB agrees merit funding.

Input on proposed services and activities were gathered from the community at CFSAB and workgroup meetings and recommended by the CFSAB for CTF funding to align with sustainability practices to promote equity, justice, and community with focused investment in providing services to low-income families and families of color residing in underserved and under-resourced communities.

In Fiscal Year (FY) 2021-22, the County of San Diego Health and Human Services Agency, Child and Family Well-Being Department, Office of Child Safety (OCS) received 39,025 reports of abuse and neglect to the Child Abuse Hotline, representing 67,824 children. Despite a minor increase in reports compared to FY 2020–21, OCS saw a 12% decline in reports over the previous five years as a result of work in prevention and family strengthening. The number of children in foster care has also decreased by 7% over the previous four years, while the number of children placed in kinship care has increased by 4%. Kinship care is a priority, as it is important to keep children in a familiar environment safely, whenever possible. As a result of increased CTF funding to Kinship Caregiver assistance in FY 2022–23, case management services to kinship families increased by 40% and emergency kinship assistance increased by 18%, supporting the rise in the number of children in kinship care and helping to narrow the gap of children in foster care, who are not placed in relative or non-related extended family member homes.

**SUSTAINABILITY IMPACT STATEMENT**

Funding programs for the prevention and intervention of child abuse and neglect align with the County of San Diego Sustainability Goal #1, to engage the community in meaningful ways and Sustainability Goal #2, to provide just and equitable access to County services by keeping families together through supporting kinship placements. The CTF funding proposal, prevention services,



**SUBJECT: APPROVE AND RATIFY THE CHILDREN’S TRUST FUND THREE-YEAR FUNDING PROPOSAL (DISTRICTS: ALL)**

and financial assistance supports keeping families together through kinship placements and preventing children from entering foster care by strengthening families’ ability to meet their own needs, increase self-sufficiency, and reduce trauma to help achieve healthy, safe, and thriving communities.

**FISCAL IMPACT**

Funds for this request are included in the Fiscal Year (FY) 2023-25 Operational Plan in the Health and Human Services Agency. If approved, this request will result in estimated costs and revenue of \$1,600,000 in FY 2023-24 and estimated costs and revenue of \$1,600,000 in FY 2024-25. The three-year funding proposal for FY 2023-24 through FY 2025-26 is an estimated total costs and revenue of \$4,800,000. The funding source is the AB 2994 Children’s Trust Fund. There will be no change in net General Fund cost and no additional staff years.

**BUSINESS IMPACT STATEMENT**

N/A

**ADVISORY BOARD STATEMENT**

On July 28, 2023, the Child and Family Strengthening Advisory Board of San Diego County reviewed the Children’s Trust Fund Funding Proposals for Fiscal Year (FY) 2023-24 through FY 2025-26.

**BACKGROUND**

The San Diego County Board of Supervisors (Board) has taken a strong leadership role in supporting efforts to prevent and respond to child abuse and neglect. The efforts focus on strengthening families by identifying and addressing the needs of children and youth who are in the public charge as well as those whose safety and welfare may be at risk. On March 26, 2019 (11), the Board adopted Ordinance No. 10598 (N.S.) repealing and replacing provisions in the San Diego County Administrative Code to establish the Child and Family Strengthening Advisory Board of San Diego County (CFSAB). The CFSAB was created to enhance the ability of the County of San Diego (County) to prevent and respond to child abuse and neglect. The intent of the CFSAB is to serve as a platform for cross-sector collaboration in the prevention, detection, treatment, and legal processing of child maltreatment cases and support of countywide activities that promote family strengthening, in addition to the transparent monitoring of the County’s child and family well-being system.

Furthermore, the CFSAB is charged with oversight and planning responsibilities for the Children’s Trust Fund (CTF) to ensure the safety and well-being of children and families. The CTF consists of funding from birth certificate fees, license plate fees, child maltreatment court restitution fines, Community-Based Child Abuse Prevention funds, grants, and gifts or bequests from private sources. California Welfare and Institutions Code Section 18966 directs the CTF to be used for child maltreatment prevention and intervention programs operated by private nonprofit organizations or public institutions of higher education with recognized expertise in fields related to child welfare. Following these criteria, the three-year CTF Funding Proposal for Fiscal Year (FY) 2023-24 totaling \$1,600,000, FY 2024-25 totaling \$1,600,000, and FY 2025-26 totaling \$1,600,000 (Attachment A) was developed and brought before the CFSAB prior to final submission to the Board.

**SUBJECT: APPROVE AND RATIFY THE CHILDREN’S TRUST FUND THREE-YEAR FUNDING PROPOSAL (DISTRICTS: ALL)**

The CTF Funding Proposal for FY 2023-24 through FY 2025-26 recommends funding of \$1,600,000 for the following services and activities:

*A. Voluntary Guardianship Services and Special Education Legal Advocacy: \$550,000*

Funds in the amount of \$550,000 will be allocated to the County, Health and Human Services Agency, Child and Family Well-Being Department (CFWB) for existing contracts with nonprofit providers for the continued provision of legal services to include:

- Guardianship counseling for parents;
- Assistance to relatives with low income who seek to obtain legal guardianship of children;
- Education and training on the guardianship and dependency court process to caregivers, agencies and organizations, and other county residents; and
- Collaboration and/or representation of relative and non-related caregivers of youth in foster care in the areas of:
  - Special Education;
  - Compliance with Individualized Education Plans; and
  - School-related disciplinary matters.

The CTF has supported these legal services since July 2012. The current contract is set to expire on December 31, 2023. Contractors have provided legal guardianship services to approximately 255 families annually and representation in special education matters to caregivers of approximately 113 youth annually. This allocation is the same as was proposed for FY 2022-23.

*B. Kinship Caregiver Support: \$400,000*

Funds in the amount of \$400,000 will be allocated to provide primary and secondary prevention services through existing CFWB contracts for kinship support. This allocation provides services and resources to formal and informal kinship families and bolsters community support and connections with an emphasis on kinship families of color residing in underserved communities. These funds support kinship caregiver programs and activities including:

- Support groups for caregivers and their family members;
- Navigation services to identify caregiver needs and linkages to services and resources;
- Case management;
- Family finding services;
- Expedited delivery of critical tangible supports upon placement to secure and maintain safe and stable placement; and
- Social connection activities.

The CTF has supported caregiver support programs since July 2015. The current contract is set to expire on June 30, 2025. Approximately 360 families receive case management services, and 456 families receive emergency kinship support annually. This allocation is the same as was proposed for FY 2022-23.

**SUBJECT: APPROVE AND RATIFY THE CHILDREN’S TRUST FUND THREE-YEAR FUNDING PROPOSAL (DISTRICTS: ALL)**

*C. Pre-Petition Legal Advocacy: \$300,000*

Funds in the amount of \$300,000 will be allocated to CFWB to contract with providers for the provision of pre-petition legal advocacy for families interacting with CFWB, who do not have an open case with CFWB, Office of Child Safety. These funds will provide legal services to parents in an effort to mitigate safety concerns and prevent the need for children to enter foster care. Legal services may include but are not limited to:

- Assistance in filing restraining orders;
- Amending Family Court custody orders;
- Obtaining Individualized Education Plans from schools to support the provision of school-based mental health treatment;
- Establishing legal guardianship with a relative through Probate Court; and
- Assistance with legal counseling and services that may impact a child’s stability in their home such as outstanding warrants, immigration services, eviction notices, etc.

This allocation is in direct alignment with Child Welfare Services Working Group Recommendation (#23), to explore the provision of court-appointed legal services to children and parents who are diverted to Probate Court. This was a new allocation proposed for FY 2022-23, at which time the procurement for these services was anticipated to begin. At this time, the procurement is pending and anticipated to begin in FY 2023-24. This allocation is the same as was proposed for FY 2022-23.

*D. Prevention Hub: \$300,000 – New Priority*

Funds in the amount of \$300,000 will be allocated to support the goals of the Prevention Hub to serve children and families through CFWB. On March 14, 2023 (4), the Board approved the authorization to competitively procure and award a contract for the purpose of implementing the Prevention Hub.

The goal of the Prevention Hub is to link families to the primary, secondary, and tertiary prevention services needed to prevent families from coming to the attention of the child welfare system and juvenile probation. As a centralized access point, the Prevention Hub will ensure families have one point of contact to help them navigate needed prevention supports and services:

- Ensuring a prevention-focused infrastructure to keep children safely at home using evidence-based practices;
- Eliminating income criteria, creating opportunities to provide prevention services to more families; and
- Providing funding to support services to prevent the entry or return of youth into the foster care or probation systems.

This is a new allocation proposed for FY 2023-24; at which time the procurement for these services is anticipated to begin.

*E. Child and Family Strengthening Advisory Board: \$50,000*

Funds in the amount of \$50,000 will be allocated to further the mission of the CFSAB to strengthen families and victims who are in the public charge, as well as children, youth, and families whose safety and welfare may be at risk. Activities in support of strengthening families to build thriving communities include the sponsorship of prevention and awareness campaigns in the County’s

**SUBJECT: APPROVE AND RATIFY THE CHILDREN’S TRUST FUND THREE-YEAR FUNDING PROPOSAL (DISTRICTS: ALL)**

annual Summer Movies in the Park series that occurs countywide at more than 94 hosting sites and provides over 150 screenings. Examples of campaigns presented on-screen before the featured screening include Pool Safety, Early Reading Programs, Kinship Support Programs, Shaken Baby Syndrome Prevention, Healthy Habits for Healthy Communities, and Sex Trafficking Awareness.

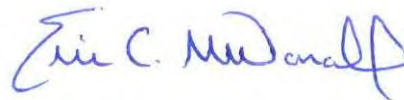
In the summer of 2022, 28,000 residents and visitors attended 154 events. Events took place in 94 different parks serving 59 San Diego County communities. The CTF has supported family strengthening and prevention campaigns at the County’s Summer Movies in the Park series since summer 2010. This allocation is the same as was proposed for FY 2022-23.

Today’s action requests the Board approve and ratify the CFSAB CTF Three-Year Funding Proposal and authorize the Agency Director, Health and Human Services Agency, to approve expenditures in accordance with the CTF Funding Proposal.

**LINKAGE TO THE COUNTY OF SAN DIEGO STRATEGIC PLAN**

Today’s proposed actions support the County of San Diego’s (County) 2023-2028 Strategic Plan Initiatives of Sustainability (Economy and Resiliency), Equity (Health), Empower (Transparency and Accountability), Community (Engagement, Quality of Life, and Communications), and Justice (Environmental) by providing increased and equitable access to prevention, intervention, and family strengthening services and supports to ensure the safety and well-being of children and families.

Respectfully submitted,



HELEN N. ROBBINS-MEYER  
Interim Chief Administrative Officer

**ATTACHMENT(S)**

Attachment A – Child and Family Strengthening Advisory Board of San Diego County Children’s Trust Fund Three-Year Funding Proposal for Fiscal Years 2023-24 through 2025-26





## **Child and Family Strengthening Advisory Board of San Diego County Children's Trust Fund Three-Year Funding Proposal for Fiscal Years 2023-24 through 2025-26**

### **BACKGROUND**

In accordance with California Welfare and Institutions Code Section 18967 the following three-year funding proposal for Fiscal Year (FY) 2023-24 through 2025-26 is hereby submitted for the San Diego County Board of Supervisors' (Board) review and approval.

### **2021/2022 TRUST FUND BALANCE:**

2021/2022 FY beginning balance on July 1, 2021: **\$645,590**

2021/2022 FY Revenue: **\$3,107,873**

2021/2022 FY Spending: **\$715,545**

2021/2022 Balance as of June 30, 2022: **\$3,037,918**

The final trust fund balance for 2022/2023 is anticipated to be available in September 2023.

### **2023-2024, 2024-2025, and 2025-2026 FUNDING PROPOSAL:**

The AB 2994 Children's Trust Fund funding is proposed for the following ongoing child maltreatment prevention and intervention programs and services and new priority:

#### ***A. Voluntary Guardianship Services and Special Education Legal Advocacy: \$550,000 – Ongoing***

Contracted services provide guardianship counseling for parents and assistance to relatives with low income who seek to obtain legal guardianship of children. Services also provide legal advice, advocacy, education/training, collaboration, and/or representation to relative and non-related caregivers of youth in foster care in the areas of special education, compliance with Individualized Education Plans, and school related disciplinary matters.

The recommendation of \$300,000 for FY 2023-2024, FY 2024-2025 and FY 2025-2026 is used to support Legal Guardianship and \$250,000 for FY 2023-2024, FY 2024-2025 and FY 2025-2026 is used to support Special Education Legal Advocacy services. Funds were allocated to the County of San Diego, Health and Human Services Agency, Child and Family Well-Being Department (CFWB) for these legal services and support through current contracts with nonprofits.

#### ***B. Kinship Caregiver Support: \$400,000 - Ongoing***

Funds will be allocated to provide primary and secondary prevention services through existing contracts for Kinship Caregiver Support to formal and informal Kinship families. These funds support kinship caregiver programs and activities. The recommendation for \$400,000 for FY 2023-2024, FY 2024-2025, and FY 2025-2026 will support CFWB contracted services for:

- Support groups for caregivers and their family members;

- Navigation services to identify caregiver needs and linkages to services and resources;
- Case management;
- Family finding services;
- Expedited delivery of critical tangible supports upon placements to secure and maintain safe and stable placements; and
- Social connection activities.

***C. Pre-Petition Legal Advocacy: \$300,000 – Ongoing***

Funds will be allocated to CFWB to contract with providers for the provision of pre-petition legal advocacy for families interacting with CFWB and not in an open Office of Child Safety case. These funds will provide legal services to parents in an effort to mitigate safety concerns and prevent the need for children to enter foster care. This allocation is in direct alignment with the CWS Working Group Recommendation (#23) to explore the provision of court-appointed legal services to children as well as parents who are diverted to Probate Court.

***D. Prevention Hub: \$300,000 – New Priority***

Funds will be allocated to support the goals of the Prevention Hub to serve children and families through CFWB. The goal of the Prevention Hub is to link families to primary, secondary, and tertiary prevention services that are needed to prevent families from coming to the attention of the child welfare system and Juvenile Probation. As a centralized access point, the Prevention Hub will ensure families have one point of contact to help them navigate needed prevention supports and services. The recommendation for \$300,000 for FY 2023-2024, FY 2024-2025, and FY 2025-2026 will support concrete resources to families such as beds, sheets, medical supplies, etc.

***E. Child and Family Strengthening Advisory Board: \$50,000 – Ongoing***

Funds were allocated to further the mission of the Child and Family Strengthening Advisory Board:

- To serve as an informational resource to the Board on issues related to child maltreatment.
- Provide a forum for interagency cooperation and coordination in the prevention, detection, treatment, and legal processing of child maltreatment cases.
- Recommend improvements in services to strengthen families and victims who are in public charge, as well as children, youth, and families whose safety and welfare may be at risk.
- Encourage and facilitate community support for child abuse and neglect, and family strengthening programs.
- Address emerging issues including Commercially Sexually Exploited Children.

Funds will be used for qualifying child abuse prevention promotional events, materials, and communication.

<b>Funding Proposal for Fiscal Year 2023-2024 through 2025-2026</b>
Voluntary Guardianship Services and Special Education Legal Advocacy: \$550,000
Kinship Caregiver Support: \$400,000
Pre-Petition Legal Advocacy: \$300,000
Prevention Hub: \$300,000
Child and Family Strengthening Advisory Board: \$50,000
Proposed Allocation: \$1,600,000



# COUNTY OF SAN DIEGO

## AGENDA ITEM

### BOARD OF SUPERVISORS

NORA VARGAS  
First District

JOEL ANDERSON  
Second District

TERRA LAWSON-REMER  
Third District

VACANT  
Fourth District

JIM DESMOND  
Fifth District

**DATE:** September 26, 2023

**01**

**TO:** Board of Supervisors

### **SUBJECT**

**MAKING SAN DIEGO A BLUE ENVELOPE COUNTY (DISTRICTS: ALL)**

### **OVERVIEW**

The San Diego County Sheriff's Department (Sheriff's Department) has embraced and adopted a new resource called the Blue Envelope Program. The program is designed to promote inclusivity and serve as an enhanced communication awareness tool between law enforcement officers and community members diagnosed with a condition or disability such as Autism Spectrum Disorder, dementia, anxiety, or other conditions that might require additional accommodations or awareness during a law enforcement interaction. For example, a traffic stop or vehicle accident. The Blue Envelope Program prioritizes safety, effective communication, and provides an opportunity to alleviate misunderstandings through increased awareness for both the driver and the law enforcement officers.

The Sheriff's Department has received the support of the San Diego County Chiefs' and Sheriff's Association to expand the program countywide with local law enforcement agencies by extending training resources and distributing the Blue Envelope Program outreach materials to county partners and organizations who engage with individuals with a condition or disability where additional accommodations or awareness could be helpful.

On June 14, 2022 (23), Supervisor Lawson-Remer introduced an initiative to open doors, provide autonomy and dignity for neurodivergent San Diegans. Today's Board action will build on these efforts by supporting the County in implementing the Blue Envelope Program.

Today's Board action seeks to expand the Sheriff's Department's Blue Envelope Program by leveraging other County departments in promoting the program and making San Diego County more inclusive and equitable for our community members with a condition or disability by participating in this nationwide effort and declaring us a Blue Envelope County.

### **RECOMMENDATIONS**

**SUPERVISORS JIM DESMOND, TERRA LAWSON-REMER, AND SHERIFF**

1. Direct the Chief Administrative Officer to identify core collaborative County department partners to work with the Sheriff's Department in the implementation of the Blue Envelope Program.



**SUBJECT: MAKING SAN DIEGO A BLUE ENVOPE COUNTY (DISTRICTS: ALL)**

2. Declare San Diego County a Blue Envelope County.
3. Direct the Chief Administrative Officer to work collaboratively with the Sheriff's Department to identify grants and other funding sources to fund ongoing needs for a regional Blue Envelope Program and return to the Board in early 2024 with a set of recommendations and a cost analysis relevant to the complete implementation of the program within the fiscal year 2024/2025 budget.

**EQUITY IMPACT STATEMENT**

The implementation of the Blue Envelope Program in San Diego County is intended to enhance communication between individuals with a condition or disability and law enforcement officers or other public service personnel. Awareness and training provided by the Blue Envelope Program will assist with identifying, recognizing, and communicating more effectively with members of our community with a condition or disability. By providing a visible display of the program's logo, individuals can choose to voluntarily disclose, and provide awareness of, their needs to a law enforcement or a public service officer. This program promotes effective communication, thus reducing misunderstandings, and encouraging positive interactions.

**SUSTAINABILITY IMPACT STATEMENT**

This proposed action contributes to the County of San Diego's Sustainability Goal of engaging the community in meaningful ways and continually seeking stakeholder input to foster inclusive and sustainable communities. The Blue Envelope Program, as envisioned for San Diego County, is a collaboration between law enforcement, other first responders, county agencies, and community partners to encourage education, inclusion, and training to improve interactions with members of our community with a condition or disability. The goal is creating a means for equitable treatment for individuals who may need accommodations. Efforts will be made to ensure equitable access to and awareness of the program to prevent any potential bias or discrimination, furthering its impact on promoting equity.

**FISCAL IMPACT**

Funds for this request are included in the Fiscal Year 2023-24 Operational Plan in the Department of Human Resources, which will be centrally funding these efforts. If approved this request will result in estimated costs of \$75,000 for the initial expansion of the Blue Envelope Program, based on today's actions. The funding source is General Purpose Revenue. There will be no change in net General Fund cost and no additional staff years this fiscal year. However, today's recommended actions may result in future fiscal impacts, for which staff will return to the Board for consideration and approval.

**BUSINESS IMPACT STATEMENT**

N/A

**ADVISORY BOARD STATEMENT**

N/A

**BACKGROUND**

**SUBJECT: MAKING SAN DIEGO A BLUE ENVOPE COUNTY (DISTRICTS: ALL)**

In 2020, the State of Connecticut implemented a Blue Envelope Program to enhance communication between a police officer and a driver on the autism spectrum. The namesake of Connecticut's Blue Envelope program derives its name from blue envelopes given to drivers or caretakers who would like to have common documents requested by law enforcement during traffic stops available in a convenient manner and serving as easily identifiable sign that a person has autism. The blue envelope also has notes to law enforcement on specific communication needs of the individual.

Since the State of Connecticut introduced the Blue Envelope, Riverside County Sheriff's Office debuted a similar program on May 1, 2023, among other police agencies in the United States. San Diego County Sheriff's Department learned of this resource and identified an opportunity to not only implement blue envelopes in the Sheriff's jurisdiction, but to adapt and elevate the envelopes into this vision of San Diego's Blue Envelope Program. The program includes the branded icon and outreach material to build awareness. The Blue Envelope Program branded outreach material have been strategically designed and selected in consultation with community stakeholders that support individuals with a condition or disability which may impact communication or require additional accommodations or awareness during an interaction.

Due to the wide variety of interactions that law enforcement officers may have with individuals with a condition or disability, it is important to have an assortment of products available to individuals who want to display the logo. The display of the Blue Envelope logo is the most important aspect of the program. The logo consists of an innocuous envelope icon, comparable to common messaging applications, with a deeper meaning of attempting to promote effective communication through audible and non-audible means. Logo products such as stickers, lanyards, wristbands, seatbelt covers, and pins were designed for those who choose to display the logo on their person and/or their vehicle.

Being contacted by law enforcement can make anyone uncomfortable, and for individuals with a condition or disability, it could cause even greater stress. The Blue Envelope Program is a communication tool that helps elevate awareness during an interaction and promotes effective communication. The Blue Envelope Program works by allowing the individual to readily display the Blue Envelope logo or present the Blue Envelope upon contact with law enforcement or other community service personnel. The Blue Envelope branded products can contain the individual's identification, contact information or pertinent vehicle operating documents such as the vehicle registration and proof of insurance.

The Blue Envelope Program expands on the Sheriff's Department's regional efforts, such as its "Take Me Home" Program, a registry which gives law enforcement quick access to critical information about a registered person in case they get lost or wander away. Unlike the "Take Me Home" Program, the Blue Envelope Program will not have a registry component. The San Diego Sheriff's Department will not record personal identifying information of the individuals who receive Blue Envelope Program products, all components of the program are voluntary and self-implemented.

Law enforcement will be issued training resources on the Blue Envelope Program as part of a collaborative regional effort. The training will be in addition to disability awareness and

**SUBJECT: MAKING SAN DIEGO A BLUE ENVOPE COUNTY (DISTRICTS:  
ALL)**

competency trainings that already take place during the Regional Law Enforcement Academy and as part of continued professional training.

Since June 2023, the Sheriff's Department has met and gained program support from the San Diego Regional Center, Alzheimer's San Diego, ARC of San Diego, Deaf Community Services of San Diego, Autism Society of San Diego, American Diabetes Association, San Diego Center for the Blind, Braille Institute, San Diego Brain Injury Foundation, Gigi's Playhouse, and the Metropolitan Transit System (MTS). Community partner organizations, who serve individuals with conditions or disabilities, will be an integral piece in promoting and expanding the reach of the program across the region.

San Diego County Sheriff's Department continually strives to provide the best public safety services for all throughout the region. This effort includes continual training opportunities to enhance service delivery to the diverse needs of members in our communities. The Sheriff's Department has implemented an Americans with Disabilities Act (ADA) Unit that seeks to bridge the needs of those we provide service and care for in-custody and in the community. The Blue Envelope Program further demonstrates the department's continued commitment to inclusion.

The department's current focus is on regional law enforcement with the desire to expand to other first responder agencies, health care providers, community service providers, and general community marketing outreach efforts. Participation by County departments and other agencies will be voluntary. On June 14, 2022 (23), Supervisor Lawson-Remer introduced an initiative to open doors, provide autonomy and dignity for neurodivergent San Diegans. Today's Board action will build on these efforts by supporting the county in implementing the Blue Envelope Program.

Today's action seeks to expand the support for the Sheriff's Department's implementation of the Blue Envelope Program by leveraging County departments in promoting the program and making San Diego County more inclusive and equitable for community members with a condition or disability by participating in this growing nationwide effort and declaring San Diego County a Blue Envelope County. This declaration is intended to show the County's support for the Blue Envelope Program.

**LINKAGE TO THE COUNTY OF SAN DIEGO STRATEGIC PLAN**

The requested action supports the County's 2023-2028 Strategic Plan Initiatives of Equity (Health), Community (Safety, Communications, Partnership), and Justice (Safety) by implementing the Blue Envelope Program in County of San Diego.

