



General Meeting

November 17th, 2025 at 6:00pm

Virtual: <https://us02web.zoom.us/j/6851363919>

A G E N D A

1. Welcome/ Introductions
2. Approval of Minutes
 - a. [Minutes from October 2025](#)
3. PACER Update
4. Executive Committee Reports
 - a. President- Cipriano Vargas
 - b. Vice President- Rudy Lopez
 - c. Secretary- Elva Lopez-Zepeda
 - d. Treasurer- Dawn Perfect
 - e. Region 17 Director- Eleanor Evans
 - f. Legislative- Marla Strich
 - g. CIF- Dawn Perfect
5. Old Business
6. New Business/New Agenda items
 - a. Yael Koenig, County of San Diego Deputy Director for Behavioral Health Services
7. Other Reports
 - a. Communications- Sabrina Bazzo
 - b. Children's Mental Health- Barbary Ryan
 - c. SDCOE- Guadalupe Gonzalez
 - d. SD County Equity- Eleanor Evans
 - e. VEBA- Debra Shade
8. Adjournment

2025-2026 PROPOSED MEETINGS:

Aug 18th or 25th at 6:00pm (virtual)
Sep 22nd at 6:00pm (in-person)
Oct 20th at 6:00pm (in-person) ****moved to virtual**
Nov 17th at 6:00pm (virtual)
Dec 1st-Dec 2nd CSBA Delegate Assembly
Dec 3rd- Dec 6th – AEC, no regular meeting
Jan 26th at 6:00pm (in-person) ****MLK week prior**
Feb 23rd at 6:00pm (in-person) ****Prez Day week prior**
March – CSBA Virtual Legislative Action Day
Mar 16th – TBD
April 2024 13th-15th – Coast2Coast

Apr 20th – TBD
HOO on May, no regular meeting
May TBD – Delegate Assembly May, no regular meeting

For virtual meetings only:

Topic: SDCSBA Monthly Meeting

Join Zoom Meeting

<https://us02web.zoom.us/j/6851363919>

County of San Diego Behavioral Health Services Department Supporting Children & Youth

San Diego County School Board Association
November 17, 2025



SDCSBA Interest In...



What services are currently available under BHS

Topics of Interest: Mental Health and Wellness, Suicide Prevention, Crisis Response Services

As mental health needs rise, what is the county doing to expand services for children (short- & long-term plan)

How can Board Members and School Districts provide feedback

Opportunities to partner with County

Indicators of positive mental health are present in most children

National U.S. data from 2022-2023 show that:



Nearly 4 out of 5 children ages 6 months to 5 years (78%) exhibit all of 4 indicators of **flourishing**:

- 96% usually or always are affectionate and tender with parents or caregivers.
- 82% usually or always bounce back quickly when things do not go their way.
- 95% usually or always show interest and curiosity in learning new things.
- 99% usually or always smile and laugh.

3 out of 5 children ages 6 to 17 (60%) exhibit all of 3 indicators of **flourishing**:

- 83% usually or always show interest and curiosity in learning new things.
- 72% usually or always stay calm and in control when faced with a challenge.
- 80% usually or always work to finish tasks they start.

Data from youth tell us about mental health needs, substance use and suicide



Among US adolescents ages 12-17 in 2021-2023:

- 20% reported symptoms of **anxiety** in the past two weeks.
- 18% reported symptoms of **depression** in the past two weeks.

Among US high school students in 2023:

- 40% reported persistent feelings of **sadness** or **hopelessness** in the past year.
- 20% reported seriously considering attempting suicide in the past year.
- 16% reported making a suicide plan in the past year.
- 9% reporting **attempting suicide** in the past year.
- 22% report drinking **alcohol** in the past 30 days.
- 17% report using **marijuana** in the past 30 days.
- 4% report misusing prescription **pain medication** in the past 30 days.
- 10% report ever using **illicit drugs**.