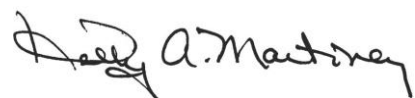
Respectfully submitted,



JIM DESMOND  
Supervisor, Fifth District



TERRA LAWSON-REMER  
Supervisor, Third District



KELLY A. MARTINEZ  
Sheriff

**SUBJECT: MAKING SAN DIEGO A BLUE ENVOPE COUNTY (DISTRICTS:  
ALL)**

**ATTACHMENTS**

**N/A**





SAN DIEGO COUNTY  
**Sheriff's Department**

[Blue Envelope Program - San Diego County Sheriff's Department - YouTube](#)

[Programa Sobre Azul - San Diego County Sheriff's Department - YouTube](#)



[Blue Envelope Program | San Diego County Sheriff \(sdsheriff.gov\)](#)

This program is designed to promote inclusivity and serve as an enhanced communication awareness tool between law enforcement and community members diagnosed with a condition or disability such as Autism Spectrum Disorder, dementia, anxiety or other conditions that might require additional accommodations or awareness during a law enforcement interaction.

The Blue Envelope Program works by allowing an individual to readily display the Blue Envelope logo Blue Envelope upon contact with law enforcement or other community service personnel.

This program expands on the Sheriff's Department's regional efforts to provide the highest standard of service for San Diego County. A related program is our [Take Me Home Program](#), which gives law enforcement quick access to critical information about a registered person with dementia, autism or other developmental disabilities in case they get lost or wander away.

[Take Me Home Registry | San Diego County Sheriff \(sdsheriff.gov\)](#)



# COUNTY OF SAN DIEGO

## AGENDA ITEM

### BOARD OF SUPERVISORS

NORA VARGAS  
First District

JOEL ANDERSON  
Second District

TERRA LAWSON-REMER  
Third District

VACANT  
Fourth District

JIM DESMOND  
Fifth District

**DATE:** September 26, 2023

**07**

**TO:** Board of Supervisors

### SUBJECT

**AUTHORIZATION TO ACCEPT CONGRESSIONAL DIRECTIVE SPENDING PROJECT GRANT FUNDING ADMINISTERED BY THE SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES ADMINISTRATION FOR MOBILE CRISIS RESPONSE TEAMS (DISTRICTS: ALL)**

### OVERVIEW

To support the well-being of those with behavioral health conditions, the San Diego County Board of Supervisors (Board) and the County of San Diego (County) Health and Human Services Agency (HHSA) remain committed to investing in services to meet the needs of this vulnerable population. In alignment with this commitment, County HHSA, Behavioral Health Services (BHS) continues to pursue new funding opportunities to enhance and expand access to critical mental health and substance use disorder prevention, engagement, and treatment services.

In February 2023, the Substance Abuse and Mental Health Services Administration (SAMHSA) began accepting non-competitive applications for a Notice of Funding Opportunity (NOFO) in response to Congressional Directive Spending Projects in SAMHSA's Fiscal Year 2023 Appropriation. Within the NOFO, the County was identified as a prospective applicant for \$4,480,000 of available grant funds for the "mobile behavioral health crisis response team" program. In April 2023, BHS submitted the application for these grant funds and on September 7, 2023, SAMHSA notified BHS of a conditional award.

Today's action requests authorization to accept this one-time grant funding award for the period of September 30, 2023, through September 29, 2024, to continue expansion of the Mobile Crisis Response Teams designed to help people who are experiencing a mental health or substance use crisis by dispatching behavioral health experts to emergency calls. Additionally, today's action requests the Board to authorize the department to waive the Board Policy B-29 requirement for full cost recovery associated with the one-time grant funding, as the public benefit of this project far outweighs the B-29 unrecoverable costs.

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 our ongoing commitment to the regional *Live Well San Diego* vision of healthy, safe,

**SUBJECT: AUTHORIZATION TO ACCEPT CONGRESSIONAL DIRECTIVE SPENDING PROJECT GRANT FUNDING ADMINISTERED BY THE SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES ADMINISTRATION FOR MOBILE CRISIS RESPONSE TEAMS (DISTRICTS: ALL)**

and thriving communities by enhancing innovative programs that connect individuals with behavioral health needs to the best level of care.

## **RECOMMENDATION(S)**

### **CHIEF ADMINISTRATIVE OFFICER**

1. Waive Board policy B-29, Fees, Grants, Revenue Contracts – Department Responsibility for Cost Recovery, which requires full cost recovery for grants.
2. Authorize the acceptance of approximately \$4,480,000 of one-time Congressional Directive Spending grant funds administered by the Substance Abuse and Mental Health Services Administration for the period of September 30, 2023, through September 29, 2024, and authorize the Agency Director, Health and Human Services Agency, or designee to execute all required documents, upon receipt, including any annual extensions, amendments, or revisions that do not materially impact or alter the services or funding level.

## **EQUITY IMPACT STATEMENT**

The vision of the County of San Diego Health and Human Services Agency, Behavioral Health Services (BHS), is to build a system in which mental health and substance use services are equitably and regionally distributed and accessible to all individuals and families within the region who are in need. In pursuit of this goal, BHS is committed to pursuing funding sources that will support the provision of services to vulnerable and underserved populations including those with serious mental illness (SMI). In 2021, according to the California Health Interview Survey conducted by the University of California Los Angeles, one out of every ten San Diego County residents reported experiencing serious psychological distress in the past month. However, residents living below 200% of the federal poverty level, those who reported a history of incarceration, or who identified as black, Hispanic/Latino, Asian, or multiracial were more likely to report serious psychological distress. Additionally, 2021 data from the California Department of Healthcare Access and Information show that black residents utilize the emergency department (ED) for SMI-related encounters at a rate that is 145% higher compared to others. The Mobile Crisis Response Teams (MCRT) helps reduce these disparities by responding to individuals in crisis, offering an alternative to the ED or potentially jail. To date, from January 2021 to July 2023, MCRT has responded to over 6,500 calls, with the majority of clients served identifying as a racial/ethnic minority.

## **SUSTAINABILITY IMPACT STATEMENT**

This item supports Sustainability Goal #2 and Sustainability Goal #4 – to provide just and equitable access to County of San Diego services, policy decision-making, and resource allocation in support of sustainable communities and to protect the health and well-being of everyone in the region. Mobile Crisis Response Teams (MCRT) provide an alternative response to law enforcement for individuals experiencing a behavioral health crisis and further expansion of the program ensures that clinical teams can reach historically underserved communities who may avoid seeking assistance from law enforcement during a time of crisis. By securing additional funding for the

**SUBJECT:** AUTHORIZATION TO ACCEPT CONGRESSIONAL DIRECTIVE SPENDING PROJECT GRANT FUNDING ADMINISTERED BY THE SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES ADMINISTRATION FOR MOBILE CRISIS RESPONSE TEAMS (DISTRICTS: ALL)

MCRT, this item supports the expansion of the regional network of crisis services enabling people to access care near their networks of support.

### **FISCAL IMPACT**

Funds for this request are included in the Fiscal Year (FY) 2023-25 Operational Plan in the Health and Human Services Agency. If approved, this action will result in estimated costs of approximately \$3,420,548 in FY 2023-24 and \$1,139,981 in FY 2024-25, and revenues of approximately \$3,360,000 in FY 2023-24 and \$1,120,000 in FY 2024-25 to enhance Mobile Crisis Response Teams services offered through contracted community-based providers. The funding source is one-time Congressional Directive Spending (CDS) grant funds administered by the Substance Abuse and Mental Health Services Administration funds totaling approximately \$4,480,000 for the period of September 30, 2023 through September 29, 2024.

For the CDS grant program, a waiver of Board Policy B-29 is requested because the funding does not offset all costs associated with the administration of the grant funds of approximately \$60,548 in FY 2023-24 and \$19,981 FY 2024-25. The anticipated funding sources for these costs are Mental Health Services Act and Realignment. The public benefit of providing these services far outweighs the unrecoverable costs and maximizes grant funds used to implement the project. There will be no change in net General Fund cost and no additional staff years.

### **BUSINESS IMPACT STATEMENT**

N/A

### **ADVISORY BOARD STATEMENT**

At their regular meeting on August 3, 2023, this item was presented to the Behavioral Health Advisory Board as informational.

### **BACKGROUND**

To support the well-being of those with behavioral health conditions, the San Diego County Board of Supervisors (Board) and the County of San Diego (County) Health and Human Services Agency (HHSA) remain committed to investing in services to meet the needs of individuals. In alignment with this commitment, County HHSA, Behavioral Health Services (BHS) continues to pursue funding opportunities to enhance and expand access to critical mental health and substance use disorder prevention, engagement, and treatment services.

In February 2023, the Substance Abuse and Mental Health Services Administration (SAMHSA) began accepting non-competitive applications for a Notice of Funding Opportunity (NOFO) in response to Congressional Directive Spending (CDS) Projects in SAMHSA's Fiscal Year 2023 Appropriation. Within the NOFO, the County was identified as a prospective applicant for \$4,480,000 of available funds for the "mobile behavioral health crisis response teams" program upon submission of a proposal outlining how the funds will be used and in April 2023, BHS submitted the application for these funds. On September 7, 2023 SAMHSA notified BHS of a conditional award of \$4,480,000 of non-competitive CDS grant funding.

**SUBJECT: AUTHORIZATION TO ACCEPT CONGRESSIONAL DIRECTIVE  
SPENDING PROJECT GRANT FUNDING ADMINISTERED BY THE  
SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES  
ADMINISTRATION FOR MOBILE CRISIS RESPONSE TEAMS  
(DISTRICTS: ALL)**

On March 26, 2019 (2), the Board adopted recommendations to develop a plan to strengthen the response to individuals with behavioral health needs, which resulted in the creation of the initial Mobile Crisis Response Team (MCRT) program that launched in January 2021 in the HHSA North Coastal Region of San Diego County and was expanded in phases throughout 2021 to serve individuals throughout all other regions of the county.

The MCRT program provides non-law enforcement, clinician-led, field-based crisis intervention services to individuals experiencing a behavioral health crisis. Teams are comprised of licensed mental health clinicians, case managers, and peer support specialists who can respond to behavioral health crisis calls that do not involve known threats of violence or medical emergencies. These teams provide assessments, de-escalation, and, if needed, will connect, and transport the individual to appropriate services such as counseling, case management, and substance use treatment services. MCRT services are available countywide, 24 hours a day, seven days a week, and serve individuals of all ages.

From January 2021 through July 2023, MCRT has responded to over 6,500 calls made through the San Diego Access and Crisis Line and referrals from law enforcement agencies. Countywide call volumes have steadily increased throughout the duration of the program, requiring additional resources to support optimal oversight and meaningful client outcomes. MCRTs divert individuals experiencing a crisis from unnecessary law enforcement involvement by instead stabilizing the client in the field and, if appropriate, connecting the client to the right level of behavioral health care. Of the calls MCRT has responded to, an estimated 51% of individuals were stabilized in the field and provided with referrals to ongoing care without the need for additional transport, thus reducing the need for law enforcement services and utilization of more expensive, acute services.

Today's action requests authorization to accept this one-time grant funding award for the period of September 30, 2023, through September 29, 2024, to continue expansion of MCRT, including on nights and weekends, which will be operationalized through amendments to contracts with the community-based providers that offer MCRT services. Additionally, today's action requests the Board to authorize the department to waive the Board Policy B-29 requirement for full cost recovery associated with the one-time grant funding. The public benefit of expanding the MCRT far outweighs the B-29 unrecoverable costs and allows for the maximization of grant funds for expansion of the MCRT program to support individuals of all ages who are experiencing a behavioral health crisis in being connected to the care they need.



**SUBJECT:** AUTHORIZATION TO ACCEPT CONGRESSIONAL DIRECTIVE  
SPENDING PROJECT GRANT FUNDING ADMINISTERED BY THE  
SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES  
ADMINISTRATION FOR MOBILE CRISIS RESPONSE TEAMS  
(DISTRICTS: ALL)

**LINKAGE TO THE COUNTY OF SAN DIEGO STRATEGIC PLAN**

Today's proposed actions support the County of San Diego's 2023-2028 Strategic Plan initiatives of Equity (Health) and Community (Quality of Life) by reducing disparities and disproportionality of individuals with mental illness and substance use disorders by enhancing innovative programs that connect individuals with behavioral health needs to the best level of care.

Respectfully submitted,



HELEN N. ROBBINS-MEYER  
Interim Chief Administrative Officer

**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

VACANT  
Fourth District

JIM DESMOND  
Fifth District

**DATE:** October 10, 2023

**13**

**TO:** Board of Supervisors

### SUBJECT

**RECEIVE AND APPROVE THE UPDATED OPIOID SETTLEMENT FRAMEWORK; DIRECT REPORT BACK ON SIGNIFICANT UPDATES TO THE OPIOID SETTLEMENT FRAMEWORK; AND AUTHORIZE ONE STAFF YEAR FOR TOXICOLOGY SERVICES TO EXPAND SURVEILLANCE OF EMERGING DRUG TRENDS (DISTRICTS: ALL)**

### OVERVIEW

In response to the regional overdose crisis, the San Diego County Board of Supervisors (Board) has approved the following actions including, but not limited to:

- Adoption of the County of San Diego's (County) Comprehensive Harm Reduction Strategy (June 8, 2021 (4));
- Approval of a media campaign to prevent fentanyl overdoses in youth (October 19, 2021 (2));
- Declaring Illicit Fentanyl a Public Health Crisis (June 28, 2022 (22));
- Enhancing Fentanyl Education and Strengthening Harm Reduction Efforts for Young People (October 11, 2022 (11));
- Adoption of the San Diego County Opioid Settlement Framework (October 25, 2022 (20)); and
- Update on Opioid Settlement Framework Implementation and Harm Reduction Media Campaigns (May 23, 2023 (26)).

Pursuant to Board direction on May 23, 2023 (26), today's action authorizes approval of the updated Opioid Settlement Framework (Framework) priorities that are in alignment with allowable spending uses defined in the Opioid Settlement Agreements guidelines set forth by the California Department of Health Care Services and directs the Chief Administrative Officer to report back on significant updates to the Framework. This action also requests authorization for the Public Safety Group, Medical Examiner's Office to add one staff year for toxicology services to expand surveillance of emerging drug trends.

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 which historically have been left behind, as well as the ongoing commitment to the regional *Live Well San Diego* vision of healthy, safe,

**SUBJECT:** RECEIVE AND APPROVE THE UPDATED OPIOID SETTLEMENT FRAMEWORK; DIRECT REPORT BACK ON SIGNIFICANT UPDATES TO THE OPIOID SETTLEMENT FRAMEWORK; AND AUTHORIZE ONE STAFF YEAR FOR TOXICOLOGY SERVICES TO EXPAND SURVEILLANCE OF EMERGING DRUG TRENDS (DISTRICTS: ALL)

and thriving communities. This will be accomplished by investing in access for care, support, outreach, and education for those impacted by the opioid crisis.

## **RECOMMENDATION(S)**

### **CHIEF ADMINISTRATIVE OFFICER**

1. Receive and approve the updated Opioid Settlement Framework, which is aligned with Opioid Settlement Agreements and new State guidance by approving Option A or Option B:
  - A. Authorize the spending plan, as outlined in Attachment A, inclusive of \$0.5 million of one-time Opioid Settlement Funds for a focused pilot program to distribute drug disposal bags to individuals prescribed opioids after a medical procedure (reduced from an approved amount of \$8.0 million per prior San Diego County Board of Supervisors action on October 25, 2022 (20), supporting ongoing investments through Fiscal Year 2030-31 with revenue from finalized and anticipated near-term settlements, or,
  - B. Authorize the same spending plan referenced in Option A but also include a one-time investment of \$7.5 million to support funding for the East County Recovery Bridge Center, part of Capital Project 1024603, replacing the \$7.5 million unspent on the initially recommended drug disposal pilot program. Under this option ongoing investments would be supported through Fiscal Year 2028-29, instead of Fiscal Year 2030-31, with revenue from finalized and anticipated near-term settlements.
2. Direct the Chief Administrative Officer to report back on significant updates to the Opioid Settlement Framework that will include adjustments based on ongoing review of existing programs and according to any new guidelines for Opioid Settlement Funds.
3. Approve and authorize the Public Safety Group, Medical Examiner's Office to add one staff year for toxicology services to expand surveillance of emerging drug trends and direct the Department of Human Resources to classify the positions at the appropriate level.

## **EQUITY IMPACT STATEMENT**

San Diego County residents may experience the world differently and have 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 communities, including when it comes to overdose and substance use. Although no single age group, race/ethnicity, gender, or socioeconomic status is immune to the current overdose crisis, data from the County of San Diego (County) Medical Examiner Office and the San Diego Association of Governments reveal trends over time and disproportionate impacts among varying groups in San Diego County. From 2017 to 2021, the rate of opioid overdose deaths increased by 209%, with the fentanyl overdose death rate increasing by 885% in that same period. However, opioid overdose death rates were highest among those between the ages of 18-45 years old, as well as Native American/Alaska Native and Black/African American residents compared to all other groups. In fact, these groups experienced opioid overdose death rates that were two to three times

**SUBJECT:** RECEIVE AND APPROVE THE UPDATED OPIOID SETTLEMENT FRAMEWORK; DIRECT REPORT BACK ON SIGNIFICANT UPDATES TO THE OPIOID SETTLEMENT FRAMEWORK; AND AUTHORIZE ONE STAFF YEAR FOR TOXICOLOGY SERVICES TO EXPAND SURVEILLANCE OF EMERGING DRUG TRENDS (DISTRICTS: ALL)

as high as the overall county rate. Based on this, efforts are underway in collaboration with regional stakeholders to learn the unique needs of San Diego County's communities.

Although overdose deaths reached a high in 2021, preliminary data show a 10% decrease in overdose deaths in the first two quarters of 2022 compared to 2021, which may indicate a plateau and demonstrates the critical need to continue the work laid out by the Opioid Settlement Framework (Framework). Today's update builds on the San Diego County Board of Supervisors' prior actions, including the adoption of the Framework, to specifically address the opioid and illicit fentanyl public health crisis. Through the implementation and performance monitoring of programs and services driven by the Framework's key components, as well as the current and future responsive behavioral health public messaging, outreach, and education efforts, the County strives to reduce harm to San Diego County residents impacted by this crisis.

#### **SUSTAINABILITY IMPACT STATEMENT**

Today's actions support the County of San Diego's (County) Sustainability Goal #2 to provide just and equitable access to County services with investments focused on chronically underserved communities. The implementation of the Opioid Settlement Framework ensures that programs and services are informed by the community and are available countywide to address the opioid and overdose crisis. This item also supports Sustainability Goal #4 to protect the health and well-being of everyone in the San Diego County region, through broad public messaging campaigns designed to enhancing community awareness of the harms associated with opioid misuse, overdose prevention and the availability of community resources.

#### **FISCAL IMPACT**

##### **Opioid Settlement Fund Distribution Assumptions (Attachment B)**

The distributions for the two ongoing settlements finalized to date (Janssen and Distributor) are estimated at \$6.1 million combined annually through Fiscal Year (FY) 2029-30 when the Janssen settlement payments are scheduled to end. Additionally, it is the County of San Diego's (County) understanding that settlements for TEVA, Allergan, Walmart, Walgreens, and CVS are being finalized, and it is expected the first annual payments will be received in the last quarter of 2023 or first quarter of 2024. Final County amounts and timing are not yet known. Assumptions were made based on the size of the nationwide settlement amounts to calculate estimates of \$3.2 million per year for the County for planning purposes. Spending would be rightsized to manage to resources available, as necessary.

Recommendation #1 Recommendation #1 Option B, using the revenue assumptions for Janssen and Distributor, as well as the planning estimates for TEVA, Allergan, Walmart, Walgreens, and CVS. Amounts for various other settlements in the pipeline were not included in Attachment B but will be monitored and costs adjusted accordingly as needed to meet available revenues and priorities, with a recognition that these are one-time funds over a finite number of years. Under both options of Recommendation #1, unspent funds from FY 2022-23 are being used to help support ongoing operations in the out years. However, Option B reprograms some of these unspent

**SUBJECT:** RECEIVE AND APPROVE THE UPDATED OPIOID SETTLEMENT FRAMEWORK; DIRECT REPORT BACK ON SIGNIFICANT UPDATES TO THE OPIOID SETTLEMENT FRAMEWORK; AND AUTHORIZE ONE STAFF YEAR FOR TOXICOLOGY SERVICES TO EXPAND SURVEILLANCE OF EMERGING DRUG TRENDS (DISTRICTS: ALL)

funds to help cover a gap in funding for the East County Recovery Bridge Center, shortening the period of funding for ongoing operational costs. Under either option, to promote sustainability of programs implemented where possible, County Health and Human Services Agency (HHSA) and County Public Safety Group (PSG) will explore additional Medi-Cal billing opportunities and grants and federal and State allocations, should they become available.

#### **Recommendation #1- Option A**

Funds for this request are partially included in the FY 2023-25 Operational Plan in HHSA and San Diego County Fire, Emergency Medical Services. The FY 2023-25 Operational Plan includes a total of \$7.1 million for the Opioid Settlement Framework (Framework), including \$6.8 million in the HHSA and \$0.3 million San Diego County Fire, Emergency Medical Services, respectively.

If approved, this request will result in estimated additional FY 2023-24 costs and revenues estimated at \$1.57 million, inclusive of \$0.97 million in the HHSA, \$0.5 million within the Sheriff's Department for evidence-based treatment and recovery support services for individuals within or transitioning out of the County's correctional facilities, and \$0.1 million within the Medical Examiner's Office for toxicology services to expand surveillance of emerging drug trends.

Total costs and revenues associated with implementation of the Framework as presented today in Attachment A are estimated to be \$8.67 million in FY 2023-24 and \$10.65 million in FY 2024-25. The funding source is Opioid Settlement Funds. HHSA will use existing appropriations and the PSG will return to the San Diego County Board of Supervisors (Board) to establish appropriations by the third quarter budget adjustment. Funds for subsequent years will be incorporated into future operational plans. There will be no change in net General Fund cost. There will be an increase of 1.0 staff year in the Medical Examiner.

Under Recommendation #1 Option A, it is anticipated that ongoing operational costs would be sustained through FY 2030-31.

#### **Recommendation #1- Option B**

This fiscal impact for Recommendation #1 Option B is the same as Recommendation #1 Option A, with one addition. Recommendation #1 Option B includes all of the same operational costs listed in Attachment A, but also includes an additional up-front investment of \$7.5 million to support the East County Recovery Bridge Center (RBC), part of the East County Crisis Stabilization Unit (CSU) and RBC Capital Project. The CSU/RBC project previously had grant funding added as part of the FY 2023-24 Operational Plan, however HHSA's initial grant application was not awarded. Under this option, staff would return to the Board as part of the quarterly status letter update to exchange \$7.5 million of grant funding with Opioid Settlement Funds for the RBC portion. HHSA is exploring Mental Health Services Act funds for the CSU portion and would use existing appropriations under this option. If this option is adopted, HHSA will still pursue future infrastructure grants should they become available. If any future grant funding were to be awarded, staff would return to the Board to suggest an alternative use for the Opioid Settlement Funds, including potential infrastructure projects.



**SUBJECT:** RECEIVE AND APPROVE THE UPDATED OPIOID SETTLEMENT FRAMEWORK; DIRECT REPORT BACK ON SIGNIFICANT UPDATES TO THE OPIOID SETTLEMENT FRAMEWORK; AND AUTHORIZE ONE STAFF YEAR FOR TOXICOLOGY SERVICES TO EXPAND SURVEILLANCE OF EMERGING DRUG TRENDS (DISTRICTS: ALL)

The initial Framework approved by the Board on October 25, 2022 (20), included \$8.0 million to distribute drug disposal bags to all households across San Diego County. In Attachment A this amount has been reduced to \$0.5 million to focus on individuals prescribed opioids after a medical or dental procedure in hospitals in the Central and East service regions, where increased rates of overdose mortality have been documented. Recommendation #1 Option B reprograms the \$7.5 million balance to support the East County Recovery Bridge capital project.

Under Recommendation #1 Option B, it is anticipated that ongoing operational costs for services as outlined in Attachment A would be sustained through FY 2028-29, meaning the operational gap would start two years earlier in Recommendation #1 Option B.

#### **BUSINESS IMPACT STATEMENT**

N/A

#### **ADVISORY BOARD STATEMENT**

At their regular meeting on August 3, 2023, the Behavioral Health Advisory Board voted to approve the recommendations.

#### **BACKGROUND**

In response to the regional overdose crisis, the San Diego County Board of Supervisors (Board) has approved the following actions including, but not limited to:

- Adoption of the County of San Diego's (County) Comprehensive Harm Reduction Strategy (June 8, 2021 (4));
- Approval of a media campaign to prevent fentanyl overdoses in youth (October 19, 2021 (2));
- Declaring Illicit Fentanyl a Public Health Crisis (June 28, 2022 (22));
- Enhancing Fentanyl Education and Strengthening Harm Reduction Efforts for Young People (October 11, 2022 (11));
- Adoption of the San Diego County Opioid Settlement Framework (October 25, 2022 (20)); and
- Update on Opioid Settlement Framework Implementation and Harm Reduction Media Campaigns (May 23, 2023 (26)).

The October 25, 2022 (20) and May 23, 2023 (26) actions noted above detail initial implementation of the Opioid Settlement Framework (Framework) which leverages unprecedented awards resulting from lawsuits against particular opioid pharmaceutical companies, manufacturers, and distributors. These awards, in addition to other County funding streams, collectively advance the broad range of work the County has taken toward overdose prevention and harm reduction.

Today's action authorizes approval of the updated Framework (Attachment A) to align with guidelines set forth by the California Department of Health Care Services (DHCS), which requires

**SUBJECT:** RECEIVE AND APPROVE THE UPDATED OPIOID SETTLEMENT FRAMEWORK; DIRECT REPORT BACK ON SIGNIFICANT UPDATES TO THE OPIOID SETTLEMENT FRAMEWORK; AND AUTHORIZE ONE STAFF YEAR FOR TOXICOLOGY SERVICES TO EXPAND SURVEILLANCE OF EMERGING DRUG TRENDS (DISTRICTS: ALL)

no less than 50% of budgeted activities allocated to High Impact Abatement Areas (specific priorities as defined by DHCS) to align with core strategies and approved uses of opioid funds. A review of the Framework, approved on October 25, 2022 (20), was conducted to prioritize evidenced-based activities that meet State guidelines, support, expand, or enhance current County opioid abatement efforts, and are not otherwise supported by other funds. The review provided an opportunity to restructure the Framework in accordance with the State's defined core strategies, highlight activities included in the current budget plan and prioritize new activities. Today's action also includes direction to report back to the Board on significant updates for the Framework.

### *Healthcare Integration*

The Framework includes allocated funding for healthcare integration initiatives that aim to improve access to care, minimize stigma, lower costs, and improve overall health outcomes for people who use drugs (PWUD). These efforts include the development of the San Diego Relay program, the County Emergency Medical Services (EMS) buprenorphine pilot program, and an Overdose Surveillance and Response Unit.

### *San Diego Relay Program*

Design and implementation of San Diego Relay, a 24/7 nonfatal overdose response service delivered by peers in select emergency departments (EDs) in San Diego County, is currently underway. Peer and support services are crucial in helping people enter and stay in recovery. For this reason, San Diego Relay services are designed to leverage the lived experience of peers who can both support program participants and, through their unique perspective, inform and improve service delivery in meaningful ways. Allocated funding will support the execution of contracted services that will aim to increase linkages to care and reduce subsequent overdoses for San Diego Relay participants. Services will focus on the delivery of peer-led interventions that foster engagement, address immediate needs, provide overdose education and naloxone access, and support linkages to care and other vital services. Funding for contracted services will support operational and administrative costs necessary to offer the 24/7 service including funds to support staffing, supervision, and sub-contracts with participating emergency departments. Additionally, the budget plan includes funds allocated to support expansion of San Diego Relay to support warm hand offs initiated by EMS' buprenorphine pilot program described below. A request for proposals (RFP) is slated for release this fiscal year, with an anticipated launch of services by early winter 2024.

### *EMS Buprenorphine Pilot Program*

As part of the County's efforts to offer opportunities for increased access, engagement, and retention among those seeking medication assisted treatment (MAT) services, EMS has launched a pilot program authorizing paramedics to utilize buprenorphine, a treatment used in MAT, in the prehospital setting to treat patients in opioid withdrawal. Planning and implementation activities have included the addition and recruitment of 2.0 full-time equivalent (FTE) County staff to focus on opioid mitigation, which are included in the Fiscal Year (FY) 2023-25 Operational Plan and

**SUBJECT:** RECEIVE AND APPROVE THE UPDATED OPIOID SETTLEMENT FRAMEWORK; DIRECT REPORT BACK ON SIGNIFICANT UPDATES TO THE OPIOID SETTLEMENT FRAMEWORK; AND AUTHORIZE ONE STAFF YEAR FOR TOXICOLOGY SERVICES TO EXPAND SURVEILLANCE OF EMERGING DRUG TRENDS (DISTRICTS: ALL)

funded by Opioid Settlement Funds. In addition, efforts are underway to train staff, develop protocols, and establish warm hand offs for buprenorphine pilot participants to MAT services.

#### *Overdose Surveillance and Response Program*

In an effort to improve detection of overdose outbreaks and facilitate more effective responses, the County has been working to establish a cross-departmental County Overdose Surveillance and Response (OSAR) program, within the County Health and Human Services Agency, Behavioral Health Services (BHS) and Public Health Services (PHS) departments. This program will ensure the County can effectively implement and manage cross-sector, surveillance, and timely response to overdoses in San Diego County. The program will be responsible for the monitoring of trends, identification of possible clusters, investigation of individual or cluster events, and community response, including public messaging and education. OSAR activities include the recruitment of 14.0 County FTEs funded by Opioid Settlement Funds and included in the FY 2023-25 Operational Plan.

Additionally, the Framework has been updated to include the expansion of surveillance and data collection of emerging drug trends through a collaborative partnership between PHS and the County Public Safety Group (PSG). Specifically, Opioid Settlement Funds funding is proposed for 1.0 County FTE within the San Diego Medical Examiner's Office focused on drug testing of both seized substances and decedents of suspected overdose cases. Testing will be conducted on unknown substances, pills, syringes, and associated paraphernalia from decedents. It is expected that information gathered from testing of unknown substances by the San Diego Medical Examiner's Office, combined with drug seizure testing data currently housed and maintained by the Crime Lab, will provide insights into the local seized drug data. It is also anticipated that emerging toxic drug trends can originate with overdose victims first before routinely being observed in forensic testing from crimes including drug possession, sales, distribution and trafficking and drug facilitated crimes, such as sexual assault and driving under the influence. Tracking substances and associated paraphernalia will provide information on emerging drug use evolutions.

Today's action requests authorization for the PSG Medical Examiner's Office to add one staff year for toxicology services to expand surveillance of emerging drug trends.

#### *Treatment for Incarcerated Individuals*

Substance Use Disorder (SUD), including Opioid Use Disorder (OUD), are notably overrepresented in incarcerated populations. According to a study conducted by Oregon Health and Science University and the Oregon Department of Corrections, nearly two-thirds of all adults in U.S. custody have a documented SUD. Additionally, people with OUD recently released from custody are 40 times more likely to die from an overdose compared to the general population determined by a study conducted in North Carolina analyzing overdose mortality rates among former inmates from 2000-2015. Incarcerated individuals are at an increased risk for fatal and nonfatal overdose due to a variety of factors including decreased tolerance, lack of education

**SUBJECT:** RECEIVE AND APPROVE THE UPDATED OPIOID SETTLEMENT FRAMEWORK; DIRECT REPORT BACK ON SIGNIFICANT UPDATES TO THE OPIOID SETTLEMENT FRAMEWORK; AND AUTHORIZE ONE STAFF YEAR FOR TOXICOLOGY SERVICES TO EXPAND SURVEILLANCE OF EMERGING DRUG TRENDS (DISTRICTS: ALL)

regarding overdose risk, and limited connectivity to vital services and supports such as harm reduction and treatment services.

Providing evidenced-based treatment for incarcerated individuals, including offering MAT while in custody, has been documented to result in increased treatment engagement and retention post-release and a decreased risk for overdose. According to the California Department of Corrections and Rehabilitation and California Correctional Health Care Services, the rate of overdose declined 58% among the California prison population from 2019-2020 after implementation of the Integrated Substance Use Disorder Treatment (ISUDT) Program. As enrollment in the MAT component of the ISUDT grew, overdose deaths and hospitalizations decreased. There are a total of 129 patients with Clinical Opiate Withdrawal Symptoms /Clinical Institute of Withdrawal Assessment. Total enrollment in MAT is 414 with another 170 patients on the medication but not in the full program. The implementation of the updated Framework includes allocation of revenue to Sheriff of \$0.5 million for evidence-based treatment and recovery support services for individuals within or transitioning out of the County's correctional facilities.

### ***Harm Reduction and Prevention***

Harm reduction services and prevention strategies are critical components of the Framework and are necessary tools for addressing the opioid crisis. Harm reduction interventions that meet people where they are and directly serve PWUD to prevent overdoses and disease transmission, and to improve the well-being of those served are included in the Framework. Additionally, prevention strategies, including public messaging campaign activities that focus on engaging and empowering individuals to choose healthy behaviors, and primary prevention efforts aimed at preventing opioid misuse among youth through resiliency and refusal skills-building, are supported by the Framework.

### ***Primary Prevention***

Primary prevention efforts are designed to educate youth on the harms of substance use and to support resilience and awareness before they start using or experimenting with substances. Investing in evidenced-based primary prevention programs that have been studied and are proven to be effective, are key to helping reduce risk factors for drug use among youth. For example, the Life Skills School-Based Substance Use Prevention program is a classroom-based substance use prevention program that supports development of skills to reduce the prevalence of substance use among youth using an evidence-based curriculum, Project Alert.

Project Alert, validated for use in seventh and eighth grades, is currently being adapted to extend to sixth grade, and focuses on building resiliency and refusal skills among participants. The curriculum includes eleven core sessions and three booster sessions, which are incorporated in either science, health, or physical education classes (depending on school determination). The program has been implemented through a collaboration with designated school sites throughout San Diego County through a contract with San Diego County Office of Education. Currently, the program is partially funded by the Substance Abuse Prevention & Treatment Block Grant

**SUBJECT:** RECEIVE AND APPROVE THE UPDATED OPIOID SETTLEMENT FRAMEWORK; DIRECT REPORT BACK ON SIGNIFICANT UPDATES TO THE OPIOID SETTLEMENT FRAMEWORK; AND AUTHORIZE ONE STAFF YEAR FOR TOXICOLOGY SERVICES TO EXPAND SURVEILLANCE OF EMERGING DRUG TRENDS (DISTRICTS: ALL)

American Rescue Plan Act funding through June 30, 2025. Included in the Framework is funding to support extending the program by funding services for an additional two and a half years through June 30, 2027, to allow for full contract implementation and evaluation.

#### *Public Health Messaging*

Public health messaging that promotes awareness and access to information about opioid misuse and treatment resources and is responsive to the community is vital to address stigma and empower individuals impacted by substance use to seek and engage in services and practice healthy behaviors. The Framework supports outreach and education efforts through community informed public messaging and materials aimed at enhancing community awareness of the harms associated with opioid misuse, overdose prevention, and the availability of community resources. These efforts will build and expand upon the County's youth illicit fentanyl and harm reduction public messaging campaigns with the aim to further enhance and reinforce prevention efforts. Public health messaging activities include the recruitment of 4.0 County FTEs included in the FY 2023-25 Operational Plan and funded by Opioid Settlement Funds.

In addition, activities supported by Opioid Settlement Funds aimed at engaging parents, family members, schools, community organizations and businesses through ongoing public health messaging campaigns and targeted community naloxone distribution events continue. These efforts offer opportunities to further enhance community members' understanding of substance use and available treatment resources. Furthermore, public messaging and education efforts reduce stigma and draw support for behavioral health interventions which can normalize conversations about behavioral health needs, empower individuals to be advocates and allies, and help drive change.

#### *Expanding Naloxone Access and Supply*

Naloxone is a life-saving medication that reverses the effects of an opioid overdose. The Framework reflects the County's priority to increase the availability and distribution of naloxone to community members priorities. Through the County's Naloxone Distribution Program, efforts to saturate the community with naloxone have been tremendously successful. As of July 6, 2023, over 60,000 naloxone kits have been allocated to County's naloxone distribution network partners, of which an estimated 35,000 have been distributed to community members, over 2,000 of which were accessed through 12 naloxone vending machines that have been placed across the county. Although the County receives free naloxone from the State's naloxone distribution project, expanded efforts require additional resources to support these on-going overdose prevention activities. For this reason, the budget plan includes an annual allocation for the purchase of naloxone. It is anticipated that this dedicated funding will support the distribution of over 21,000 additional naloxone kits a year to community members.

The Framework also includes funding to support expanding naloxone access and distribution efforts. Specifically, this funding supports activities that will enhance access to community naloxone education and training with special attention to increasing access among communities of



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color and vulnerable populations. These activities will include expanding naloxone access points, supporting targeted naloxone education and training events and the implementation of a naloxone response team, a dedicated naloxone distribution deployment team available to respond to OSAR identified overdose clusters or spikes.

#### *Drug Checking Services*

Design and implementation of drug checking services in San Diego County are underway. Drug checking services are a harm reduction public health intervention that informs individuals on the chemical composition of their drug samples and pairs peer led interventions to support more informed decision-making and access to linkage to care services. Drug checking services can serve as an immediate intervention tool aimed at changing an individual's drug use and can help PWUD to understand their overdose risk. Drug checking data can also be used to help determine trends in the unregulated drug supply offering opportunities to help inform the development and implementation of effective community responses.

Funding for contracted services will support operational and administrative costs necessary to provide services including funds to support staffing, supervision, training, and drug checking technology. Additionally, the Framework includes funds allocated to support expansion of the drug checking services model to increase the program's capacity to reach targeted high-risk populations, particularly those from rural communities and communities of color. An RFP is slated for release in this fiscal year, with an anticipated launch of services by early spring 2024.

#### *Harm Reduction Services*

Opioid Settlement Funds will be utilized for 4.0 County FTEs to staff the County Harm Reduction Services program, which were included in the FY 2023-25 Operational Plan. These four staff will be responsible for a range of duties that will support the direct delivery of services to program participants. Additionally, with the support of Opioid Settlement Funding, an updated community assessment will be conducted to determine and address needs between current conditions and desired conditions as they relate to program services. Currently, program services are scheduled to launch by the end of 2023.

#### *Prescription Medication Disposal Bags*

As reported by the National Center for Drug Abuse Statistics, 52 million or 18.4% of Americans over the age of 12 have misused prescription drugs at least once in their lifetime. The prolonged presence of prescriptions and medications in homes can lead to misuse, increasing the chances of addiction and overdose. Prescription medication disposal bags are specifically designed to help people safely dispose of unused prescription drugs making them unavailable for misuse and safe to dispose in the trash. Efforts to provide these disposal bags offer an opportunity to increase awareness, reduce the risk of unintended overdose, and prevent misuse.

The original Framework activity included \$8 million to support the delivery of drug disposal bags to all households across San Diego County. In order to implement additional harm reduction and

**SUBJECT:** RECEIVE AND APPROVE THE UPDATED OPIOID SETTLEMENT FRAMEWORK; DIRECT REPORT BACK ON SIGNIFICANT UPDATES TO THE OPIOID SETTLEMENT FRAMEWORK; AND AUTHORIZE ONE STAFF YEAR FOR TOXICOLOGY SERVICES TO EXPAND SURVEILLANCE OF EMERGING DRUG TRENDS (DISTRICTS: ALL)

prevention strategies, this update to the Framework includes one year of funding at \$0.5 million to pilot medication disposal bag distribution. The pilot will be focused on individuals prescribed opioids after a medical or dental procedure in the Central and East service regions, where increased rates of overdose mortality have been documented. Preliminary analysis of data from the Controlled Substance and Utilization Data system, California's prescription drug monitoring program, estimates that about 41,326 opioid prescriptions related to surgical or dental procedures were provided in 2022 within the identified regions. Distribution efforts will be informed by these estimates and activities to engage hospitals, dental providers, and relevant pharmacies in the identified regions. Outreach and education will be provided in multiple languages and in a culturally respectful manner. Outcomes of the pilot will be shared in future Framework updates.

*Recommendation #1 Option A versus Recommendation #1 Option B*

The activities outlined in the sections above, and as described in Attachment A, would continue under both options of Recommendation #1. The difference between the options is that Recommendation #1 Option B also includes an additional up-front investment of \$7.5 million in one-time costs in the HHSA supporting the East County Recovery Bridge Center (RBC). This amount is equal to the balance of \$7.5 million from the amount initially budgeted for the larger drug disposal bag program. Under Recommendation #1 Option B, it is anticipated that ongoing operational costs would be sustained through FY 2028-29 as compared to FY 2030-31 under Recommendation #1 Option A. Using current revenue estimates, programs may need to be scaled back earlier under this option.

The RBC is part of the East County Crisis Stabilization Unit (CSU) and East County RBC Capital Project. The CSU/RBC project previously had grant funding added as part of the FY 2023-24 Operational Plan, however HHSA's initial grant application was not awarded. Under this option, staff would return to the Board to exchange \$7.5 million of grant funding with Opioid Settlement Funds for the East County RBC portion. HHSA is exploring Mental Health Services Act funds for the CSU portion. The guidance around Opioid Settlement Funds allows for infrastructure investments for new or expanded substance use disorder treatment infrastructure. The East County RBC presents an opportunity to leverage Opioid Settlement Funds to fill a gap in funding that exists so that the East County RBC project can move forward. The East County RBC will allow adults who are publicly intoxicated to be dropped off by health, safety, and law enforcement agencies within a supervised within a non-medical environment that provides short-term services for less than 24 hours. Individuals are screened for SUD, including OUD, or mental health conditions, offered a place to stabilize from substance use, receive counseling services, and are provided resources and connections to ongoing behavioral health services. Outpatient substance use disorder services will also be available to ensure continuity of care.

Under this option, HHSA would still pursue future infrastructure grant opportunities as they become available. If any future grant funding were to be awarded, or if the State did not allow application of the Opioid Settlement Funds for the East County RBC, staff would return to the

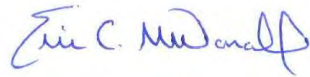
**SUBJECT:** RECEIVE AND APPROVE THE UPDATED OPIOID SETTLEMENT FRAMEWORK; DIRECT REPORT BACK ON SIGNIFICANT UPDATES TO THE OPIOID SETTLEMENT FRAMEWORK; AND AUTHORIZE ONE STAFF YEAR FOR TOXICOLOGY SERVICES TO EXPAND SURVEILLANCE OF EMERGING DRUG TRENDS (DISTRICTS: ALL)

Board to suggest an alternative use for the Opioid Settlement Funds, including potential infrastructure projects.

**LINKAGE TO THE COUNTY OF SAN DIEGO STRATEGIC PLAN**

Today's proposed actions support the County of San Diego's 2023-2028 Strategic Plan Initiatives of Equity (Health) and Community (Quality of Life and Partnership) by expanding programs which support, outreach, and education for all impacted by the opioid crisis.

Respectfully submitted,

A handwritten signature in blue ink, appearing to read "Eric C. McDonald".

HELEN N. ROBBINS-MEYER  
Interim Chief Administrative Officer

**ATTACHMENT(S)**

Attachment A – Opioid Settlement Framework Overview of Budgeted Activities

Attachment B – Opioid Settlement Funds Cash Flow

Opioid Settlement Framework

Opioid Settlement Framework Budgeted Activities

The table below includes activities outlined in the County of San Diego’s (County) initial Opioid Settlement Framework and adjustments to align with updated State guidance for the approved use of Opioid Settlement Funds (OSF) State requirements, as follows:

- Activities are tied to the ending, reducing, or lessening the effects of the opioid epidemic in communities and include prevention, intervention, harm reduction, treatment, and recovery services.
- No less than fifty percent of the OSF funds received in each calendar year will be used for one or more of the High Impact Abatement Activities (HIAA).
- Funds must be utilized for activities that align with the opioid remediation Core Strategies and Approved Uses.

Source: <https://www.dhcs.ca.gov/Documents/CSD/CA-OSF-Allowable-Expenses.pdf>

A. Priority Opioid Settlement Framework Activities – Spending Plan (in millions)

The Opioid Framework budget approved by the San Diego County Board of Supervisors (Board) on October 25, 2022 (20) was revised in FY 2023-24 to reflect updates resulting from the December 13, 2022 (28) Board action.

Core Strategy/ Approved Use Aligning with State Guidance	Program	Description of Activity	Status Update	Framework FY22/23 Budget (millions)	FY23/24 Spending Plan (millions)	FY24/25 Spending Plan (millions)
Health Integration						
Expansion of Warm Hand-Off Programs and Recovery Services	San Diego Emergency Department (ED) Relay Program	Designing and implementing the San Diego Relay program, which provides a 24/7 nonfatal overdose response service delivered by peers in select EDs across the county to increase linkages to care and reduce subsequent overdoses for San Diego Relay participants. <b>Allocated funding approved by October 25, 2022 (20) Board action.</b>	Planning and implementation activities underway.	\$1.60	\$0.78	\$1.49
Expansion of Warm Hand-Off Programs and Recovery Services	Opioid Antagonist Distribution: Emergency Medical Services (EMS) Buprenorphine Initiative	Implementing a pilot program that authorizes paramedics to initiate medication assisted treatment (MAT), or buprenorphine, in pre-hospital settings to treat patients in opioid withdrawal. Services include the facilitation of a warm handoff to connect patients to opioid use disorder (OUD) treatment services. <b>Funding supports Full-Time Equivalents (FTEs) added via December 13, 2022 (28) Board action:</b> <ul style="list-style-type: none"><li>• 2.0 County FTE positions in EMS</li></ul>	Planning and implementation activities underway.	\$0.36	\$0.32	\$0.33

Opioid Settlement Framework

Core Strategy/ Approved Use Aligning with State Guidance	Program	Description of Activity	Status Update	Framework FY22/23 Budget (millions)	FY23/24 Spending Plan (millions)	FY24/25 Spending Plan (millions)
Prevention and Evidence-Based Data Collection and Research	Evaluation and Data: Overdose Surveillance and Response	Establishing a cross-departmental overdose unit situated within two departments within the County Health and Human Services Agency (HHSA). The Overdose Surveillance and Response unit will implement and manage cross-sector, timely surveillance, and response to overdoses across San Diego County and support responsive public health messaging. <b>Funding supports FTEs added via December 13, 2022 (28) Board action:</b> <ul style="list-style-type: none"> <li>10.0 County FTEs in County HHSA, Public Health Services (PHS)</li> <li>4.0 County FTEs in County HHSA, Behavioral Health Services (BHS)</li> </ul>	Program has launched and protocols continue to be optimized with ongoing efforts.	\$0.44	\$1.83	\$2.04
Prevention and Evidence-Based Data Collection and Research	Evaluation and Data: Surveillance Drug Testing	Enhancing toxicology testing of unknown substances, narcotics, pills, syringes, or associated paraphernalia via County Sheriff's Department and expand toxicology screening of decedents through the Medical Examiner's Office. Funding will support for existing FTEs to conduct this work, along with the addition of a new FTE, as <b>requested through today's Board action:</b> <ul style="list-style-type: none"> <li>1.0 County FTE in Medical Examiner's Office</li> </ul>	Planning and implementation activities underway.	N/A	\$0.10	\$0.35
Treatment for Incarcerated Population	Justice-Involved Persons: Treatment & Recovery Services at County Jails	Establishing evidence-based treatment and recovery support, including MAT, for persons with OUD and co-occurring substance use and mental health conditions who are within and transitioning out of County jails. Funding will support development and implementation of this program, as <b>requested through today's Board action.</b>	Planning and implementation activities underway.	N/A	\$0.50	\$0.52

### Opioid Settlement Framework

Core Strategy/ Approved Use Aligning with State Guidance	Program	Description of Activity	Status Update	Framework FY22/23 Budget (millions)	FY23/24 Spending Plan (millions)	FY24/25 Spending Plan (millions)
<b>Harm Reduction and Prevention</b>						
Prevention	Primary Prevention	Funding will support continuity of the Life Skills School-Based Substance Use Disorder Prevention Project Alert, an existing program that provides classroom-based substance use prevention program for sixth, seventh, and eighth grade youth. Using an evidenced based curriculum, the program supports the development of skills to reduce the prevalence of substance use among youth.	Planning and implementation activities underway.	N/A	\$0.00	\$0.59
Prevention	Public Health Messaging	Providing ongoing and responsive public health messaging related to opioid misuse education, naloxone education, and access and OUD treatment resources. <b>Funding also supports FTEs added via December 13, 2022 (28) Board action:</b> <ul style="list-style-type: none"> <li>4.0 County FTEs in BHS</li> </ul>	Messaging campaign activities currently underway.	\$2.31	\$2.48	\$1.99
Naloxone to Reverse Opioid Overdoses	Opioid Antagonist Distribution: Naloxone Purchase & Expanded Distribution	Purchasing of naloxone through the County's Pharmacy department to increase naloxone access and community saturation efforts, including stocking vending machines, providing distribution to high-risk populations, community engagement, naloxone education and training efforts, and the Sheriff's Department Leave Behind Naloxone program. Funding also supports the expansion of naloxone distribution efforts, including the purchase of additional vending machines and/or supporting increased outreach efforts to HIAA and other high-risk populations. <b>Allocated funding approved by October 25, 2022 (20) Board action.</b>	Planning and implementation activities underway.	\$1.2	\$1.2	\$1.24
Expanding Syringe Service Programs	Treatment / Access to Treatment Efforts: Drug Checking Services	This program will prevent overdose by providing drug checking services to people who use drugs and includes the use of drug checking technology (FTIR and test strips) and facilitation of peer-led interventions that will include risk reduction counseling, overdose education, naloxone training, naloxone access, and linkage to care services. <b>Allocated funding approved by October 25, 2022 (20) Board action.</b>	Planning and implementation activities underway.	\$1.00	\$0.40	\$1.52



Opioid Settlement Framework

Core Strategy/ Approved Use Aligning with State Guidance	Program	Description of Activity	Status Update	Framework FY22/23 Budget (millions)	FY23/24 Spending Plan (millions)	FY24/25 Spending Plan (millions)
Expanding Syringe Service Programs	Treatment and Access to Treatment Efforts: County of San Diego Harm Reduction Services	Implementing the County of San Diego Harm Reduction Services program, which emphasizes wrap around services that include clean syringe access, collection of used syringes, health education regarding risk reduction, testing (HIV, hepatitis C and sexually transmitted infections), and referrals to substance use treatment, mental health services, housing supports, and other needed services provide via a mobile clinic. <ul style="list-style-type: none"><li>4.15 County FTEs in PHS, previously included in the FY 2022-23 Adopted Budget</li></ul>	Planning and implementation activities underway.	N/A	\$0.56	\$0.58
Prevention	Drug Disposal: Prevention through Drug Disposal Bags	<b>Original Framework Activity:</b> Supporting the delivery of drug disposal bags to all households across San Diego County, along with public health awareness on safe disposal. <b>Allocated funding approved by October 25, 2022 (20) Board action.</b>  <b>Updated Activity:</b> Supporting the distribution of drug disposal bags only to individuals prescribed opioids after a medical or dental procedure.	Revised to align with State guidance regarding allowable expenditures.	\$8.0 <i>(\$5M general fund)</i>	\$0.50	\$0.00
<b>Total Opioid Settlement Funds*</b>				<b>\$14.91</b> (inclusive of \$5M general fund)	<b>\$8.67</b>	<b>\$10.65</b>

\*In FY 2022-23 a total of \$1.5 million in OSF eligible costs were expended. OSF unspent in FY 2022-23 will roll forward to support future costs. The \$5 million in one-time over-realized revenue initially planned for drug disposal bags will generate fund balance in FY 2022-23.