Youth access care, but there are gaps



Using national data collected from adolescents during 2021-2023, in the past 12 months:

- More than half (55%) of U.S. adolescents reported discussing their mental and emotional health with a health care professional.
- 16% of adolescents reported taking any prescription medication to help with their emotions, concentration, behavior, or mental health.
- 20% of adolescents reported receiving mental health therapy.
- **20% of adolescents ages 12-17 reported having unmet mental health care needs.**

The Role of County BHS Department



Health
Plan



Public
Health



Contractor



Service
Provider



BHSA - Proposition 1



WHAT THIS MEANS

- Overall funding decreases by 5%
- Population-based prevention funding eliminated
- Reduces funding for general services and early intervention (combined) by 20%
- Eliminates population prevention funding from county level and transfers this to the state for a competitive grants program under CDPH
- Eliminates a stand-alone requirement for counties to fund Innovations
- Reduces funding for FSPs from 39% to 35% and adds new EBP to fidelity requirements for children and adult services
- Workforce funding moves through the state
- Adds housing (new 30% set-aside)
- Adds substance use disorders (new requirement)



Goals of BH-CONNECT

BH-CONNECT aims to:

Expand the continuum of community-based services and evidence-based practices (EBPs)

Strengthen family-based services and supports

Improve access, health outcomes, and invest in delivery system reforms

Strengthen the behavioral health workforce

Access federal funds for short-term stays in facility-based care

Support successful transitions to community-based care and reintegration

Promote improved health outcomes for individuals

Ensure stability for members going through vulnerable periods

Children-and-Youth-Initiatives

Medi-Cal HFW Concept Paper

PCIT (Parent-Child Interaction Therapy) International

FFT | Evidence-Based Interventions and Family Counseling

MST Services | Multisystemic Therapy for Juveniles

Places of Partnership



California Education Code section 49428.2 (2025)

The governing board of a local educational agency, before January 31, 2026, adopt a policy on referral protocols for addressing pupil behavioral health concerns in grades 7 to 12, inclusive. The policy shall be developed in consultation with school and community stakeholders and school-linked behavioral health professionals and shall address procedures relating to referrals to behavioral health professionals and support services.

California Education Code section 215.5 (2025)

A public school, including a charter school, that serves pupils in any of grades 7 to 12, inclusive, and that issues pupil identification cards may have printed on either side of the pupil identification card a quick response (QR) code that links to the mental health resources internes website of the county in which the school is located.

Student Wellness Resources



Tips to care for my
mental health



Help talking about
suicide



Text 988 to talk to
someone right now

Safe Spaces to Talk

- If you need help, you can call/text **9-8-8** or call **1-888-724-7240** to talk to someone who can help you find the right services. Trained counselors are there to help you anytime, day or night, in over 200 different languages.
- If you want to talk to someone your age, you can text or call a teen counselor at **Teen Line**. Call **800-852-8336** or text TEEN to 839863 between 6 to 10 p.m.
- **Soluna** (ages 13-25) and **BrightLife** (ages 0-13) are apps that can connect you to a coach for 1:1 counseling. It's confidential and free.
- **Mirror** is a free mental health journaling app for your thoughts and feelings. Write it, film it, or record it – it's all safe and secure.
- If you need a safe place to go, **drop-in centers** are available all around the county for LGBTQ+ youth for community and support.
- LGBTQ+ youth can call or **text** with a trained counselor from the **Trevor Project** if you just need someone to talk to or need support.
- **Family Urgent Response System (FURS)** gives support over the phone or in-person to current and former foster-involved youth up to age 21 – and their families too.