In FY 2023-24, a total of \$7.1 million in OSF costs were included in the adopted budget. The additional amount planned for FY 2023-24 is projected to be covered with existing appropriations in the HHSA and appropriation will be added with future Board action as needed in the County Public Safety Group.

Opioid Settlement Framework

B. Additional Opioid Settlement Framework Activities

The additional Framework activities outlined below were recommended within the initial Framework; however, are not included as activities in the current spending plan funded through OSF for the following reasons:

- Activities are a benefit and/or funded through other funding sources, such as Medi-Cal.
- Activities may not align with State guidance for use of OSF, including providing services to individuals with OUD.
- Additional OSF is required for implementation of activities and would be dependent on the receipt of additional OSF through future settlements.

Core Strategy/Approved Use Aligning with State Guidance	Program	Description	Status Update
Medication-Assisted Treatment Distribution and Other Opioid Related Treatment	Medicated Assisted Treatment	<div>1. Establish funding for medicated assisted treatment (MAT for uninsured individuals or low-income individuals who do not have insurance coverage for MAT services.</div> <div>2. Expand services such as navigators and on-call teams to begin MAT in hospital EDs.</div> <div>3. Provide MAT education and awareness training to healthcare providers, emergency medical technicians, law enforcement personnel, and other first responders.</div> <div>4. Provide treatment and recovery support services such as residential and inpatient treatment, intensive outpatient treatment, outpatient therapy or counseling, and recovery housing that allow or integrate medication with other support services.</div> <div>5. Provide care coordination and support services for continuity of care for individuals with substance use needs including MAT.</div>	<div>1. MAT services are a benefit and funded through Medi-Cal.</div> <div>2. EDs within San Diego County receive California Bridge funds, which collaborates with the <b>San Diego Relay Program</b> funded through OSF.</div> <div>3. MAT education and awareness training are included within the <b>EMS Buprenorphine Initiative</b> funded through OSF.</div> <div>4. Treatment services are a benefit and funded through Medi-Cal. Local County funds support recovery residences. Services would need to support individuals with OUD.</div> <div>5. Care Coordination services and Peer Specialists are a benefit and funded through Medi-Cal. Services would need to support individuals with OUD.</div>

Opioid Settlement Framework

Core Strategy/Approved Use Aligning with State Guidance	Program	Description	Status Update
Treat Opioid Use Disorder	Other Therapies	<ol style="list-style-type: none"><li>1. Support contingency management services, cognitive behavioral therapy, and other evidence-based therapies for people with SUD, OUD, and/or any co-occurring mental health conditions. This includes Federal Food and Drug Administration approved prescribed digital therapeutics.</li><li>2. Broaden scope of recovery services to include co-occurring SUD or mental health conditions.</li></ol>	<ol style="list-style-type: none"><li>1. Contingency Management is a benefit and funded through Medi-Cal as part of the California Advancing and Innovating Medi-Cal (CalAIM). Local planning activities are underway. Policy advocacy would be needed to include digital therapeutics under Medi-Cal, which are not currently covered. Eligible activities would be considered for future implementation, pending the availability of additional OSF. Services would need to support individuals with OUD.</li><li>2. Mental Health (MH), co-occurring, and SUD recovery services are a benefit and funded through Medi-Cal. CalAIM will support improved coordination of these services. Services would need to support individuals with OUD.</li></ol>
Expanding Treatment for Neonatal Abstinence Syndrome	Pregnant & Postpartum Services	<ol style="list-style-type: none"><li>1. Support evidence-based or evidence-informed treatment, including MAT, recovery services and supports, and prevention services for pregnant women, or women who could become pregnant, who have SUD or OUD and any co-occurring SUD and MH conditions, and other measures to educate and provide support to families affected by Neonatal Abstinence Syndrome.</li><li>2. Expand comprehensive evidence-based treatment and recovery services, including MAT, for uninsured women with OUD and any co-occurring SUD and MH conditions for up to 12 months postpartum.</li><li>3. Expand services for neonatal opioid withdrawal syndrome for women in custody.</li></ol>	<ol style="list-style-type: none"><li>1. SUD and MH treatment, recovery, and prevention services for pregnant women or women who could become pregnant are a benefit and funded through Medi-Cal. Activities described not covered under Medi-Cal would be considered for future implementation, pending the availability of additional OSF.</li><li>2. Treatment and recovery services for Medi-Cal eligible uninsured women is a benefit and funded through Medi-Cal. Services would need to support individuals with OUD.</li><li>3. Services for women in custody are anticipated to become a benefit and eligible for Medi-Cal funding in the future. MAT services are included within the <b>Treatment &amp; Recovery Services for Individuals within County Jails</b> efforts that will be funded through OSF.</li></ol>

Opioid Settlement Framework

Core Strategy/Approved Use Aligning with State Guidance	Program	Description	Status Update
Expansion Of Warm Hand-Off Programs and Recovery Services	Wrap-Around Services	<ol style="list-style-type: none"><li>1. Broaden scope of recovery services to include services for co-occurring SUD or MH conditions.</li><li>2. Provide comprehensive wraparound services to individuals in recovery, including housing, transportation, job placement/training, and childcare.</li><li>3. Provide community support services through County partners and community-based organizations, including social and legal services, to assist in the reintegration of justice-involved persons with OUD and any co-occurring SUD and MH conditions.</li><li>4. Provide housing and supportive services for individuals with SUD an/or MH conditions that are involved in the CARE Court and other collaborative court systems.</li><li>5. Hire additional social workers or other behavioral health workers to facilitate the expansions above.</li><li>6. Fund family-centered programs with technology-rich approaches to address a range of behavioral-health challenges in addition to training and support services for parents and family members.</li></ol>	<ol style="list-style-type: none"><li>1. Recovery services for co-occurring SUD and MH are a benefit and funded through Medi-Cal. Services would need to support individuals with OUD.</li><li>2. Comprehensive wraparound services are a benefit and funded through Medi-Cal and other funds.</li><li>3. Community support services to support reintegration of justice-involved persons with OUD are a benefit and funded through Medi-Cal and County funds. Services would need to support individuals with OUD</li><li>4. CARE Court activities are funded through other State and County funds. Services would need to support individuals with OUD.</li><li>5. Social workers and behavioral health workers within programs are funded through Medi-Cal and County funds. Services would need to support individuals with OUD.</li><li>6. Some activities are a benefit and funded through Medi-Cal and other County funds. Services would need to support individuals with OUD.</li></ol>
Support People in Treatment and Recovery	Housing	<ol style="list-style-type: none"><li>1. Provide access to housing for people with OUD and any co-occurring or dual diagnoses SUD and MH conditions, including supportive housing, recovery housing, housing assistance programs, training for housing providers, or recovery housing programs that allow or integrate Federal Food and Drug Administration approved medication with other support services.</li><li>2. Provide counseling, peer-support, recovery case management and residential treatment with access to medications for those in assisted housing who need it to persons with OUD and any co-occurring SUD or MH conditions.</li></ol>	<ol style="list-style-type: none"><li>1. Some activities are funded through other funding. Services would need to support individuals with OUD.</li><li>2. Comprehensive wraparound services are a benefit and funded through Medi-Cal and other funds. Services would need to support individuals with OUD.</li></ol>

Opioid Settlement Framework

Core Strategy/Approved Use Aligning with State Guidance	Program	Description	Status Update
Treat Opioid Use Disorder	Workforce Investment	<ol style="list-style-type: none"><li>1. Support workforce development for addiction professionals who work with persons with OUD and any co-occurring SUD and MH conditions.</li><li>2. Fund workforce development, training programs, apprenticeship, and education costs for peer support specialists that offer a range of services, including health education, encouragement, empathy, coping skills, recovery modeling, and concrete assistance in overcoming the situational barriers to treatment retention.</li></ol>	<ol style="list-style-type: none"><li>1. Some activities are funded through other funding. Services would need to support individuals with OUD.</li><li>2. Some activities are funded through other funding. Services would need to support individuals with OUD.</li></ol>
Treat Opioid Use Disorder	Rural Communities and Tribal Partners	<ol style="list-style-type: none"><li>1. Support impacted tribal communities, the Dream Weaver Consortium, and other tribal healthcare and community-based partners through funding culturally competent OUD and SUD program treatment and prevention services.</li><li>2. Fund and expand OUD and SUD prevention, education, and treatment services in rural communities.</li><li>3. Engage tribal and rural leaders on matters related to OUD and SUD efforts.</li><li>4. Address barriers to access for rural and tribal partners.</li><li>5. Investigate opioid remediation funding opportunities and programs being implemented and invested in through the U.S. Department of Agriculture (USDA) that can be implemented locally.</li></ol>	<ol style="list-style-type: none"><li>1. OUD treatment for tribal communities is a benefit and funded through Medi-Cal. Services would need to support individuals with OUD. Prevention activities are included within the Naloxone Purchase &amp; Expanded Distribution efforts funded through OSF.</li><li>2. Rural OUD treatment is a benefit and funded through Medi-Cal and County funds. Prevention activities are included within the Naloxone Purchase &amp; Expanded Distribution efforts funded through OSF. Services would need to support individuals with OUD</li><li>3. Included within the <b>Public Health Messaging</b> efforts funded through OSF.</li><li>4. Included within the <b>Naloxone Purchase &amp; Expanded Distribution</b> efforts funded through OSF.</li><li>5. Some of the USDA programs outlined are a benefit and funded through Medi-Cal or potentially other funding. [OBJ]</li></ol>

Annual spending of ~\$10 - \$11M. Revenue from finalized settlements and placeholder estimate for anticipated near-term settlements.

Fiscal Year (FY)	22/23	23/24	*24/25	25/26	26/27	27/28	28/29	29/30	30/31	31/32	32/33	33/34	34/35	35/36	36/37	37/38	38/39
Distributor	\$ 8.4	\$ 3.6	\$ 3.5	\$ 3.5	\$ 3.5	\$ 3.5	\$ 3.5	\$ 3.5	\$ 3.5	\$ 3.5	\$ 3.5	\$ 3.5	\$ 3.5	\$ 3.5	\$ 3.5	\$ 3.5	\$ 3.5
Janssen	\$ 5.2	\$ 2.7	\$ 2.6	\$ 2.6	\$ 2.6	\$ 2.6	\$ 2.6	\$ 2.6									
Mallinckrodt	\$ 0.6																
Placeholder estimate for near-term settlements		\$ 3.2	\$ 3.2	\$ 3.2	\$ 3.2	\$ 3.2	\$ 3.2	\$ 3.2	\$ 3.2	\$ 3.2	\$ 3.2	\$ 3.2	\$ 3.2	\$ 3.2	\$ 3.2	\$ 3.2	\$ 3.2
Total Estimated Settlement Distributions	\$ 14.2	\$ 9.6	\$ 9.3	\$ 9.3	\$ 9.3	\$ 9.3	\$ 9.3	\$ 9.3	\$ 6.7	\$ 6.7	\$ 6.7	\$ 6.7	\$ 6.7	\$ 6.7	\$ 6.7	\$ 6.7	\$ 6.7
Projected Annual Spend - RECOMMENDATION 1, OPTION A	\$ 1.5	\$ 8.7	\$ 9.6	\$ 10.7	\$ 10.7	\$ 10.7	\$ 10.7	\$ 10.7	\$ 10.7	\$ 10.7	\$ 10.7	\$ 10.7	\$ 10.7	\$ 10.7	\$ 10.7	\$ 10.7	\$ 10.7
Annual Balance	\$ 12.7	\$ 0.9	\$ (0.3)	\$ (1.3)	\$ (1.3)	\$ (1.3)	\$ (1.3)	\$ (1.3)	\$ (4.0)	\$ (4.0)	\$ (4.0)	\$ (4.0)	\$ (4.0)	\$ (4.0)	\$ (4.0)	\$ (4.0)	\$ (4.0)
Cumulative Balance Remaining	\$ 12.7	\$ 13.6	\$ 13.3	\$ 12.0	\$ 10.6	\$ 9.3	\$ 7.9	\$ 6.6	\$ 2.6	\$ (1.3)	ONGOING GAP MITIGATION NEEDED						

Projected Annual Spend - RECOMMENDATION 2, OPTION B	\$ 1.5	\$ 16.2	\$ 9.6	\$ 10.7	\$ 10.7	\$ 10.7	\$ 10.7	\$ 10.7	\$ 10.7	\$ 10.7	\$ 10.7	\$ 10.7	\$ 10.7	\$ 10.7	\$ 10.7	\$ 10.7	\$ 10.7
Annual Balance	\$ 12.7	\$ (6.6)	\$ (0.3)	\$ (1.3)	\$ (1.3)	\$ (1.3)	\$ (1.3)	\$ (1.3)	\$ (4.0)	\$ (4.0)	\$ (4.0)	\$ (4.0)	\$ (4.0)	\$ (4.0)	\$ (4.0)	\$ (4.0)	\$ (4.0)
Cumulative Balance Remaining	\$ 12.7	\$ 6.1	\$ 5.8	\$ 4.5	\$ 3.1	\$ 1.8	\$ 0.4	\$ (0.9)	\$ (4.9)	\$ (8.8)	ONGOING GAP MITIGATION NEEDED						

\*Assumes a 90% spend rate of budgeted costs for FY 24/25.

Option B includes all assumptions under Option A, plus an additional \$7.5 million in up-front one-time investments, pushing the projected gap for ongoing costs up by two years to FY 2029-30.

**Notes**

- In FY 2022-23 a total of \$1.5M in Opioid Settlement Funds (OSF) eligible costs were expended. Funds unspent in FY 2022-2023 will roll forward to support future costs.
- It is the County of San Diego's understanding that the settlements for TEVA, Allergan, Walmart, Walgreens, and CVS are being finalized, and it is expected the first annual payments will be received in the last quarter of 2023 or first quarter of 2024. Final County amounts and timing are not yet known. For estimate purposes, a placeholder was assumed using the nationwide settlement amounts for these companies as a percentage of the total nationwide Distributor settlement to calculate an estimate. Spending would be right-sized to manage to resources available as necessary once final amounts are known.
- The status of various additional settlements in the pipeline will be monitored and costs adjusted accordingly as needed to meet available revenues and priorities, with a recognition that these are one-time funds over a finite number of years.
- To promote sustainability of programs implemented, the Health and Human Services Agency and Public Safety Group will explore additional Medi-Cal billing opportunities and grants and federal and State allocations, should they become available.



# **ITEM #13: RECEIVE AND APPROVE THE UPDATED OPIOID SETTLEMENT FRAMEWORK; DIRECT REPORT BACK ON SIGNIFICANT UPDATES TO THE OPIOID SETTLEMENT FRAMEWORK; AND AUTHORIZE ONE STAFF YEAR FOR TOXICOLOGY SERVICES TO EXPAND SURVEILLANCE OF EMERGING DRUG TRENDS (DISTRICTS: ALL)**

Eric C. McDonald, MD, Interim Agency Director, Health and Human Services Agency  
Holly Porter, Deputy Chief Administrative Officer, Public Safety Group  
Theresa Adams-Hydar, Assistant Sheriff, San Diego County Sheriff's Department  
Amy Thompson, Executive Finance Director, Health and Human Services Agency  
Wilma Wooten, MD, MPH, Public Health Officer, Public Health Services  
Luke Bergmann, PhD, Director, Behavioral Health Services

October 10, 2023



# Opioid Settlement Framework



## Charting the Course

Planning for abatement of harms from the opioid epidemic in San Diego County

SUMMARY REPORT  
October 2022



Harm Reduction and Prevention

Healthcare Integration

Social Supports and Services





# Approved Framework Priorities

## Harm Reduction & Prevention

- **Primary Prevention**
- **Public Health Messaging**
- **Drug Checking Services**
- **Prescription Medication Disposal Bags**
- Naloxone Access and Supply
- Harm Reduction Services

## Healthcare Integration

- **Overdose Surveillance and Response Program**
- **EMS Buprenorphine Pilot Program**
- **Treatment for Incarcerated Individuals**
- San Diego Relay Program

## Social Supports and Services

Threaded across Healthcare Integration and Harm Reduction and Prevention activities



# Primary Prevention

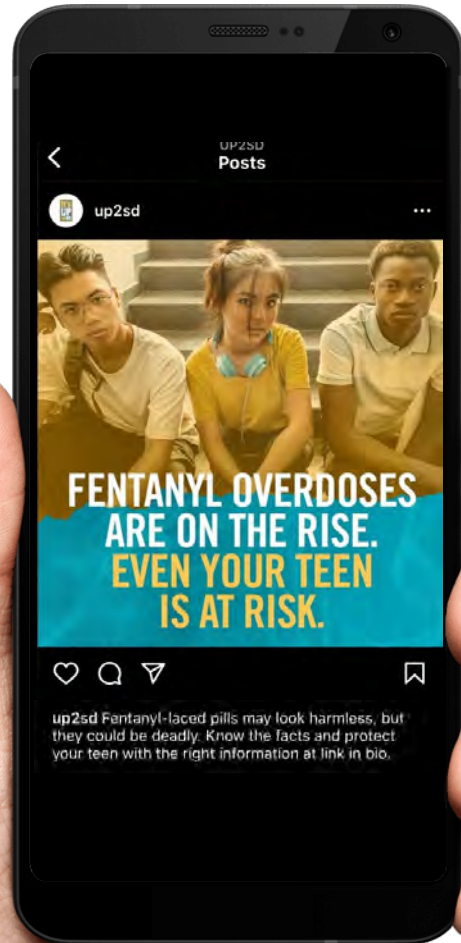
## Project Alert

- An evidence-based school program to educate 6<sup>th</sup> to 8<sup>th</sup> graders to build resilience, awareness, safer choices, and refusal skills
- Will be implemented across 24 designated schools through the San Diego County Office of Education

**PROJECT**  
**ALERT**

Adolescent  
Learning  
Experiences in  
Resistance  
Training

# Public Health Messaging



- Continued and ongoing community conversations for all public health messaging campaigns
- Funds support second phase of Youth and Parent Fentanyl Awareness Campaign and continuance of the general public naloxone campaign
- Harm Reduction campaign with a focus on higher risk population estimated for winter 2024

# Overdose Surveillance and Response Program

- Cross-departmental program led by Public Health Services and Behavioral Health Services
- Aims to improve detection of overdose outbreaks, monitoring and identification of trends, and effective community response
- Drug surveillance and data collection through partnership with Public Health Services and Public Safety Group





# Drug and Paraphernalia Checking

## Drug Checking

- Helps people at risk for overdose understand what is in their substances to inform safer choices
- Provides real-time data on substances impacting community
- Funds for staffing to support implementation, drug-checking technology, and reach high-risk populations

## Paraphernalia Checking

- Collaboration with Sheriff's Department, Medical Examiner's Office, and Emergency Medical Services
- Drug testing on seized substances, paraphernalia, and decedents of suspected overdose cases
- Provides information on emerging drug trends to inform community response



# Expanding Surveillance

- Emerging toxic drug trends can originate with overdose victims first before routinely being observed in forensic testing from crimes
- Add one FTE with the Medical Examiner's Office focused on drug testing of both seized substances and decedents of suspected overdose cases



# Emergency Medical Services Buprenorphine Pilot Program



- Pilot program enabling paramedics in the field to administer buprenorphine to treat patients in opioid withdrawal
- Buprenorphine blocks opioid receptors and alleviates withdrawal symptoms
- Emergency Medical Services is working closely with Behavioral Health Services and others to ensure that patients get connected to treatment and other services



# Treatment for Incarcerated Individuals



## Medication Assisted Treatment (MAT) Services

- Providing evidence-based treatment for incarcerated individuals while in custody through an Integrated Substance Use Disorder Treatment Program
- 129 patients with Clinical Opiate Withdrawal Symptoms/Clinical Institute of Withdrawal Assessment
- Total enrollment in MAT is 414
  - Another 170 patients are on the medication but not in the full program
- Implementation includes allocation of \$0.5 million for evidence-based treatment and recovery support services for individuals within or transitioning out of the County's correctional facilities

# Prescription Medication Disposal Bags



- May help people safely dispose of prescription drugs and reduce risk of unintended overdose and misuse
- Outreach to hospitals, dental providers, pharmacies, and communities
- **Recommended Framework Update**
  - Reduce size of pilot to start by targeting distribution to patients prescribed opioids after a procedure in the Central and East service regions



# Opioid Settlement Framework Key Updates



## Healthcare Integration

- Medical Examiner FTE to enhance toxicology testing and screening
- Establish MAT for people within and transitioning out of County jails

## Harm Reduction & Prevention

- Distribute Prescription Medication Disposal Bags only to individuals prescribed opioids after a medical or dental procedure



# Option A



## Recommendation 1 - Option A

- Authorize spending plan
- Reduce previously approved \$8 million to \$0.5 million for prescription medication disposal bags and supporting ongoing investments through FY 2030-31

# Option B



## Recommendation 1 - Option A

- Authorize spending plan
- Reduce previously approved \$8 million to \$0.5 million for prescription medication disposal bags and supporting ongoing investments through FY 2030-31

## Recommendation 1 - Option B

- Authorize spending plan
- Support ongoing investments as in Option A, through FY 2028-29, and use \$7.5 million for one-time capital investment for the East County Recovery Bridge Center

# Opioid Settlement Funds Cashflow Projections



Fiscal Year	22/23	23/24	24/25	25/26	26/27	27/28	28/29	29/30	30/31	31/32
Total Estimated Settlement Distributions	\$14.2	\$9.6	\$9.3	\$9.3	\$9.3	\$9.3	\$9.3	\$9.3	\$6.7	\$6.7
<b>Recommendation #1, Option A</b>										
Projected Annual Spend	\$1.5	\$8.7	\$9.6	\$10.7	\$10.7	\$10.7	\$10.7	\$10.7	\$10.7	\$10.7
Annual Balance	\$12.7	\$0.9	\$(0.3)	\$(1.3)	\$(1.3)	\$(1.3)	\$(1.3)	\$(1.3)	\$(4.0)	\$(4.0)
Cumulative Balance Remaining	\$12.7	\$13.6	\$13.3	\$12.0	\$10.6	\$9.3	\$7.9	\$6.6	\$2.6	<b>\$(1.3)</b>
<b>Recommendation #1, Option B</b>										
Projected Annual Spend	\$1.5	<b>\$16.2</b>	\$9.6	\$10.7	\$10.7	\$10.7	\$10.7	\$10.7	\$10.7	\$10.7
Annual Balance	\$12.7	\$6.6	\$(0.3)	\$(1.3)	\$(1.3)	\$(1.3)	\$(1.3)	\$(1.3)	\$(4.0)	\$(4.0)
Cumulative Balance Remaining	\$12.7	\$6.1	\$5.8	\$4.5	\$3.1	\$1.8	\$0.4	<b>\$(0.9)</b>	<b>\$(4.9)</b>	<b>\$(8.8)</b>

\*Revenue assumptions include finalized settlements and placeholder estimates for anticipated near-term settlements.

# Recommendations

1. Receive and approve the updated Opioid Settlement Framework by approving Option A or Option B.
2. Direct the CAO to report back on significant updates on the Opioid Settlement Funds.
3. Approve and authorize the addition of one staff year under the Public Safety Group, Medical Examiner's Office to expand drug surveillance.

# **ITEM #13: RECEIVE AND APPROVE THE UPDATED OPIOID SETTLEMENT FRAMEWORK; DIRECT REPORT BACK ON SIGNIFICANT UPDATES TO THE OPIOID SETTLEMENT FRAMEWORK; AND AUTHORIZE ONE STAFF YEAR FOR TOXICOLOGY SERVICES TO EXPAND SURVEILLANCE OF EMERGING DRUG TRENDS (DISTRICTS: ALL)**

Eric C. McDonald, MD, Interim Agency Director, Health and Human Services Agency  
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October 10, 2023





# COUNTY OF SAN DIEGO

## AGENDA ITEM

### BOARD OF SUPERVISORS

NORA VARGAS  
First District

JOEL ANDERSON  
Second District

TERRA LAWSON-REMER  
Third District

VACANT  
Fourth District

JIM DESMOND  
Fifth District

**DATE:** November 7, 2023

**31**

**TO:** Board of Supervisors

### SUBJECT

**AUTHORIZE COMPETITIVE SOLICITATIONS, SINGLE SOURCE CONTRACT, AMENDMENTS TO EXTEND EXISTING CONTRACTS, AMENDMENTS TO REFLECT CHANGE TO SERVICES AND INCREASE TO FUNDING, AND EXECUTION OF INTERGOVERNMENTAL AGREEMENT WITH THE STATE OF CALIFORNIA AND ACCEPTANCE OF FUNDING (DISTRICTS: ALL)**

### OVERVIEW

The County of San Diego (County) Health and Human Services Agency, Behavioral Health Services provides a comprehensive array of mental health and substance use services to people of all ages. These services are delivered through County-operated programs, as well as contracts with community service providers. Those served include vulnerable populations, including individuals who are experiencing homelessness, individuals with justice involvement, and children and youth with complex behavioral health conditions.

Today's actions recommend the San Diego County Board of Supervisors (Board) authorize competitive solicitations, a single source contract, amendments to extend existing contracts, and an amendment to reflect change to services and increase to funding. These actions aim to sustain critical behavioral health services, with the goal of building a better behavioral health service delivery system for San Diego County's communities. Today's actions support the continuation of critical work to advance the behavioral health continuum of care throughout San Diego County. In addition, today's actions request the Board approve the Drug Medi-Cal Organized Delivery System Intergovernmental Agreement with the State of California to reflect revised revenue amounts allocated by the State, and to accept the funding for Fiscal Years 2023-2027.

Today's actions support 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 our ongoing commitment to the regional *Live Well San Diego* vision of healthy, safe, and thriving communities. This will be accomplished by upholding practices that align with community priorities and improving transparency and trust while maintaining good fiscal management.

**SUBJECT:** AUTHORIZE COMPETITIVE SOLICITATIONS, SINGLE SOURCE CONTRACT, AMENDMENTS TO EXTEND EXISTING CONTRACTS, AMENDMENTS TO REFLECT CHANGE TO SERVICES AND INCREASE TO FUNDING, AND EXECUTION OF INTERGOVERNMENTAL AGREEMENT WITH THE STATE OF CALIFORNIA AND ACCEPTANCE OF FUNDING (DISTRICTS: ALL)

**RECOMMENDATION(S)**

**CHIEF ADMINISTRATIVE OFFICER**

1. In accordance with Board Policy A-87, Competitive Procurement, and Section 401, Article XXIII of the County Administrative Code (Administrative Code), authorize the Director, Department of Purchasing and Contracting, to issue competitive solicitations for behavioral health services listed below, and upon successful negotiations and determination of a fair and reasonable price, award contracts for an Initial Term of up to one year, with four 1-year Options, and up to an additional six months, if needed; and to amend the contracts to reflect changes in program, funding or service requirements, subject to the availability of funds and the approval of the Agency Director, Health and Human Services Agency.
  - a. Strength-Based Case Management Full Services Partnership and Institutional Case Management
  - b. Suicide Prevention, Stigma Reduction and Substance Use Prevention Multi-Media Campaign
  - c. Breaking Down Barriers Program
  - d. Transitional Residential Treatment Program
2. In accordance with Board Policy A-87, Competitive Procurement, and Administrative Code Section 401, approve and authorize the Director, Department of Purchasing and Contracting, to enter into negotiations for behavioral health services, and subject to successful negotiations and determination of a fair and reasonable price, enter into a single source contract with Generations Healthcare of Lakeside, LLC for Adult Residential Skilled Nursing Facility services for an Initial Term of up to one year, with four 1-year Options, and up to an additional six months, if needed; and to amend the contract to reflect changes in program, funding or service requirements subject to the availability of funds and the approval of the Agency Director, Health and Human Services Agency.
3. In accordance with Board Policy A-87, Competitive Procurement, and Administrative Code Section 401, authorize the Director, Department of Purchasing and Contracting, subject to successful negotiations and a determination of a fair and reasonable price, to amend the contracts listed below to extend the contract term up to June 30, 2025, and up to an additional six months, if needed; expand services, subject to the availability of funds; and amend the contracts as required in order to reflect changes to services and funding allocations, subject to the approval of the Agency Director, Health and Human Services Agency.
  - i. Assertive Community Treatment Services
    1. Telecare Corporation (Contract #560755)
    2. Telecare Corporation (Contract #560864)
    3. Telecare Corporation (Contract #560866)
  - ii. Behavioral Health Patient Rights Education and Advocacy Services
    1. Legal Aid Society of San Diego, Inc. (Contract #560727)
4. In accordance with Board Policy A-87, Competitive Procurement, and Administrative Code Section 401, authorize the Director, Department of Purchasing and Contracting, subject to successful negotiations and a determination of a fair and reasonable price, to



**SUBJECT:** AUTHORIZE COMPETITIVE SOLICITATIONS, SINGLE SOURCE CONTRACT, AMENDMENTS TO EXTEND EXISTING CONTRACTS, AMENDMENTS TO REFLECT CHANGE TO SERVICES AND INCREASE TO FUNDING, AND EXECUTION OF INTERGOVERNMENTAL AGREEMENT WITH THE STATE OF CALIFORNIA AND ACCEPTANCE OF FUNDING (DISTRICTS: ALL)

amend the single source contracts listed below to extend the contract term up to June 30, 2026, and up to an additional six months, if needed; expand services, subject to the availability of funds; and amend the contracts as required in order to reflect changes to services and funding allocations, subject to the approval of the Agency Director, Health and Human Services Agency.

- i. Crisis Services
  1. New Alternatives, Inc. (Contract #533821)
- ii. Medi-Cal Managed Care Psychiatric Inpatient Hospital Services
  1. Aurora Behavioral Health Care (Contract #553276)
  2. Palomar Health (Contract #543125)
  3. Scripps Health (Contract #535468)
  4. BH-SD OPCO, LLC dba Alvarado Parkway Institute, Inc (Contract #551798)
  5. Prime Healthcare (Contract #563176)
5. In accordance with Board Policy A-87, Competitive Procurement, and Administrative Code Section 401, authorize the Director, Department of Purchasing and Contracting to amend the following contracts to increase the contract amount, subject to the availability of funds; and to amend the contracts as required to reflect changes to services and funding allocations, subject to the approval of the Agency Director, Health and Human Service Agency.
  - a. Independent Living Association and Recovery Residence Association
    - i. Community Health Improvement Partners (#566533)
  - b. Clinical and Cytological Lab Services
    - i. Quest Diagnostics (#562858)
6. Approve and authorize the Clerk of the Board to execute, upon receipt, the Drug Medi-Cal Organized Delivery System (DMC-ODS) Intergovernmental Agreement from the State of California and accept the funding for Fiscal Year 2023-24 through Fiscal Year 2026-27, estimated at approximately \$684,760,000 over the four-year period. Approve and authorize the Clerk of the Board, subject to the approval of the Agency Director, Health and Human Services Agency, to execute, upon receipt, amendments to the DMC-ODS Intergovernmental Agreement with the State of California, as required, and to reflect revised revenue agreements allocated by the State.

## **EQUITY IMPACT STATEMENT**

The County of San Diego (County) Health and Human Services Agency, Behavioral Health Services (BHS) serves as the specialty mental health plan for Medi-Cal eligible residents within San Diego County who are experiencing serious mental illness or serious emotional disturbance, and the service delivery system for Medi-Cal eligible residents with substance use care needs. An estimated 5% of San Diegans ages 21 years and older have a serious mental illness (SMI). While SMI is prevalent in all our communities, there are certain groups that have disproportionately high rates of SMI. The 2021 data from the California Department of Healthcare Access and Information indicate that rates of SMI among Black/African American residents were 145% higher compared

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to others. Additionally, according to the California Health Interview Survey conducted by the University of California Los Angeles in 2022, 9% of San Diegans reported experiencing serious psychological distress in the past month. However, residents living below 200% of the federal poverty level, those who reported a history of incarceration, or who identified as Hispanic/Latino or multiracial, reported higher percentages of serious psychological distress compared to others.

As a steward of public health for the region, BHS must ensure that the services offered through County-operated and contracted programs address the social determinants of health by being accessible, capable of meeting the needs of diverse populations, and with the intent to equitably distribute services to those most in need. In doing so, BHS utilizes a population health approach to identify needs and design services in a manner most impactful, equitable, and yield meaningful outcomes for those served. If approved, today's actions will improve access to treatment and care for populations who are underserved by social and behavioral health resources, including individuals experiencing homelessness, individuals with justice involvement, as well as children and youth with complex behavioral health needs.

#### **SUSTAINABILITY IMPACT STATEMENT**

Today's actions support the County of San Diego Sustainability Goal #2 to provide just and equitable access to County services, Sustainability Goal #3 to transition to a green, carbon-free economy, and Sustainability Goal #4, to protect health and well-being. This will be accomplished by providing a wider availability and range of supportive, inclusive, and stigma-free options to those in need of behavioral health services. Services will improve the overall health of communities, reducing the demand of associated care services, and in turn increase effectiveness of care providers and lower operating costs of facilities, thus reducing emissions and waste generated within the care sector.

#### **FISCAL IMPACT**

Funds for these requests are included in the Fiscal Years 2023-24 and 2024-25 Operational Plan in the Health and Human Services Agency (HHS). If approved, today's recommendations will result in approximate costs and revenue of \$172.5 million in Fiscal Year (FY) 2023-24 and \$205.6 million in FY 2024-25. There will be no change in net General Fund cost and no additional staff years.

#### ***Recommendation #1: Authorize Competitive Solicitations***

If approved, this request will result in estimated costs and revenue of \$13.0 million in FY 2024-25. The funding sources are Mental Health Services Act (MHSA) and Realignment. There will be no change in net General Fund cost and no additional staff years.

**SUBJECT:** AUTHORIZE COMPETITIVE SOLICITATIONS, SINGLE SOURCE CONTRACT, AMENDMENTS TO EXTEND EXISTING CONTRACTS, AMENDMENTS TO REFLECT CHANGE TO SERVICES AND INCREASE TO FUNDING, AND EXECUTION OF INTERGOVERNMENTAL AGREEMENT WITH THE STATE OF CALIFORNIA AND ACCEPTANCE OF FUNDING (DISTRICTS: ALL)

***Recommendation #2: Authorize Single Source Contract with Generations Healthcare of Lakeside, LLC***

If approved, this request will result in estimated costs and revenue of \$0.8 million in FY 2024-25. The funding source is Realignment. There will be no change in net General Fund cost and no additional staff years.

***Recommendation #3: Authorize Amendments and Extend Contracts***

If approved, this request will result in estimated costs and revenue of \$12.2 million in FY 2024-25. The funding sources are MHSA, Realignment, Short Doyle Medi-Cal, Drug Medi-Cal (DMC), Substance Abuse and Mental Health Services Administration (SAMHSA), and Community Assistance, Recovery & Empowerment (CARE) Court. There will be no change in net General Fund cost and no additional staff years.

***Recommendation #4: Authorize Amendments and Extend Single Source Contracts***

If approved, this request will result in estimated costs and revenue of \$5.8 million in FY 2024-25. The funding sources are MHSA and Short Doyle Medi-Cal. There will be no change in net General Fund cost and no additional staff years.

***Recommendation #5: Authorize Amendments to Reflect Change to Services and Increase in Funding***

If approved, this request will result in estimated costs and revenue of \$1.3 million in FY 2023-24 and \$2.6 million in FY 2024-25. The funding sources are MHSA, Realignment, Short Doyle Medi-Cal, and Center for Disease Control. There will be no change in net General Fund cost and no additional staff years.

***Recommendation #6: Execute DMC-ODS Intergovernmental Agreement from the State of California and Accept Funding***

If approved, this request will result in estimated costs and revenue of \$171.2 million for FY 2023-24, and ongoing costs and revenue yearly through FY 2026-27, for a total of \$684.8 million. Funds for subsequent years will be incorporated into future operational plans. The funding source is Drug Medi-Cal. There will be no change in net General Fund cost and no additional staff years.

**BUSINESS IMPACT STATEMENT**

N/A

**ADVISORY BOARD STATEMENT**

At their meeting on October 5, 2023, the Behavioral Health Advisory Board recommended approval of these recommendations.

**BACKGROUND**

The County of San Diego (County) Health and Human Services Agency (HHSA), Behavioral Health Services (BHS) provides a comprehensive array of behavioral health services to vulnerable

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populations, including individuals who are experiencing homelessness, individuals with justice involvement, and children and youth with complex behavioral health conditions. Services are provided through County-operated programs as well as contracts with local public and private agencies. Approval of today's actions would authorize competitive solicitations, a single source procurement, amendments to extend existing behavioral health services contracts, amendments to reflect change to services and increase to funding, and execution of the Drug Medi-Cal Organized Delivery System (DMC-ODS) Intergovernmental Agreement from the State of California and acceptance of funding. These recommended actions support the continuation of critical work to advance the ongoing transformation of the behavioral health continuum of care throughout San Diego County. All contracts are contingent upon the availability of funding, successful negotiations, and determination of a fair and reasonable price.

***Recommendation #1: Authorize Competitive Solicitations***

***a. Strength-Based Case Management Full Services Partnership and Institutional Case Management***

On June 20, 2017 (13), the San Diego County Board of Supervisors (Board) authorized the competitive procurement of Strengths-Based Case Management (SBCM) Full Services Partnership and Institutional Case Management (ICM) services. Subsequently on November 15, 2022 (28), the Board authorized a contract term extension of this program up to June 30, 2024, and up to an additional six months, if needed. SBCM services are provided to older adults ages 60 and above with a serious mental illness (SMI), who may be on Lanterman-Petris-Short Conservatorship. This type of conservatorship gives one adult the responsibility for overseeing the comprehensive medical treatment for an adult who has an SMI, and may have co-occurring substance use conditions. ICM services are provided to older adults ages 60 and above on conservatorship who reside in a skilled nursing facility or other County-identified long-term care facility (LTC), including those who reside in out-of-county facilities. Services include assessment, individual and group counseling, case management, rehabilitation, crisis intervention, and other rehabilitative and recovery interventions including supportive housing. SBCM and ICM services provide housing stability and a greater quality of life for clients and are provided countywide.

In Fiscal Year (FY) 2022-23, 496 unduplicated clients received SBCM services, and 421 unduplicated clients received ICM services. Of those who received SBCM services whose episode lasted six months or longer, 83% presented the same or improved functional status and 88% presented the same or improved clinical status. Functional status measures how much a client's symptoms hinder them from completing tasks that they would like to or need to do, while clinical status measures the last time a client had a relapse of symptoms or when their symptoms worsened.

Today's action requests the board authorize a competitive solicitation for the re-procurement of Strength-Based Case Management Full Services Partnership and Institutional Case

**SUBJECT:** AUTHORIZE COMPETITIVE SOLICITATIONS, SINGLE SOURCE CONTRACT, AMENDMENTS TO EXTEND EXISTING CONTRACTS, AMENDMENTS TO REFLECT CHANGE TO SERVICES AND INCREASE TO FUNDING, AND EXECUTION OF INTERGOVERNMENTAL AGREEMENT WITH THE STATE OF CALIFORNIA AND ACCEPTANCE OF FUNDING (DISTRICTS: ALL)

Management program for an Initial Term of up to one year, with four 1-year Options, and up to additional six months, if needed.

*b. Suicide Prevention, Stigma Reduction and Substance Use Prevention Multi-Media Campaign*

On November 13, 2018 (12), the Board authorized the competitive procurement of Suicide Prevention, Stigma Reduction and Substance Use Prevention Multi-Media Campaign services. This multi-media public health campaign, titled *It's Up to Us*, aims to promote mental health awareness and reduce stigma associated with mental illness and substance use treatment. *It's Up to Us* aims to increase the public's awareness on suicide prevention and stigma reduction by using a variety of media tools, including television, radio and billboards, written materials, websites, social media channels, and other marketing tools to share information on various behavioral health topics and promote local resources. Services include providing a public education campaign, suicide prevention resources, and referrals for those seeking information. The *It's Up to Us* campaign was designed to empower San Diego County residents to talk openly about mental illness, recognize symptoms, utilize local resources, and seek help. In response to the national substance use crisis, a focus on substance use prevention messaging was added to the campaign in FY 2020-21. In 2023, Strata Research conducted a community survey to measure the effectiveness of the campaign. Of the 604 respondents, 83% agreed that the campaign helped them recognize the early signs of mental health challenges.

Today's action requests the Board authorize a competitive solicitation for the re-procurement of the Suicide Prevention, Stigma Reduction and Substance Use Prevention and Multi-Media Campaign, *It's Up to Us*, for an Initial Term of up to one year, with four 1-year Options, and up to an additional six months, if needed.

*c. Breaking Down Barriers Program*

On February 1, 2019, under Administrative Code section 401, the Department of Purchasing and Contracting issued a competitive solicitation for the Breaking Down Barriers program. Subsequently, on July 18, 2023 (14), the Board authorized a contract term extension of this program up to December 31, 2024. Breaking Down Barriers program is designed to reduce mental health stigma among Latino, African American, LGBTQ+, Refugee, Middle Eastern, Asian/Pacific Islander, and Native American communities. The program focuses on providing outreach, education, and engagement to unserved and underserved populations. The Breaking Down Barriers program aims to ensure messaging resonates with the diverse communities it serves, enhancing the credibility, relevance, and cultural competency of the program's communication and engagement efforts. Additionally, the program collaborates with various stakeholders, agencies, community groups, and client/family member organizations to support the program's mental health stigma and discrimination reduction campaign. Services are provided countywide and include educational workshops and events, discussions about mental health, and outreach to unserved and underserved populations, supporting connections of these populations with mental health services and other beneficial resources. The program also offers

**SUBJECT:** AUTHORIZE COMPETITIVE SOLICITATIONS, SINGLE SOURCE CONTRACT, AMENDMENTS TO EXTEND EXISTING CONTRACTS, AMENDMENTS TO REFLECT CHANGE TO SERVICES AND INCREASE TO FUNDING, AND EXECUTION OF INTERGOVERNMENTAL AGREEMENT WITH THE STATE OF CALIFORNIA AND ACCEPTANCE OF FUNDING (DISTRICTS: ALL)

cultural humility and cultural competency training to community members and providers working with these populations.

Academic research and program utilization data highlight the unique challenges faced by individuals from diverse communities. Stigma-associated findings indicated that groups such as Non-Hispanic Asian/Pacific Islander, Non-Hispanic Black, Latino, LGBTQ+, naturalized citizens and non-citizens were more inclined to manage mental health concerns independently, often stemming from mistrust in online tools. In addition, based on an analysis conducted by the BHS Population Health team, 53% of refugees in San Diego County expressed emotional health distress in 2020. This disparity is compounded by data showing high instances of dual mental health disorders and trauma, particularly in Non-Hispanic Black, Non-Hispanic American Indian/Alaska Native and LGBTQ+ populations. In FY 2022-23, the program delivered prevention and early intervention services to 5,539 participants and exceeded the contract's goal of 200 community presentations and 90 group sessions annually by conducting 212 community presentations and 95 group sessions. Of the participants, 97% reported increased awareness of mental health resources, understanding of factors causing mental health stigma, and strategies to reduce and prevent stigma associated with mental illness.

Today's action requests the Board authorize a competitive solicitation for the re-procurement of the Breaking Down Barriers program, with the intent to award one or more contracts for an Initial Term of up to one year, with four 1-year Options, and up to an additional six months, if needed.

*d. Transitional Residential Treatment Program*

On October 4, 2016 (1), the Board authorized the competitive procurement of Transitional Residential Treatment Program. Subsequently, on November 15, 2022 (28), the Board authorized a contract term extension of this program up to June 30, 2024, and up to an additional six months, if needed.

Transitional Residential Treatment Program provides transitional residential treatment services to adults with SMI, which may include co-occurring conditions, who are Medi-Cal recipients and residents of San Diego County. Services include individual and group counseling, recovery and rehabilitation such as skill-building, education and employment exploration, and other services to support transition to the community. This program has served as an option for clients that have transitioned from mental health rehabilitation centers and is focused on providing clients with the support needed to transition to a less structured level of care and independent living.

In FY 2022-23, the Transitional Residential Treatment Program served a total of 26 unduplicated clients, all of whom received employment screening upon admission and were re-assessed every month to determine and discuss their interest and/or progress in employment. Of those clients who were discharged, 60% were not readmitted to the same or higher level of care within 12 months following discharge.

**SUBJECT:** AUTHORIZE COMPETITIVE SOLICITATIONS, SINGLE SOURCE CONTRACT, AMENDMENTS TO EXTEND EXISTING CONTRACTS, AMENDMENTS TO REFLECT CHANGE TO SERVICES AND INCREASE TO FUNDING, AND EXECUTION OF INTERGOVERNMENTAL AGREEMENT WITH THE STATE OF CALIFORNIA AND ACCEPTANCE OF FUNDING (DISTRICTS: ALL)

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

***Recommendation #2: Authorize Single Source Contract with Generations Healthcare of Lakeside, LLC***

On December 12, 2006 (7), the Board authorized the award of 24-hour Medical, Nursing and Rehabilitative Services to Generations Healthcare (GHC) of Lakeside. Subsequently on November 13, 2018 (12), the Board authorized a contract term extension of the expiring single source contract up to June 30, 2024. This program provides a skilled nursing facility for adults 18 years and older experiencing mental health conditions 24 hours a day, seven days a week.

This program qualifies for a single source contract to provide these services based on the following section of Board Policy A-87 Competitive Procurement: Section 1. D3. The procurement is for services from a provider with unique knowledge, skill, or ability not available from other sources. GHC of Lakeside, LLC provides a comprehensive program of therapy services and medical rehabilitation. This facility currently has a mental health program approved by the Department of Health Care Services, through their Skilled Nursing Facility (SNF) Special Treatment Programs (STP), which is the only licensed SNF STP in San Diego County. Today's action will allow GHC of Lakeside, LLC to provide an option for patients that do not need the higher level of care that is offered through the SNF STP and also allowing the patients who still have both medical and psychiatric needs to transition from an acute in-patient behavioral health setting. The managed care plan funds the placement to address the medical needs of the client. This contract allows for the County to provide additional funding to support the program as they also address the psychiatric needs of the clients. In FY 2022-23, the 24-hour Medical, Nursing and Rehabilitative Services program with GHC of Lakeside, LLC served a total of 35 unduplicated clients countywide.

Today's action requests the Board authorize a single source contract with GHC of Lakeside, LLC for 24-hour Medical, Nursing and Rehabilitation Services for an Initial Term of up to one year, with four 1-year Options, and up to an additional six months, if needed.

***Recommendation #3: Authorize Amendments and Extend Contracts***

In FYs 2016-19, the Board authorized the competitive solicitation for the programs providing Assertive Community Treatment and Behavioral Health Patient Rights Education and Advocacy Services. Specifically, the contracts listed in Attachment A, Table 1 require an amendment to extend to ensure continuity of critical behavioral health treatment services. The Assertive Community Treatment Services programs listed in Table 1 will be re-procured and the extensions support strategically spreading the re-procurements over time to allow for maximum competition from potential offerors. Additionally, a staggered approach to procurement timelines helps ensure potential offerors, including small businesses and/or entities with limited staff available to prepare procurement responses, have adequate time to respond to procurements. With increased



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competition, the County may obtain best value for services rendered to the public. Additionally, these extensions will support improved service delivery by ensuring similar services are aligned and evaluated through clinical design. The Behavioral Health Patient Rights Education and Advocacy Services program listed in Table 1 will be reprocured and the extension supports continuity of this service as the Community Assistance, Recovery and Empowerment (CARE) Act program is in early stages of implementation.

If approved, today's action would authorize an amendment and extension of the contracts listed in Table 1 extending the contract term up to June 30, 2025, and up to an additional six months, if needed.

Additional details of these programs can be found in Attachment A, Table 1.

***Recommendation #4: Authorize Amendments and Extend Single Source Contracts***

In FYs 2006-10, the Board authorized the single source procurement of the programs providing Crisis and Medi-Cal Manage Care Psychiatric Inpatient Hospital services. Specifically, the contracts listed in Attachment A, Table 2 expire by the end of FY 2023-24 and require an amendment to extend the contract term to ensure continuity of critical behavioral health treatment services.

The Director of the Department of Purchasing and Contracting awarded the contracts listed in Attachment A, Table 2 based on the following Board Policy A-87, Competitive Procurement exceptions:

- Section 1.D.3: the procurement is for services from a provider with unique knowledge, skill, or ability not available from other sources.

If approved, today's action would authorize an amendment and extension of the contracts listed in Table 2 extending the contract term up to June 30, 2026, and up to an additional six months, if needed.

Additional details of these programs can be found in Attachment A, Table 2.

***Recommendation #5: Authorize Amendment to Reflect Change to Services and Increase in Funding***

***a. Independent Living Association and Recovery Residence Association***

On March 1, 2022, under Administrative Code section 401, the Department of Purchasing and Contracting issued a competitive solicitation for the Independent Living Association (ILA) and Recovery Residence Association (RRA) program. The ILA and RRA program establishes and monitors quality standards for independent living homes and recovery residences in San Diego County and provides resources to their administrators. The CARE Act authorizes specified adult persons to petition a civil court to create a voluntary CARE agreement or a court-ordered CARE plan that can include treatment, housing support, and other services for persons with

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untreated schizophrenia or other psychotic disorders. Community Health Improvement Partners will expand capacity for the CARE Act Program; specifically, to recruit housing providers to house CARE Act referrals, engage landlords/housing operators, and identify housing options for CARE Act Program eligible clients.

Today's action requests the Board authorize an amendment to the contract with Community Health Improvement Partners for Independent Living Association and Recovery Residence Association, to increase the contract amount to address the needs of those with SMI who enter into a CARE agreement or CARE plan.

*b. Clinical and Cytological Lab Services*

On June 30, 2020, under Administrative Code section 401, the Department of Purchasing and Contracting issued a competitive solicitation for Clinical and Cytological Laboratory Services. This program provides countywide clinical and cytological laboratory testing and phlebotomy services for several County departments, including San Diego County Psychiatric Hospital, Edgemoor Distinct Part SNF, and various Public Health Services departments.

Today's action requests the Board authorize an amendment to the contract with Quest Diagnostics for Clinical and Cytological Laboratory Services, to increase the contract amount to address the increased testing needs of various County departments to continue lab testing and phlebotomy services.

***Recommendation #6: Execute Drug Medi-Cal Organized Delivery System Intergovernmental Agreement from the State of California and Accept Funding***

On March 27, 2018 (2), the Board approved the implementation of the Section 1115 Medicaid Demonstration Waiver DMC-ODS pilot program, beginning July 1, 2018. DMC-ODS implementation has dramatically transformed the local SUD system by providing comprehensive services that connect individuals with substance use conditions to the care they need. Additionally, it has accelerated the integration of SUD specialty care with mainstream healthcare to improve access to services and drive better outcomes, enabled more local oversight and accountability, created utilization controls to improve care, and supported evidence-based practices in SUD treatment.

Today's action requests the Board approve and authorize the Clerk of the Board to execute the DMC-ODS Intergovernmental Agreement with the State of California, upon receipt, and subsequent amendments, as required, and to reflect revised revenue amounts allocated by the State.

**SUBJECT:** AUTHORIZE COMPETITIVE SOLICITATIONS, SINGLE SOURCE CONTRACT, AMENDMENTS TO EXTEND EXISTING CONTRACTS, AMENDMENTS TO REFLECT CHANGE TO SERVICES AND INCREASE TO FUNDING, AND EXECUTION OF INTERGOVERNMENTAL AGREEMENT WITH THE STATE OF CALIFORNIA AND ACCEPTANCE OF FUNDING (DISTRICTS: ALL)

**LINKAGE TO THE COUNTY OF SAN DIEGO STRATEGIC PLAN**

Today's proposed actions support the County of San Diego's 2023-2028 Strategic Plan Initiatives of Equity (Health) and Community (Quality of Life) as well as the regional *Live Well San Diego* vision of healthy, safe, and thriving communities. This is accomplished by reducing disparities and disproportionality of individuals with mental health and substance use conditions and ensuring access to a comprehensive continuum of behavioral health services administered through accessible behavioral health programs.

Respectfully submitted,



HELEN N. ROBBINS-MEYER  
Interim Chief Administrative Officer

**ATTACHMENT(S)**

Attachment A – Behavioral Health Services List of Contracts



## BEHAVIORAL HEALTH SERVICES LIST OF CONTRACTS

November 7, 2023

**Table 1**

<b>Recommendation #3: Authorization to Amend and Extend Contract term up to June 30, 2025, and up to an additional six months, if needed.</b>							
<b>Service Description</b>	<b>Contract Number</b>	<b>Population Served</b>	<b>Contractor Name</b>	<b>Program Name</b>	<b>Annual Budget*</b>	<b>Previous Authority</b>	<b>Contract End Date</b>
<b>1. Assertive Community Treatment Services</b>							
The Mental Health Assertive Community Treatment (ACT) Full-Service Partnership program provides care for adults that have a serious mental illness and are currently in detention or are referred by the Defense Counsel (including Public Defender) or Sheriff.	560755	Adults aged 18-59	Telecare Corporation	Adult Mental Health Justice Involved Treatment Services and Supported Housing with ACT Team Services	\$3.3 million	Approved for procurement by the Board of Supervisors (Board) on 11/14/2017 (10).	7/31/2024
The Mental Health Assertive Community Treatment (ACT) Full-Service Partnership program provides care for adults that have a serious mental illness and are in long term treatment facilities being discharged as a step down.	560864	Adults aged 18-59	Telecare Corporation	Assertive Community Treatment Full-Service Partnership Step Down from Long Term Care	\$3.6 million	Approved for procurement by the Board on 6/21/2016 (9).	8/31/2024
The Mental Health ACT Full-Service Partnership program provides care for adults being discharged from an Acute Care facility as a step down.	560866	Adults aged 18-59	Telecare Corporation	Assertive Community Treatment Full-Service Partnership Step Down from Acute Care	\$3.5 million	Approved for procurement by the Board on 6/21/2016 (9).	8/31/2024
<b>2. Behavioral Health Patient Rights Education and Advocacy Services</b>							
The Behavioral Health Patient Rights Education and Advocacy Services program provides behavioral patient rights education and advocacy services for County residents.	560727	Adults, Older Adults, Transition Age Youth, and Children	Legal Aid Society of San Diego, Inc.	Behavioral Health Patient Rights Education and Advocacy Services	\$ 1.8 million	Approved for procurement by the Board on 11/13/2018 (12).	6/30/2024
<b>Total Estimated Cost</b>					<b>\$12.2 million</b>		

\* Budget amounts rounded to the nearest hundred thousand

Table 2

<b>Recommendation #4:</b> Authorization to Amend and Extend Single Source Contract term <b>up to June 30, 2026</b> , and up to an additional six months, if needed.									
Service Description	Contract Number	Population Served	Contractor Name	Program Name	Annual Budget*	Previous Authority	Contract End Date	Exception to Board Competitive Procurement Policy (A-87)	Single Source Exception Justification Narrative
<b>1. Crisis Services</b>									
The Emergency Screening Unit (ESU) provides 24-hour psychiatric assessment and crisis intervention services for children and adolescents. Services include emergency psychiatric evaluations, emergency mental health assessment, crisis intervention, crisis stabilization, ability to manage an after care follow up connection as needed, case management and medication management.	533821	Youth up to age 18	New Alternatives, Inc.	Emergency Screening Unit	\$5.8 million	Approved for augmentation of ESU services by the Board on 4/27/2010 (10) and contract term extension on 11/15/2022 (28).	6/30/2024	D3. The procurement is for services from a provider with unique knowledge, skill, or ability not available from other sources.	At the time of procurement, New Alternatives, Inc. had the unique ability and staffing model to provide services at this 24-hour, specialized facility.
<b>2. Medi-Cal Managed Care Psychiatric Inpatient Hospital Services</b>									
This program provides psychiatric inpatient hospital services to adults and older adults with acute symptoms and who need 24-hour observation and intensive treatment.	553276	Adults	Aurora Behavioral Health Care	Medi-Cal Managed Care Psychiatric Inpatient Hospital Services	N/A	Approved for single source procurement by the Board on 12/12/2006 (7) and contract term extension on 11/13/2018 (12)	6/30/2024	D3. The procurement is for services from a provider with unique knowledge, skill, or ability not available from other sources.	At the time of procurement, Aurora Behavioral Health Care possessed the expertise, competencies, and resources to provide psychiatric inpatient hospital services.
	543125	Adults	Palomar Health	Medi-Cal Managed Care Psychiatric Inpatient Hospital Services	N/A	Approved for single source procurement by the Board on 12/12/2006 (7) and contract term extension on 11/13/2018 (12)	6/30/2024	D3. The procurement is for services from a provider with unique knowledge, skill, or ability not available from other sources.	At the time of procurement, Palomar Health possessed the expertise, competencies, and resources to provide psychiatric inpatient hospital services.

\* Budget amounts rounded to the nearest hundred thousand

# ATTACHMENT A

	535468	Adults	Scripps Health	Medi-Cal Managed Care Psychiatric Inpatient Hospital Services	N/A	Approved for single source procurement by the Board on 12/12/2006 (7) and contract term extension on 11/13/2018 (12)	6/30/2024	D3. The procurement is for services from a provider with unique knowledge, skill, or ability not available from other sources.	At the time of procurement, Scripps Health possessed the expertise, competencies, and resources to provide psychiatric inpatient hospital services.
	551798	Adults	BH-SD OPCO, LLC dba Alvarado Parkway Institute, Inc	Medi-Cal Managed Care Psychiatric Inpatient Hospital Services	N/A	Approved for single source procurement by the Board on 12/12/2006 (7) and contract term extension on 11/13/2018 (12)	6/30/2024	D3. The procurement is for services from a provider with unique knowledge, skill, or ability not available from other sources.	At the time of procurement, BH-SD OPCO, LLC dba Alvarado Parkway Institute, Inc possessed the expertise, competencies, and resources to provide psychiatric inpatient hospital services.
	563176	Adults	Prime Healthcare	Medi-Cal Managed Care Psychiatric Inpatient Hospital Services	N/A	Approved for single source procurement by the Board on 10/29/2019 (5)	6/30/2024	D3. The procurement is for services from a provider with unique knowledge, skill, or ability not available from other sources.	At the time of procurement, Prime Healthcare possessed the expertise, competencies, and resources to provide psychiatric inpatient hospital services.
<b>Total Estimated Cost</b>					<b>\$5.8 million</b>				

# **ITEM #31: AUTHORIZE COMPETITIVE SOLICITATIONS, SINGLE SOURCE CONTRACT, AMENDMENTS TO EXTEND EXISTING CONTRACTS, AMENDMENT TO REFLECT CHANGE TO SERVICES AND INCREASE IN FUNDING, AND EXECUTION OF THE INTERGOVERNMENTAL AGREEMENT WITH THE STATE OF CALIFORNIA AND ACCEPTANCE OF FUNDING**

Eric C. McDonald, MD, Interim Agency Director, Health and Human Services Agency  
Luke Bergmann, PhD, Director, Behavioral Health Services

November 7, 2023



**LIVE WELL**  
**SAN DIEGO**



# Overview of Recommendations



LIVE WELL  
SAN DIEGO

## *1. Issue Competitive Solicitations*

### **4 contracts**

- \$13 million in FY 2024-25

## *2. Single Source Contract*

### **1 contract**

- \$.8 million in FY 2024-25

## *3. Authorize Amendments & Extend Contracts*

### **4 contracts**

- \$12.2 million in FY 2024-25

## *4. Authorize Amendments and Extend Single Source Contracts*

### **6 contracts**

- \$5.8 million in FY 2024-25

## *5. Authorize Amendment to Reflect Change to Services and Increase in Funding*

### **2 contracts**

- \$1.3 million in FY 2023-24
- \$2.6 million in FY 2024-25

***Fiscal Year 2024-25 Total Estimated Investment: \$34.4M***

# Overview of Recommendations



LIVE WELL  
SAN DIEGO

## ***6. Execute Drug Medi-Cal Organized Delivery System (DMC-ODS) Intergovernmental Agreement & Accept Funding***

- Since implementation in 2018, DMC-ODS has:
  - Provided a continuum of care for evidence-based substance use disorder treatment services
  - Enabled more local control
  - Improved care and efficiency
- DMC-ODS services include:
  - Opioid Treatment Program Services
  - Substance Use Outpatient Treatment
  - Substance Use Residential Treatment
  - Others
- Authorizes funding of up to \$684.7 million over four Fiscal Years (FY 2023-24 through 2026-27)

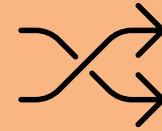
# Supporting Services Across the Continuum



LIVE WELL  
SAN DIEGO



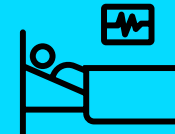
**Outreach, Engagement,  
and Public Messaging**



**Crisis & Diversionary  
Services**



**Outpatient Services**



**Acute Inpatient Care**



**Community Based Care**



**Subacute Services**

# Issue Competitive Solicitations and Single Source Contracts



## ***Single Source***

- Skilled nursing facility offering an additional step-down option for patients

## ***Competitive Solicitations***

- Breaking Down Barriers Program
- Strength-Based Case Management Full Services Partnership and Institutional Case Management
- Transitional Residential Treatment Program
- Suicide Prevention, Stigma Reduction and Substance Use Prevention Multi-Media Campaign



# Authorize Amendments and Extend Contracts for Competitively Procured and Single Source Contracts



LIVE WELL  
SAN DIEGO

**Assertive Community  
Treatment Services**

**Behavioral Health Patient Rights  
Education and Advocacy Service**

**Youth Crisis Services**

**Medi-Cal Managed Care Psychiatric  
Inpatient Hospital Services**



# Authorize Amendment to Reflect Change to Services and Increase in Funding



## *Lab Testing Services*

- Countywide clinical lab testing and phlebotomy services, including at Edgemoor Distinct Parts Skilled Nursing Facility and the San Diego County Psychiatric Hospital
- Addresses increased testing needs of various HHSA departments





# Authorize Amendment to Reflect Change to Services and Increase in Funding



## *Independent Living Association (ILA) & Recovery Residence Association (RRA)*

- Increase funding to support CARE Act implementation
- Supports clients with serious mental illness with a court-ordered CARE Plan





# Recommendations



1. Authorize competitive solicitations for behavioral health services.
2. Authorize a single source contract with Generations Healthcare of Lakeside, LLC for Adult Residential Skilled Nursing Facility services.
3. Authorize amendments to behavioral health services contracts.
4. Authorize amendments to single source contracts.
5. Authorize amendments to contracts to increase the contract amount.
6. Approve and authorize the Clerk of the Board to execute, upon receipt, the Drug DMC-ODS Intergovernmental Agreement from the State of California and accept funding for FY 2023-24 through FY 2026-27.

# **ITEM #31: AUTHORIZE COMPETITIVE SOLICITATIONS, SINGLE SOURCE CONTRACT, AMENDMENTS TO EXTEND EXISTING CONTRACTS, AMENDMENT TO REFLECT CHANGE TO SERVICES AND INCREASE IN FUNDING, AND EXECUTION OF THE INTERGOVERNMENTAL AGREEMENT WITH THE STATE OF CALIFORNIA AND ACCEPTANCE OF FUNDING**

Eric C. McDonald, MD, Interim Agency Director, Health and Human Services Agency  
Luke Bergmann, PhD, Director, Behavioral Health Services

November 7, 2023



**LIVE WELL  
SAN DIEGO**



OFFICE OF THE GOVERNOR

October 20, 2023

The Honorable Xavier Becerra  
Secretary of the U.S. Department of Health & Human Services  
200 Independence Avenue, S.W.  
Washington, DC 20201

RE: REQUEST FOR NEW DEMONSTRATION UNDER SECTION 1115 AUTHORITY

Dear Secretary Becerra:

I am pleased to submit the enclosed request for a new demonstration project under Section 1115 of the Social Security Act, entitled the Behavioral Health Community-Based Organized Networks of Equitable Care and Treatment (BH-CONNECT) demonstration.

With this application, California is seeking to enter into a new five-year demonstration agreement with the Centers for Medicare & Medicaid Services (CMS) to expand access to and strengthen the continuum of community-based behavioral health services for Medi-Cal members living with significant behavioral health needs. Through the BH-CONNECT demonstration, California seeks to leverage the 2018 guidance from CMS that describes how states can use Section 1115 demonstration authority to secure federal financial participation for care provided during short-term stays in Institutions for Mental Diseases (IMDs), as long as they meet certain standards. The BH-CONNECT demonstration is integral to the State's broader efforts to transform and strengthen the Medi-Cal program, offering Californians a more equitable, coordinated, and person-centered approach to maximizing their health and life trajectories. Further, BH-CONNECT is a key component of my Administration's broader, multi-year behavioral health agenda and historic transformation of behavioral health services in California.

Building upon CMS' approval of the California Advancing and Innovating Medi-Cal (CalAIM) Section 1115 demonstration in December 2021, the BH-CONNECT



demonstration will directly address the need to expand and strengthen the continuum of care specifically for Medi-Cal members living with significant behavioral health needs. The BH-CONNECT demonstration includes elements designed particularly for Medi-Cal members experiencing the greatest disparities in behavioral health care and outcomes, including children and youth involved in child welfare; individuals and families who are experiencing or at risk of homelessness; and those who are justice-involved.

The enclosed includes all information and content required for a demonstration request under Section 431.412 of Title 42 of the Code of Federal Regulations, including a description of the public and Tribal stakeholder processes that the California Department of Health Care Services has conducted over the last few months as we developed this request.

California's BH-CONNECT application aligns with the Biden Administration's priorities to advance health equity and to expand access to and strengthen the continuum of behavioral health services in Medicaid. We look forward to working with CMS to realize these goals.

Thank you for your consideration. If you have any questions, please contact Tyler Sadwith, California's Deputy Director of Behavioral Health, at [Tyler.Sadwith@dhs.ca.gov](mailto:Tyler.Sadwith@dhs.ca.gov).



Enclosures

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# The California Behavioral Health Community-Based Organized Networks of Equitable Care and Treatment (BH-CONNECT) Section 1115 Demonstration

OCTOBER 2023





[Link to the document](#)



## September 2023 Update

Progress & Updates October 5, 2023

In the September 2023 Update, we're spotlighting how education and behavioral health can work in concert to creating better outcomes for youth, families and communities. Our stories feature how Los Angeles County's Bassett High School is implementing collaborative and community-centered approaches through the community schools model, explore the importance of addressing stigma to support mental health, and outline a range of efforts helping Local Education Agencies meet the needs of their students through California's Multi-Tiered System of Support. September is Suicide Prevention Awareness Month, and we are also sharing links to resources that can help young people, families, friends, schools and educators recognize the warning signs of suicide and seek additional support through the CalHHS Suicide Prevention hub.







## A Message from CYBHI Director Melissa Stafford Jones

A core value driving the CYBHI is that effective and equitable systems are driven by, for and with the people and communities they serve.

That's why the CYBHI has been collaborating with education colleagues at the state and local level advancing the California Community Schools Framework which is representative of such an approach. Bassett High School in southern California has implemented this framework and it is creating more equitable outcomes for young people, families and communities through integrated support services, a deep commitment to family and community engagement and collaboration with the people they serve.

When systems work together, we're able to meet kids and families where they are, center our efforts on their needs and provide the integrated supports they need to support their well-being.

Thank you for your continued collaboration, commitment and leadership.

In Partnership,

**Melissa Stafford Jones**

*Director, Children and Youth Behavioral Health Initiative*

## Funding Opportunities and Upcoming Events

### Current Funding Opportunities

- **Grant | Scaling of EBPs/CDEPs Round 3: Early Childhood Wraparound Services:**
  - Grant opportunity for individuals, organizations and agencies to scale evidence-based practices and community-defined evidence practices (EBP/CDEP) for early childhood wraparound services.
  - Application due **October 6, 2023, by 5 p.m. PST**
- **Grant | Third-Party Administrator (TPA) Fee Schedule:**
  - Request for information and input on the supply of providers and payers with support services that include oversight and management of the school-linked behavioral health provider network; claims administration and payment remittance for services rendered under the statewide multi-payer school-linked fee schedule; and onboarding, implementation, and ongoing technical assistance services.
  - Responses due **October 9, 2023.**
- **Grant | Health Professions Pathways Program (HPPP):**
  - Grant opportunity for organizations to develop and implement health professions pathways programs, including pipeline programs, summer internships, and post-undergraduate fellowships.
  - Application due **October 16, 2023.**

- **Grant | Justice-System Involvement Youth: Behavioral Health Pipeline (JSIY BH Pipeline):**
  - Grant opportunity for organizations to support and encourage underrepresented and disadvantaged individuals to pursue behavioral health careers to develop a more culturally and linguistically competent behavioral healthcare workforce, including providing comprehensive wrap-around supports.
  - Application due **October 16, 2023**.
- **Grant | Scaling of EBPs/CDEPs Round 5: Early Intervention Programs and Practices:**
  - Grant opportunity for individuals, organizations and agencies to scale evidence-based practices and community-defined evidence practices (EBP/CDEP) to scale early intervention programs and practices that provide mental health and wellness services to children, youth, parents, and caregivers.
  - Application due **November 3, by 3:00 p.m. PST**

## Upcoming Events

- **Webinar | Wellness Coaches (MTSS Tiers 1-2):**
  - Learn about the new Wellness Coach role and discover the why, what, when, how, and who to consider in exploring how Wellness Coaches can supplement your behavioral health teams and increase access to supports for students.
  - Join on **October 18, 2-4:30 p.m. PST**
- **Webinar | Virtual Services Platform (MTSS Tiers 1-2):**
  - Learn about a new app being developed to connect youth and families with information and self-management tools, online coaching supports, and services in the community and how schools can integrate the app into their system of behavioral health supports for students.
  - Join on **November 29, 2-4:30 p.m. PST**

## Spotlights

Every month, we highlight stories that provide insight into the behavioral health needs of California youth and families, uplift some of the efforts and approaches to transform our systems and illustrate values that guide our efforts.





## **Stories From the Field: Community-Owned Change at Community Schools**

Imagine a school where students can find academic help and also connect to support that strengthens their families, addresses their physical and behavioral health needs and engages vital social services. What you're picturing isn't theoretical. It's called the Community Schools model; it has a lot in common with the work of CYBHI and it's being implemented throughout the state. Discover how Los Angeles County's Bassett High School has implemented this model and created more collaborative and community-centered approaches for students and their families. [Read Bassett High School's Story.](#)

[Stories From the Field | Community-Owned Change at Community Schools - CYBHI \(ca.gov\)](#)

## Resources Available for Suicide Prevention Awareness Month

September was National Suicide Prevention Awareness Month, and through the [CalHHS Suicide Prevention hub](#), you can find links to resources that can help young people, families, friends, schools and educators to recognize the warning signs of suicide and find additional support. Help us promote these resources through this [Social Media Toolkit](#).

If you or someone you know is experiencing a mental health or substance use-related crisis, help is available 24/7. Call or text 988, or chat at [988lifeline.org](https://988lifeline.org).

California's young people are struggling, and the CYBHI has made suicide prevention and crisis response key priorities of our work. Along with our broader efforts to expand, strengthen and increase the accessibility of behavioral health supports available to California youth, we're also [developing a targeted, multicultural and multilingual campaign](#) to reach youth at increased risk of suicide — awarding [\\$16.3 million in grants](#) in mid-September to youth-serving tribal and community-based organizations — and [piloting models](#) for making youth suicide and attempted suicide reportable events and providing crisis services and follow-up support.

[Suicide Prevention Resources - California Health and Human Services](#)





## **Story From the Field: Addressing Stigma to Support Youth Mental Health**

Mental health stigma - held by family members, trusted adults, friends and others - continues to be an obstacle that prevents young people from seeking vital care and support. In this month's composite Story From the Field, see how one family supported their son's well-being - and their own - by addressing stigma and fostering open communication around mental health. [Read the Composite Story.](#)

[Story From the Field | Addressing Stigma to Support Youth Mental Health - CYBHI \(ca.gov\)](#)

## **Strengthening SEL, Wellbeing, Mindfulness, and Resilience**

On September 20, CYBHI hosted a webinar exploring new communities of practice, funding and tools to help Local Education Agencies (LEAs) meet the needs of their students as part of California's Multi-Tiered System of Support (MTSS).

Topics covered included the Office of the California Surgeon General's new [free, voluntary trauma-informed training](#) to help early care and school personnel recognize and respond to trauma and stress and how the California Department of Education's [Project Cal-Well](#) is helping improve school-wide climates and support prevention. It also included how the [Student Behavioral Health Incentive Program](#) is fostering partnerships to increase access to services and sustain school-based behavioral health services and how CalHOPE is building LEA's capacity to incorporate social emotional learning, as well as a new opportunity to fund LEA programming that supports mindfulness, well-being and resilience.

The presentation and video of the webinar can be found on the [CYBHI website](#).

[Strengthening SEL, Wellbeing, Mindfulness, and Resilience \(MTSS Tier 1\) - CYBHI \(ca.gov\)](#)

[Strengthening SEL, Wellbeing, Mindfulness, and Resilience \(MTSS Tier 1\) - 9/20/23 - YouTube](#)

## Additional Updates

Learn more about what the State of California is doing to support the well-being of children, youth and families.

- [CDPH Announces \\$16.3 million in Awards for Youth Suicide Prevention](#)

[CDPH Announces \\$16.3 Million in Awards for Youth Suicide Prevention \(ca.gov\)](#)

[Caregivers-and-Kids\\_California-Surgeon-General\\_Stress-Busting-Playbook.pdf](#)

[Toolkit: Dear Stress, I'm Over You | OSG \(ca.gov\)](#)

- [View the Presentation and Video of CYBHI's September Quarterly Webinar](#)

[Public Webinar - CYBHI \(ca.gov\)](#)

- [Young People - Join CDPH's Youth Co-Lab and Shape the Future of Behavioral Health in CA](#)

[CDPH YCL Landing Page - KAIP Inc. Website \(wpengine.com\)](#)

## About the CYBHI

The Children and Youth Behavioral Health Initiative (CYBHI) is a five-year, \$4.7 billion initiative that is transforming the way California supports children, youth and families. Learn more at [cybhi.chhs.ca.gov](http://cybhi.chhs.ca.gov).

You can also view past updates and webinars.

To contact CYBHI or engage on workstream-specific topics, please visit our Contact Us page.





## OCTOBER 2023 UPDATE



### Table of Contents

#### **A Message from CYBHI Director Melissa Stafford Jones**

#### **Funding Opportunities and Upcoming Events**

#### **Spotlights**

- Stories From the Field: Building a School-Wide Approach to Mental Health and Well-Being
- California Invests in Strengthening Critical Mental Systems
- OSG Launches ACEs and Toxic Stress Awareness Webpage
- Integrated Implementation of Community Schools and CYBHI
- Learn More About Sustainable Funding for School-Linked Behavioral Health Services
- CYBHI Job Posting: Health Program Specialist II

#### **Additional Updates**

#### **About the CYBHI**

## A Message from CYBHI Director Melissa Stafford Jones

This month, I'm excited to share updates on the implementation of several CYBHI workstreams and the **Transforming Together Demonstration Project**, which is bringing together representatives of health and education systems to advance coordinated implementation of CYBHI and California's Community Schools Partnership Program.

We are also pleased to continue our series "Stories from the Field" that highlights existing local efforts to improve access and outcomes through coordinated, youth-centered, and equity-focused strategies that we continue to learn from and build upon in the work of CYBHI.

Thank you for your continued collaboration, commitment and leadership.

In Partnership,

**Melissa Stafford Jones**

*Director, Children and Youth Behavioral Health Initiative*

## Funding Opportunities and Upcoming Events

### Current Funding Opportunities

- **Grant | [Scaling of EBPs/CDEPs Round 3: Early Childhood Wraparound Services](#):**
  - Grant opportunity for individuals, organizations and agencies to scale evidence-based practices and community-defined evidence practices (EBP/CDEP) for early childhood wraparound services.
  - Application due **November 1, 2023, by 5 p.m. PST**
- **Grant | [Scaling of EBPs/CDEPs Round 5: Early Intervention Programs and Practices](#):**
  - Grant opportunity for individuals, organizations and agencies to scale evidence-based practices and community-defined evidence practices (EBP/CDEP) to scale early intervention programs and practices that provide mental health and wellness services to children, youth, parents, and caregivers.
  - Responses due **November 3, 2023, by 3:00 p.m. PST**



## Upcoming Webinars

- **Webinar | [Keep Your Community Covered: Schools and Families \(advance registration required\)](#):**
  - DHCS will hold a webinar on Keep Your Community Covered: Schools and Families, which will provide school partners with important information to assist students and their families with renewing Medi-Cal coverage. The webinar will also highlight available outreach resources, how to use the resources and best practices for engaging families with school-age children.
  - Join on **November 16, 2-3:00 p.m. PST**
- **Webinar | [Virtual Services Platform \(MTSS Tiers 1-2\)](#):**
  - Learn about a new app being developed to connect youth and families with information and self-management tools, online coaching supports, and services in the community and how schools can integrate the app into their system of behavioral health supports for students.
  - Join on **November 29, 2-4:30 p.m. PST**
- **Webinar | [CYBHI Quarterly Public Webinar](#):**
  - Get an update on the progress the CYBHI and its workstreams are making to transform the way California meets the behavioral health needs of our children, youth and families.
  - Join on **December 7, 3-5 p.m. PST**

## Spotlights

Every month, we highlight stories that provide insight into the behavioral health needs of California youth and families, uplift some of the efforts and approaches to transform our systems and illustrate values that guide our efforts.



### **Stories From the Field: Building a School-Wide Approach to Mental Health and Well-Being**

Children and youth often struggle to overcome many barriers to access needed mental health support, including long waiting lists, siloed systems of care and behavioral health workforce shortages. In this month's Story From the Field, discover how Oakland's Urban Promise Academy is addressing these barriers by bringing local mental health resources inside the school and centering the health and well-being of students. [Read Urban Promise Academy's Story.](#)

[Stories From the Field: Building a School-Wide Approach to Mental Health and Well-Being - CYBHI \(ca.gov\)](#)



## California Invests in Strengthening Critical Mental Systems

Learn how the CYBHI's Behavioral Health Continuum Infrastructure Program is helping support Kedren Health, Encompass Community Services, The Yurok Health and Human Services Department, Tarzana Treatment Centers and dozens of other critical behavioral health organizations expand the treatment and services they're able to offer communities facing the greatest barriers to care. [Read about the Behavioral Health Continuum Infrastructure Program.](#)

[California Continues to Invest in Strengthening Critical Mental Health Systems for Youth Statewide - CYBHI](#)





## **OSG Launches ACEs and Toxic Stress Awareness Webpage**

Adverse Childhood Experiences (ACEs) are highly stressful and potentially traumatic experiences that can occur in childhood, such as witnessing domestic violence or experiencing abuse or neglect. Without buffering and nurturing care, they can lead to a toxic stress response that can have lasting effects on our bodies and brains. Through a \$24 million investment from the Children & Youth Behavioral Health Initiative, the California Office of the Surgeon General is launching a statewide campaign to provide youth with the knowledge, resources and strategies they need to manage toxic stress, heal from adversity and end cycles of trauma. Visit the new **[ACEs and Toxic Stress Awareness Webpage](#)**.

[The ACEs and Toxic Stress Campaign | OSG](#)



## **Integrated Implementation of Community Schools and CYBHI**

CalHHS, in partnership with the California Department of Education, is kicking off a new demonstration project called Transforming Together (T2) to improve student behavioral health and well-being by coordinating the implementation of the CYBHI and California's Community Schools Partnership Program. Working at the intersection of education and behavioral health, the project seeks to learn how local sites can best be supported to collaborate and partner to harmonize implementation; how these initiatives can be integrated to advance equity and center youth; and what tools, mechanisms and approaches support integration across systems.

## Learn More About Sustainable Funding for School-Linked Behavioral Health Services

In January 2024, the State of California is launching the first cohort launching phase one implementation of a new, **Statewide Multi-Payer Fee Schedule for School-Linked Behavioral Health Services**, which aims to establish a permanent, sustainable funding mechanism for school-linked behavioral health services that will eliminate barriers and increase access to behavioral health services for children, youth, and young adults; eases administrative complexities for local education agencies (LEAs) by streamlining processes and requirements for reimbursement of covered school-linked behavioral health services furnished to students and alleviating LEA burdens related to contract and rate negotiations with health plans; and, applies to multiple payers, including Medi-Cal managed care plans (MCPs), commercial MCPs, and disability insurers, which will ease the uncertainty for providers in identifying students' coverage. Learn more about the what and why of the fee schedule in this new video from DHCS.

[CYBHI Fee Schedule: An Introduction - YouTube](#)





## **CYBHI Job Posting: Health Program Specialist II**

CYBHI is seeking a Health Program Specialist II (HPS II) to act as a highly skilled subject matter expert for health and behavioral health while performing complex analytical, planning and implementation tasks. The program specialist will support the implementation of the CYBHI, performing special projects related to program development and management, conducting policy and program analysis and research, developing policy and program recommendations, engaging with stakeholders, and more. This is a 12-month limited term position and may be extended to a maximum of 24-months and/or may become permanent based on operational needs. Additional information on the position and application instructions can be found on [CalCareers](#).

[CalCareers](#)



## Additional Updates

Learn more about what the State of California is doing to support the well-being of children, youth and families.

- [UC-CDPH Collaborative Awards More Than \\$6 Million for Pandemic Resiliency Research](#)


## About the CYBHI

The [Children and Youth Behavioral Health Initiative \(CYBHI\)](#) is a five-year, \$4.6 billion initiative that is transforming the way California supports children, youth and families. Learn more at [cybhi.chhs.ca.gov](http://cybhi.chhs.ca.gov).

You can also view past [updates and webinars](#).

To contact CYBHI or engage on workstream-specific topics, please visit our [Contact Us](#) page.





# ONLINE ENGAGEMENT PLATFORM GUIDE

Learn about projects, share your thoughts, and help  
make a difference in your community

## 1 Register and Sign in

Sign in

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All fields marked with an asterisk (\*) are required

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Password \*

[Sign in](#)

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## 3 Engage with Your Community

### Live Well San Diego Youth Sector

Welcome to the online engagement platform of the Live Well San Diego Youth Sector. This sector is empowering and engaging the voices of youth and young adults across all sectors. Our vision is to foster healthy, safe, and thriving communities by creating an inclusive space where youth young adults, students and youth-serving organizations can actively participate in projects that help San Diego thrive well.

We invite you to introduce yourself and join us in amplifying our collaborative efforts toward meaningful young leadership. Your input and voice is welcome here to support growth throughout the region.

Share your thoughts and engage in the open dialogue that will help us shape the future.

If you have questions or need help connecting with the Youth Sector, please email: [youth@livewellsd.org](mailto:youth@livewellsd.org)



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**Introduce Yourself**



Welcome your voice and the impact you make in the youth community. We are excited to get to know you and hear how you will make valuable contributions. Please provide a brief introduction about yourself and kindly share on your active engagement in the youth community.

All fields marked with an asterisk (\*) are required.

Upload your profile picture (optional)

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# County of San Diego

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

September 28, 2023

TO: Behavioral Health Advisory Board (BHAB)

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

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

### POPULATION HEALTH NETWORK QUALITY AND PLANNING UPDATES

Quality Improvement is the framework used to improve systems, processes, and care systematically and deliberately. Population Health Network Quality and Planning (NQP) seeks to standardize processes and structure to reduce variation, achieve predictable results, and improve outcomes for patients, healthcare systems, and organizations. The NQP team is responsible for identifying important practices and processes where improvement is needed to achieve excellence and meet standards, especially in the areas of equity, quality, access, and timeliness.

#### Community Experience Partnership (CEP) Updates

- **Community Experience Dashboards:**

- The Community Experience Dashboards (CEDs) are interactive Power BI dashboards comprised of custom behavioral health datasets, including mapping overlays for spatial indicators.
- There have been over 2,100 visits to the CED website since it was launched over a year ago.
- The University of California, San Diego (UCSD) continues to monitor and maintain the website and is preparing to update all dashboards with new data.
- To explore the dashboards, visit the CED webpage at the following link: <https://www.communityexperiencepartnership.com/>

- **The Behavioral Health Equity Index:**

The Behavioral Health Equity Index (BHEI) are descriptive, data-driven tools that allow users to explore the underlying, or root causes, of behavioral health inequities across neighborhoods and regions in San Diego County. The indices are constructed from over 30 indicators, organized into eight (8) domains that map to five (5) social determinants of behavioral health. Areas with higher BHEI scores are relatively less likely to have access to the resources, opportunities, and conditions that promote behavioral health as compared to neighborhoods with lower BHEI scores. Areas with higher BHEI scores may benefit from behavioral health service enhancements or quality improvement efforts.

- **BHEI:** The UCSD Research Centers have drafted indices to estimate behavioral health equity for census tracts, zip codes, subregional areas (SRA), and the County of San

Diego Health and Human Services (HHS) regional geographies. These indices are in the final stages of quality review.

- **BHEI Technical Report:** The BHEI Technical Report details the methodologies used to create and validate the BHEI and will also include preliminary results. To promote transparency and reproducibility, the report will be provided in HTML format so that users may download raw and processed data files, explore BHEI rankings, and interact with maps, plots, and tables. These reports will be available upon finalization of the BHEI and the Service Planning Tool in December 2023.
- **BHS Service Planning Tool:**
  - The BHS Service Planning Tool uses a population health approach to identify communities that may have been historically underrepresented and are at risk for behavioral health inequity. The goal of the tool is to help ensure service provision is informed by data, based in cultural and regional considerations, and focused on communities that may be at greatest risk for unmet behavioral health need. Over 50 “populations of focus” can be selected, including many historically underrepresented populations (e.g., racial/ethnic minorities, limited English speaking populations, individuals experiencing extreme housing cost burden, those living in poverty, etc.). The tool also includes rankings for the BHEI. Once a population is selected, the percentage or count of the selected population residing in each area is ranked from lowest to highest and displayed on the maps and data table. Users can then filter data to specific areas. Additionally, customized reports can be generated to provide more information about the selected areas.
  - The Key Findings Report is a summary report providing key statistics for the selected areas compared to San Diego County. This report is expected to be ready in December 2023.
  - The Detailed Report is a comprehensive description of all populations of focus for the selected areas and any comparison areas.

### **Restructuring of the Quality Review Committee**

The BHS led Quality Review Committee (QRC) has transitioned to the Population Health Unit under the leadership of Dr. Nicole Esposito, Chief Population Health Officer. This shift will impact the focus of the QRC from a compliance focus to a focus on continuous quality improvement. The vision is to address findings and recommendations of the External Quality Review Organization (EQRO), with a focus on access, timeliness, quality, and equity across all domains. Group discussions are focused on the recommendations received from the EQRO. For example, the BHS Population Health Unit reviewed all five (5) Mental Health EQRO recommendations and provided an in-depth presentation/data analysis and structured quality improvement exercise (a Why Tree analysis of recommendations focused on access and timeliness). Topics include both the mental health and the DMC-ODS systems of care.

### **Expanding the Quality Improvement Discussion**

The Network Quality and Planning (NQP) team strives to engage BHS stakeholders to increase awareness about quality improvement processes. NQP presents at both the Mental Health Contractors Association (MHCA) and Alcohol and Drug Services Provider Association (ADSPA) Executive Committees to discuss the data analysis completed in response to the EQRO recommendations. Additionally, the CEP has been presented at the Adult Council and the Cultural Competence Resource Team. As a new team, NQP is excited to broaden discussions about opportunities for continuous quality improvement to enhance behavioral health services.

## **BHS SPECIAL EVENTS AND ANNOUNCEMENTS**

### **Check Your Mood Day**

Check Your Mood Day will take place on Thursday, October 5, 2023, in conjunction with National Depression Screening Day. The purpose of this annual event is to engage and encourage San Diegans to monitor and assess their emotional well-being. Getting screened for depression is an important part of healthcare checkups, much like getting your blood pressure checked or being screened for heart disease or diabetes.

For information on National Depression Screening Day go to the following link:

<https://www.mhanational.org/national-depression-screening-day>

Additional information on Check Your Mood Day can be obtained at the following link:

<https://www.livewellsd.org/events/check-your-mood>

### **CARE Act Program**

The County of San Diego, along with other key partners involved in the process, will commence the CARE Act program on October 1, 2023, as one of the counties participating in the phase one implementation. BHS continues planning efforts to support successful implementation of the program, including hiring new County staff to provide services. A new BHS CARE Act webpage provides general information and frequently asked questions and responses. The CARE Act webpage can be found at the following link:

[https://www.sandiegocounty.gov/content/sdc/hhsa/programs/bhs/CARE\\_act\\_program.html](https://www.sandiegocounty.gov/content/sdc/hhsa/programs/bhs/CARE_act_program.html).

Respectfully submitted,



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

c: Eric C. McDonald M.D., Interim 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, Chief Strategy and Finance Officer





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

October 26, 2023

TO: Behavioral Health Advisory Board (BHAB)

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

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

### EDGEMOOR DISTINCT PART SKILLED NURSING FACILITY (EDGEMOOR) UPDATES

#### **Status Updates/Accomplishments/Announcements**

Edgemoor remains an overall five-star facility on the Centers for Medicare and Medicaid Services (CMS) Care Compare site for Nursing Homes. Achieving five out of five stars in all four rating categories (Overall Quality, Health Inspection, Quality Measures, Staffing, and RN Staffing).

In September, Edgemoor was named one of Newsweek's Best Nursing Homes for 2024, ranking number three in California. In the past, Edgemoor was ranked number two in 2023, number three in 2022, and number one in both 2021 and 2020.

The California Association of Health Facilities (CAHF) Facility Superstar Award recognizes employees of CAHF member facilities who have 10 or more years of service and have dedicated their lives to long-term care. The top 20 nominees are selected by CAHF's Board of Directors to receive the award and attend the awards ceremony in November. This year, Edgemoor Certified Nursing Assistant, Lourdes Richardson, was selected to receive the award. Lourdes is being honored for her 19 years of service to long-term care at Edgemoor.

Edgemoor staff continue to participate in and support the County of San Diego's (County) Diversity and Inclusion initiative, along with other County and community events. Recent examples of events included Pride Month, Philippine Independence Day, Nurse's and Skilled Nursing Care Week, the County of San Diego's Amazing Race, Live Well 5k, and the Huntington's Disease Society walk.

To learn more about Edgemoor visit the following link: <https://www.medicare.gov/care-compare/details/nursing-home/055008?id=c5c0a6e0-691f-46d9-930d-d85f95a29095&city=San%20Diego&state=CA&zipcode=>

#### **COVID-19 Update**

The weekly requirements to report metrics related to vaccinations, positive cases, and other COVID-19 related metrics to the Centers for Disease Control and Prevention (CDC) through the National Healthcare Safety Network (NHSN) portal remain in place. Facility staff and contractors continue to mask when providing patient care or during patient interactions of less than six feet for greater than 15 minutes. Visitors are not required to mask although it is strongly encouraged. Edgemoor continues to follow all other requirements of various local, state, and federal health agencies.



### **Facility Improvements**

The planning and development of a 12-bed acute psychiatric facility into the existing floor plan of Edgemoor remains on-going. Licensure of this new acute unit will provide continuity of care and access for patients from the skilled nursing facility for stabilization. Edgemoor will be licensed as a distinct part skilled nursing facility of the new unit and will no longer be licensed under the San Diego County Psychiatric Hospital's license. Licensure will require approval by the California Department of Public Health (CDPH) and the Department of Health Care Access and Information.

A new nurse call system is currently being installed and should be completed by May 2024. During the transition, a temporary wireless call system will be installed to ensure continuity of operations.

The dish room reconfiguration and dishwasher replacement project has begun. A temporary dishwashing trailer was delivered on September 25, 2023. Once the trailer is fully operational and new workflow processes are in place, construction can begin. Project completion is estimated during the third quarter of fiscal year 2023/24.

The roof replacement project is ongoing, and completion is estimated by the end of November 2023.

Other upcoming facility projects include installation of nine electric vehicle charging stations; upgraded security cameras; relocation of the security guard desk to the entryway of the lobby; dietary ceiling tile replacement; cooling systems maintenance; and parking lot resurfacing.

### **Financial**

The public health emergency for the COVID-19 outbreak expired on May 11, 2023. Thus, effective May 12, 2023, the Medi-Cal COVID-19 increased reimbursement ceased, and reimbursement rates were reverted to the rate year 2022-23 annual per diem rates. For Edgemoor, this meant a drop in reimbursement from \$781.40 per patient day to \$724.44 per patient day. However, this will likely be somewhat offset by the annual Medi-Cal increase which is usually announced at the beginning of the year and retroactive to August 1<sup>st</sup> of the prior year.

The current private pay rate of \$908.00 per patient day was effective July 1, 2023, although Edgemoor generally has very few, if any, private pay residents.

Effective January 1, 2024, the number of available Medi-Cal Managed Care Plans (MCPs) in San Diego County is decreasing from six to four. Available plans will be Blue Shield of CA Promise Health Plan, Community Health Group (CHG) Partnership Plan, Molina Healthcare of CA, and Kaiser Permanente. This will affect approximately 28 Edgemoor residents who will be reassigned or enrolled into one of these Medi-Cal MCPs.

### **Resident Occupancy**

Occupancy remains with almost all the 160 available beds filled (32 beds are offline due to upcoming construction). The average occupancy for this fiscal year is 97% of available beds.

### **Recruitment, Performance Evaluations and Human Resources Update**

Edgemoor continues to focus on filling new and open positions. Edgemoor has a total of 371 County positions, counting six new positions which include: one (1) Assistant Director of Nursing; two (2) Supervising Nurses; one (1) Inservice Educator; and two (2) Quality Assurance Specialists.

Service awards were recently provided to 13 employees with five years of service, four employees with 10 years of service, two employees with 15 years of service, two employees with 20 years of service, one employee with 25 years of service, and one employee with 30 years of service, highlighting the commitment of our staff to our patients and public service.

## **SAN DIEGO COUNTY PSYCHIATRIC HOSPITAL (SDCPH) UPDATES**

### **Leadership Change | Welcoming Marjorie (Marjie) Halverson as our newest member of the clinical leadership team, and as the Recreation Therapy Supervisor for SDCPH.**

Marjie joined SDCPH in 2019 as a Recreational Therapist. In that role, she served as a direct care provider on several acute care and long-term care treatment teams, specializing in music therapy-based interventions, collaborating with other disciplines, and elevating evidence-based programming for all patients. Marjie is a Culture of Safety Coach, aiding in improving safe work practices and creating a positive work culture. She is also a member of the Risk Event Task Force where risk mitigations are driven by line staff.

Marjie holds a bachelor's degree in music education and music therapy from Wartburg College and has maintained Board Certification as a Music Therapist since 2013. Marjie completed her undergraduate degree in Waverly, Iowa, and moved to San Diego in 2012 to complete her clinical internship at the Music Therapy Center of California. Since moving to San Diego, Marjie has worked in a variety of settings, including six years as an Adjunctive Therapist at Aurora Behavioral Healthcare. When not at work, Marjie enjoys relaxing at home with her partner, their two cats, traveling, and going on outdoor adventures.

### **Mental Health Awareness**

SDCPH continues to invest in promoting a culture of safety through hosting several activities surrounding self-care, colleague comradery, laughter, and improved work health happiness. Some activities have included sessions through the Employee Assistance Program (EAP) on-site and Spirit of Fun events.

### **Development**

SDCPH continues to host a Leadership Council facilitated by the Hospital Administrator and Director of Nursing. The goal is to grow future leaders through enhanced communication strategies, confidence-building, and strategic growth development. The series includes team building, identifying leadership philosophies, and developing a clear vision in their leadership journey. SDCPH has also started a formalized charge nurse training to add to developing nursing leadership while working with highly acute cases in both emergency services and inpatient treatment. The nursing department has begun developing a shared governance within the hospital which is threaded to Health and Human Services Agency (HHSA) Nursing shared governance. SDCPH and BHS leadership gathered at the hospital for a Safety Summit which focused on identifying risk issues and developing creative strategies to mitigate the risks. It was an honor to have BHS Leadership team up with hospital leadership to work towards building safer working strategies for staff.

## **BHS SPECIAL EVENTS AND ANNOUNCEMENTS**

### **CalAIM and Substance Use Residential Programs Update**

BHS is committed to supporting mental health and substance use contractors in successfully transitioning toward a value-based care model that is sustainable, improves client care and outcomes, and expands network capacity to improve access to care for those in need. To that end, the County will commence implementation of California Advancing and Innovating Medi-Cal (CalAIM) initiative for residential substance use programs effective November 1, 2023.

CalAIM is a state initiative designed to improve the quality of life and health outcomes of Californians through delivery system, program, and payment reforms across Medi-Cal. These changes include a shift from the existing cost-reimbursement methodology to a fee for service payment structure.

Following the most recent procurement for substance use residential services, the County increased contracted capacity by adding 16 withdrawal management beds and 21 substance use residential

treatment beds, bringing our current contracted capacity to 1,091 substance use residential treatment beds, with 82 of those being dedicated to withdrawal management. Future requests for proposals will seek to further increase capacity for substance use residential treatment beds, as well as withdrawal management beds within the system of care.

### **CARE Act Program**

BHS has officially rolled out the much-anticipated Community Assistance, Recovery and Empowerment (CARE) Act program, with the program going live on October 1, 2023, as part of the state's phase one implementation. In collaboration with County and community partners, the CARE Act program creates a new pathway to deliver mental health and substance use services to individuals who are diagnosed with schizophrenia or other psychotic disorders and are not engaged in treatment.

Families, clinicians, first responders, and others may begin the process by filing a petition with the civil court to connect people (ages 18+) to court-ordered voluntary treatment if they meet criteria and would benefit from the program.

The CARE Act team is excited to collaborate with our mental health and substance use disorder providers, as well as our judicial and housing partners to connect CARE Act program participants to identified services.

For more information on the CARE Act program, please visit BHS's webpage:

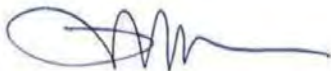
[https://www.sandiegocounty.gov/content/sdc/hhsa/programs/bhs/CARE\\_act\\_program.html](https://www.sandiegocounty.gov/content/sdc/hhsa/programs/bhs/CARE_act_program.html).

### **New Programs – Outpatient Services**

Three (3) Biopsychosocial Rehabilitation (BPSR) programs were established through a recent Request for Proposal (RFP) and services at these programs will include expansion of walk-in hours and mobile outreach. The target population for these programs are residents of San Diego age 18 or older who have serious mental illness (SMI), including those who may have co-occurring substance use. The three programs will serve: the Central Region focusing on Latino populations, and the East and North Central Regions focusing on Asian Pacific Islander populations. Services at the designated outpatient mental health clinics will include urgent walk-in services, Transition Age Youth (TAY) specific services for persons age 18-25, supported employment services, mobile outreach team, and older adult services. The BPSR programs expect to annually serve 2,772 unduplicated clients.

Ten new Opioid Treatment Program (OTP) contracts totaling \$160 million were awarded as a result of recent procurements. Services, which include medication-assisted treatment (MAT), case management, and ancillary services to adults and youth who have been diagnosed with an opioid-use disorder, will be available countywide with available treatment slots expanded by 150 to 4,885 total. As a result of the procurements, Recovery Residence funding and youth services were expanded to be available at all OTPs.

Respectfully submitted,



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

c: Eric C. McDonald M.D., Interim 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, Chief Strategy and Finance Officer

# Youth Services Survey (YSS)

## Feedback from Families and Youth

### County of San Diego Health & Human Services Agency

The purpose of the survey is to gather anonymous feedback from parents/caregivers and youth ages 13 and older receiving county mental health services in an effort to make improvements in the Children, Youth & Families Mental Health System of Care.

*Thank you for participating and for your valuable feedback!*

*Please note that these are system summary results and may or may not apply to your program.*

#### What is the YSS?

The YSS is a state-mandated survey that rates client and parent/caregiver satisfaction with services and perception of outcomes using a 5-point scale (strongly disagree to strongly agree).

There are four sections of the survey:

1. Fifteen satisfaction questions
2. Seven outcomes questions
3. Four support questions
4. Open comments

The survey that took place during the week of May 15-19, 2023 was administered both online and in-person.

#### What do we do with your feedback?



Program monitors at the Behavioral Health Services Administration review feedback and data, and engage in follow-up with the programs.

The survey is administered once or twice a year, and program monitors use the data to identify trends.

Your anonymous comments and feedback are converted to uniform text format and are returned to the programs in an effort to make improvements in the system. The comments do not have any identifiers.

#### May 2023 Survey Response

More than 2,500 surveys were submitted from approximately 70 programs. Some surveys did not have enough information filled out. More than 1,800 surveys had enough information to review.

Surveys are not given to clients in crisis or in inpatient settings.

**Parent/caregiver: 1,082 surveys**

**Youth: 730 surveys**

#### Key Findings

- ◆ Overall satisfaction with services remained high for both youth (90%) and parents/caregivers (94%).
- ◆ Satisfaction varies by client and program.
- ◆ Parents/caregivers are more satisfied overall with behavioral health services than youth are.
- ◆ Youth receiving residential services are least satisfied, as compared to youth receiving other services like outpatient therapy.

#### Areas For Improvement

- ◆ 8% of youth reported they did not have a voice in the selection of services they received.
- ◆ 14% of parents/caregivers and 19% of youth did not agree or were not sure if they got as much help as they needed.
- ◆ 12% of youth reported that services did not improve their school or work performance.
- ◆ 9% of youth felt that services did not improve their family relationships.
- ◆ 16% of youth and 10% of parents/caregivers were not satisfied with their family life at the time they were surveyed.

#### Cultural Sensitivity

- ◆ 98% of caregivers and 92% of youth were satisfied with the cultural sensitivity of their providers and program staff.

#### Youth and Family Comments

What has been the most helpful thing about the services you/your child received?

*"Able to accommodate my work schedule and they are very caring for my child's well being."*

*"I like the privacy I get when going to my therapy appointment."*

*"Strategies, coping skills, and getting along better with others."*

*"Transparency in communication."*

What would improve the services here?

*"More resources for help when we leave, whether that be support groups or chat lines."*

*"A location closer to home or ability to have therapy at school."*

*"[I think] care coordinators need to be easier to contact."*

*"Extending the time/access to this resource."*

#### Where does this survey go after I complete it?

The research team at the Child and Adolescent Services Research Center (CASRC) is contracted to collect, review and report on the YSS.



# Youth Services Survey (YSS)

## Retroalimentación de Familias y Jóvenes

### County of San Diego Health & Human Services Agency

El propósito de la encuesta es para recopilar retroalimentación anónima de los padres/proveedores de cuidado y jóvenes de 13 años o más que reciben servicio de salud mental con el esfuerzo de hacer mejoramiento en los Niños, Jóvenes y Familias del cuidado del Sistema de Salud Mental.

¡Gracias por su participación y por su valiosa retroalimentación!

Por favor, tenga en cuenta que estos son los resultados del resumen del sistema y pueden o no aplicarse a su programa.

#### ¿Qué es el YSS?

El YSS es una encuesta de mandato estatal que clasifica la satisfacción del cliente y de los padres/proveedores de cuidado con los servicios y la percepción de los resultados utilizando una escala de 5 puntos (definitivamente en desacuerdo a definitivamente de acuerdo).

Hay cuatro sesiones de la encuesta:

- 1) Quince preguntas de satisfacción
- 2) Siete preguntas de resultados
- 3) Cuatro preguntas de apoyo
- 4) Comentarios abiertos

La encuesta que ocurrió durante la semana del 15 al 19 de mayo de 2023, se administró tanto en línea como en persona.

#### ¿Qué hacemos con su retroalimentación?



Los monitores del programa en la Administración de Servicios de Salud del Comportamiento revisan la retroalimentación y los datos, y participan en el seguimiento de los programas.

La encuesta se realiza una o dos veces al año, y los monitores del programa utilizan los datos para identificar las tendencias.

Sus comentarios anónimos y retroalimentación son convertidos a un formato de texto uniforme y se les regresa al programa con el esfuerzo de hacer mejoras al sistema. Los comentarios no tienen identificadores.

#### Respuesta de la Encuesta de Mayo 2023

Más de 2,500 encuestas fueron sometidas de aproximadamente 70 programas. Algunas encuestas no tenían suficiente información. Mas de 1,800 encuestas tuvieron suficiente información para repasar.

Las encuestas no se les da a clientes en crisis o hospitalizados.

##### Padres/Proveedores de Cuidado:

1,082 encuestas

Jóvenes: 730 encuestas

#### Descubrimientos Clave

- ◆ La satisfacción general con los servicios sigue siendo alta tanto para los jóvenes (90%) como para los padres y proveedores de cuidado (94%).
- ◆ La satisfacción varía por cliente y programa.
- ◆ Padres/proveedores de cuidado están más satisfechos en general con los servicios de salud mental que los jóvenes.

#### Área de Mejora

- ◆ 8% de los jóvenes reportaron que no tenían voz en la selección de los servicios que recibieron.
- ◆ 14% de los padres/proveedores de cuidado no estaban de acuerdo o no estaban seguros si recibieron la suficiente ayuda que necesitaban para su hijo/a.
- ◆ 12% de los jóvenes reportaron que los servicios no mejoraron su funcionamiento en la escuela y/o en el trabajo.
- ◆ 9% de los jóvenes sintieron que los servicios no mejoraron sus relaciones con familiares.
- ◆ 16% de los jóvenes y 10% de los padres/proveedores de cuidado no estaban satisfechos con su vida familiar en el momento de la encuesta.

#### Sensibilidad Cultural

- ◆ 98% de los proveedores de cuidado y 92% de los jóvenes estaban satisfechos con la sensibilidad cultural de sus proveedores y del personal del programa.

#### Comentarios de jóvenes y familias

¿Qué ha sido lo que más le ha ayudado de los servicios que usted y su hijo(a) recibieron?

"Capaces de adaptarse a mi horario de trabajo y les importa mucho el bienestar de mi niño."

"Me gusta la privacidad que tengo cuando voy a mi cita de terapia."

"Estrategias, habilidades de afrontamiento y llevarse mejor con los demás."

"Transparencia en la comunicación."

¿Que mejoraría los servicios aquí?

"Más recursos de ayuda para cuando nos vayamos, ya sean grupos de apoyo o líneas de chat."

"Una ubicación más cercana a casa o la habilidad de tener terapia en la escuela."

"[Creo que] los coordinadores de cuidados deben ser más fáciles de contactar."

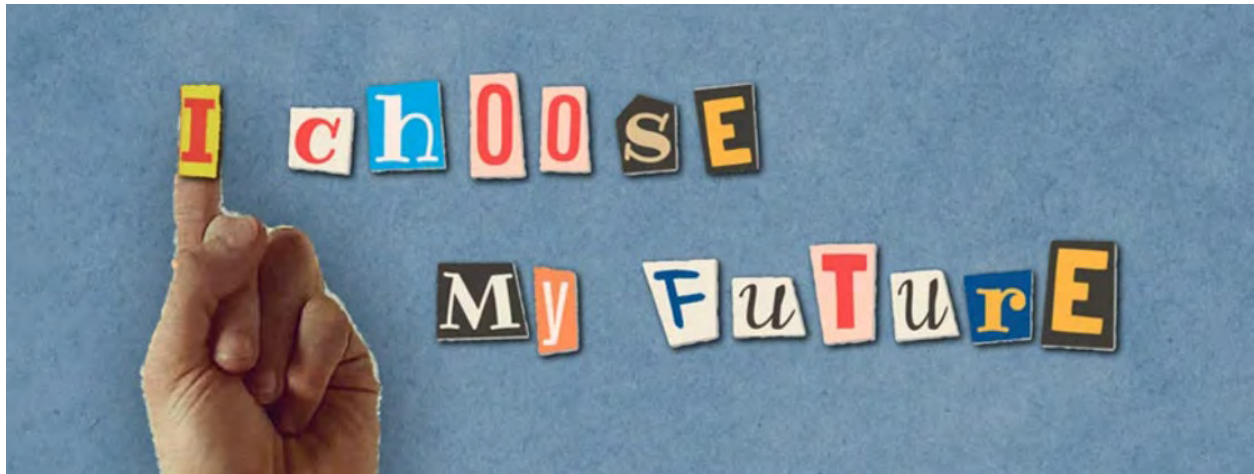
"Extender el tiempo/acceso a este recurso."

#### ¿A dónde va esta encuesta después de que la complete?

El equipo de investigación del Centro de Investigación de Servicios para Niños y Adolescentes (CASRC) está contratado para recopilar, revisar e informar sobre el YSS.







Topics addressed in the I Choose My Future presentation and videos include:

- How the drug landscape has changed
- The societal impacts of drug abuse
- The science of addiction, teen brain development, and the Impact drugs can have on teens
- How to identify potentially harmful drugs
- A closer look at vaping, marijuana, and nicotine
- The dangers of opioids and fentanyl

[I Choose My Future Instruction Guide | Post \(sdcoe.net\)](#)

## ***I Choose My Future Presentation Request***

[I Choose My Future Presentation Request \(sdcoe.net\)](#)



## **Nominate an individual and or a program!**

Each year, the **Children, Youth and Families (CYF) System of Care Training Academy Committee** presents the **Advancing Principles Award** to an individual and program. Award recipients exceptionally demonstrate the following CYF

System of Care Principles:

**Collaboration of Four Sectors**  
**Integrated**  
**Child, Youth and Family Driven**  
**Individualized**  
**Strength-Based**  
**Community-Based**  
**Outcome Driven**  
**Culturally Competent**  
**Trauma Informed**  
**Persistence**

Award recipients will be recognized at an upcoming CYF Council meeting.

Submit a nomination form:

[Children, Youth and Families System of Care 2023 Advancing Principles Recognition Form \(smartsheet.com\)](https://smartsheet.com)

Please submit nominations by **December 15, 2023**

For additional information, please contact Edith Mohler at:  
[Edith.Mohler@sdcounty.ca.gov](mailto:Edith.Mohler@sdcounty.ca.gov)

# COMMUNITY ADVOCACY TRAINING!

## *Telling Your Story!*

*Learn how to transform  
passion and lived  
experience into skillful  
grassroots advocacy!*



## Training Date:

Wednesday, November 15th

1:30 PM - 3:30 PM

*Click the Date to Register*

*Or Email [CommunityAdvocacy@namisd.org](mailto:CommunityAdvocacy@namisd.org)!*



Community  
Advocacy  
Program



NAMI SAN DIEGO & IMPERIAL COUNTIES



Every 11 minutes,  
someone loses their life to suicide.  
A mental health crisis  
deserves a mental health response.



Local Crisis Hotlines  
& Call Centers



Mobile Crisis  
Response Teams



Crisis Stabilization  
Units & Options

## COMMUNITY ADVOCACY TRAINING: REIMAGINING CRISIS RESPONSE

This training covers 988, mobile crisis response teams, PERT, local resources, and more! Virtual on Zoom!

### Upcoming Trainings:

Wednesday, 11/8 - 2:00 PM - 4:00 PM

Wednesday, 11/29 - 2:00 PM - 4:00 PM



11/8



11/29

Register at [CommunityAdvocacy@namisd.org](mailto:CommunityAdvocacy@namisd.org)

**SAVE THE DATE**

**2023 Western States  
Marijuana Summit**

**November 14 – 15, 2023**

*Virtual Only*

**National Overdose Prevention  
Leadership Summit**

**November 16 – 17, 2023**

*Virtual Only*

*Conference line ups and registration links will  
be sent out soon.*

*No registration cost for either summit.*



PHI CENTER FOR  
**HEALTH  
LEADERSHIP  
& IMPACT**



SAN DIEGO COUNTY  
SUBSTANCE USE AND  
OVERDOSE PREVENTION  
TASKFORCE





# Birth of Brilliance:

## Don't Just Think...Feel

Virtual Conference | Thursday Feb. 29th 2024

In-Person Cultural Fair | Friday, March 1st, 2024

All children are born with brilliance, which according to Websters Dictionary means, intense brightness of light, vividness of color; and exceptional talent or intelligence.

Imagine a world where every child's brilliance is acknowledged and nurtured from birth. Racial inequity flies in the face of this brilliance and it is our responsibility to rewrite the narrative.

The conference is focused on children, youth and their families. Building on the success and energy of our inaugural event, the committee is excited to present the fourth annual virtual Birth of Brilliance Conference on Feb. 29, 2024. The focus remains on raising awareness about the effects of racial disparities and implicit bias in mental health, social services, developmental services, education, medical care and juvenile justice.

Registration opens on Dec. 1. If you would like to get involved in Birth of Brilliance 2024 as a committee member, fiscal sponsor, by being or recommending a speaker, or if you have questions, please reach out to us at **birthofbrilliance@gmail.com**.

For a recap of the previous three years conferences, please visit the Birth of Brilliance YouTube channel with the QR code below!



Interested in presenting? Submit a proposal here!  
<https://tinyurl.com/BoBProp2024>





# Birth of Brilliance

Don't Just Think...Feel

Virtual Conference 2.29.24 | Cultural Fair 3.1.24

Are you EXCITED???!!! We are EXCITED!!!!

Meet our 2024 Birth of Brilliance Keynotes!!

If you would like to present alongside these powerful voices, there's still time to submit your proposal here!

<https://tinyurl.com/BoBProp2024>



Dr. Thema Bryant is the 2023 president of the American Psychological Association. Upon obtaining her doctorate in Clinical Psychology, she became the Coordinator of the Princeton University SHARE Program, which

works to combat sexual assault & harassment, & harassment based on sexual orientation. She currently directs the Culture and Trauma Research Laboratory at Pepperdine University, where her clinical and research interests center on interpersonal trauma and the societal trauma of oppression. Dr. Thema is one of the foundational scholars on the topic of the trauma of racism providing the keynote address on the topic at 2020 APA. She is the editor of the APA text Multicultural Feminist Therapy: Helping Adolescent Girls of Color to Thrive. Dr. Thema has raised public awareness regarding mental health by extending the reach of psychology beyond the academy and private therapy office through community programming and media engagement, including but not limited to Headline News, National Public Radio, and CNN.

Read about her amazing honors and learn more about her at her website, below!

<https://drthema.com/>



Jeff Duncan-Andrade, Ph.D., is Associate Professor of Raza Studies and Education at San Francisco State University. He is also the founder of the Roses in Concrete Community School, a community responsive lab school in

East Oakland ([www.rosesinconcrete.org](http://www.rosesinconcrete.org)), the Teaching Excellence Network ([www.10teaching.org](http://www.10teaching.org)) and the Community Responsive Education Group ([www.communityresponsive.org](http://www.communityresponsive.org)). As a classroom teacher and school leader in East Oakland for the past 24 years, his pedagogy has been widely studied and acclaimed for producing uncommon levels of social and academic success for students. Duncan-Andrade lectures around the world and has authored two books and numerous journal articles and book chapters on effective practices in schools. In 2015, Duncan-Andrade was tapped to be a Commissioner on the National Commission on Teaching & America's Future (NCTAF) and in 2016 was part of the great educators invited to the White House on National Teacher Appreciation Day by President Obama.

Get to know Dr. Duncan-Andrade more at his website, below!

<https://iseed.org/team/jeff-duncan-andrade-ph-d/>





Dr. Thema Bryant

<https://drthema.com/>



*Birth of Brilliance*

**Don't Just Think...Feel**



Dr. Jeff Duncan-Andrade

<https://iseed.org/team/jeff-duncan-andrade-ph-d/>

Virtual Conference 2.29.24 | In-person Cultural Fair 3.1.24

## 2024 Call for Proposals

Our 2023 theme was Be the Change. Our intention was to co-curate impactful voices that gave us tangible things to **DO** to be a part of the **CHANGE** and to raise the collective consciousness in ways that felt accessible to our diverse community. In the opening keynote, Dr. Shawn Ginwright reminded us that in order to create true healing and achieve social justice, equity, sustainable systemic change & liberation in the face of racism and other inequities, we are challenged not just to think our way through, but to feel our way through - and the words reverberated through our bodies. A few weeks later, on her social media, our 2023 closing keynote, Dr. Barbara Stroud, shared out, "Do not let your knowledge destroy your humanity," and we said...there it is again.

In all our efforts to create change in these top-down systems, we must not forget the power of healing relationship and the beauty and simplicity of connection that we can sometimes school and think ourselves away from. And we must do this work from a place of our own personal and collective healing, grounded in our own diverse bodies.

How do we maintain? Create sustainability? Grow community around these ways of being, that continue to nurture the "how" of how we show up for one another and the communities we serve? How do we use research and knowledge to create sustainable and community driven pathways for change? In whatever way this theme resonates for you, you are welcome to lean in.

**If you would like to speak alongside our Keynotes at our 2024 Birth of Brilliance Conference: Don't Just Think...Feel. Please submit a Call for Proposals (below)**

Check out more about our keynotes via their websites (above).

If you are on the fence or feeling nervous about submitting, we are here for you!!! Reach out!!!

We would love to support you in joining the BoB Speaker Family!!!

<https://tinyurl.com/BoBProp2024>

**Due 12/1/23**



QR Code: BoB 2021-2023 Memories | [www.birhofbrilliance.com](http://www.birhofbrilliance.com) | [birhofbrilliance@gmail.com](mailto:birhofbrilliance@gmail.com)



# CMHACY

California Mental Health Advocates  
for Children and Youth

CMHACY's 44th Annual Conference

## **Mental Health is Everyone's Business: Inclusive Conversations for Changing Times**

**Wednesday, May 15 – Friday, May 17, 2024**

**at**

**Asilomar Hotel and Conference Grounds**

**More info coming soon!**

[2024 Conference – CMHACY](#)