Student Wellness Resources

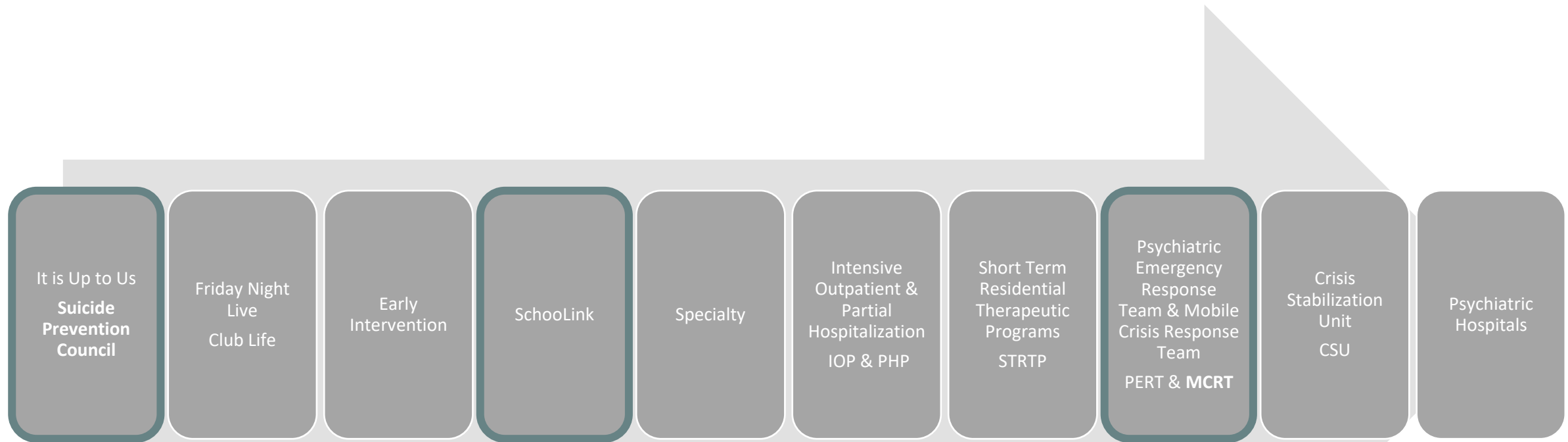


Other Resources

- Feeling stressed? Create a **Pause Plan** and find resources to manage your stress.
- Learn about Adverse Childhood Experiences (ACEs) and toxic stress and find ways to start healing through **Live Beyond ACEs!**
- Learn about how you can prevent drug overdoses for you and your friends at the **San Diego Opioid Project**.
- **You Are Never A Bother!** is a campaign designed by youth for youth and on how to support yourself or a friend who is having thoughts of suicide.
- **It's Up to Us** has resources on mental health, suicide prevention, alcohol and substance use.
- For more ways to support your mental health, check out the San Diego County Office of Education's **Teen Guide** (also available in **Spanish**).

Own Your Mindset San Diego | Strengthen Your Mental Health
Talk It Out SD

Sampling of Continuum



No Wrong Door - ACL (sandiegocounty.gov)

San Diego Access and Crisis Line (ACL) is a **988**
Suicide and Crisis Line Partner
7 days a Week 24 Hours a Day
(888) 724-7240

Children's Crisis Residential

Continuum of Care for Children & Youth



LIVE WELL
SAN DIEGO

CHILDREN & YOUTH BEHAVIORAL HEALTH SERVICES



LIVE WELL
SAN DIEGO

The County of San Diego's Behavioral Health Services (BHS) offers a multitude of programming to support children and youth who would benefit from mental health or substance use treatment.

Scan the QR Code below to access the:

- **Children, Youth, and Families Services Directory**
- **Five Regional School Directories**

https://bit.ly/cyf_directories



SCAN HERE

May 2024

SERVICIOS DE SALUD MENTAL PARA NIÑOS Y JÓVENES



Los Servicios de Salud Mental del Condado de San Diego ofrece una multitud de programas para apoyar a niños y jóvenes que se beneficiarían de un tratamiento de salud mental o por uso de sustancias.

Escanee el código QR para acceder a:

- **Directorio de Servicios Para Niños, Jóvenes y Familias**
- **Cinco Directorios Regionales de Escuelas**

https://bit.ly/cyf_directories



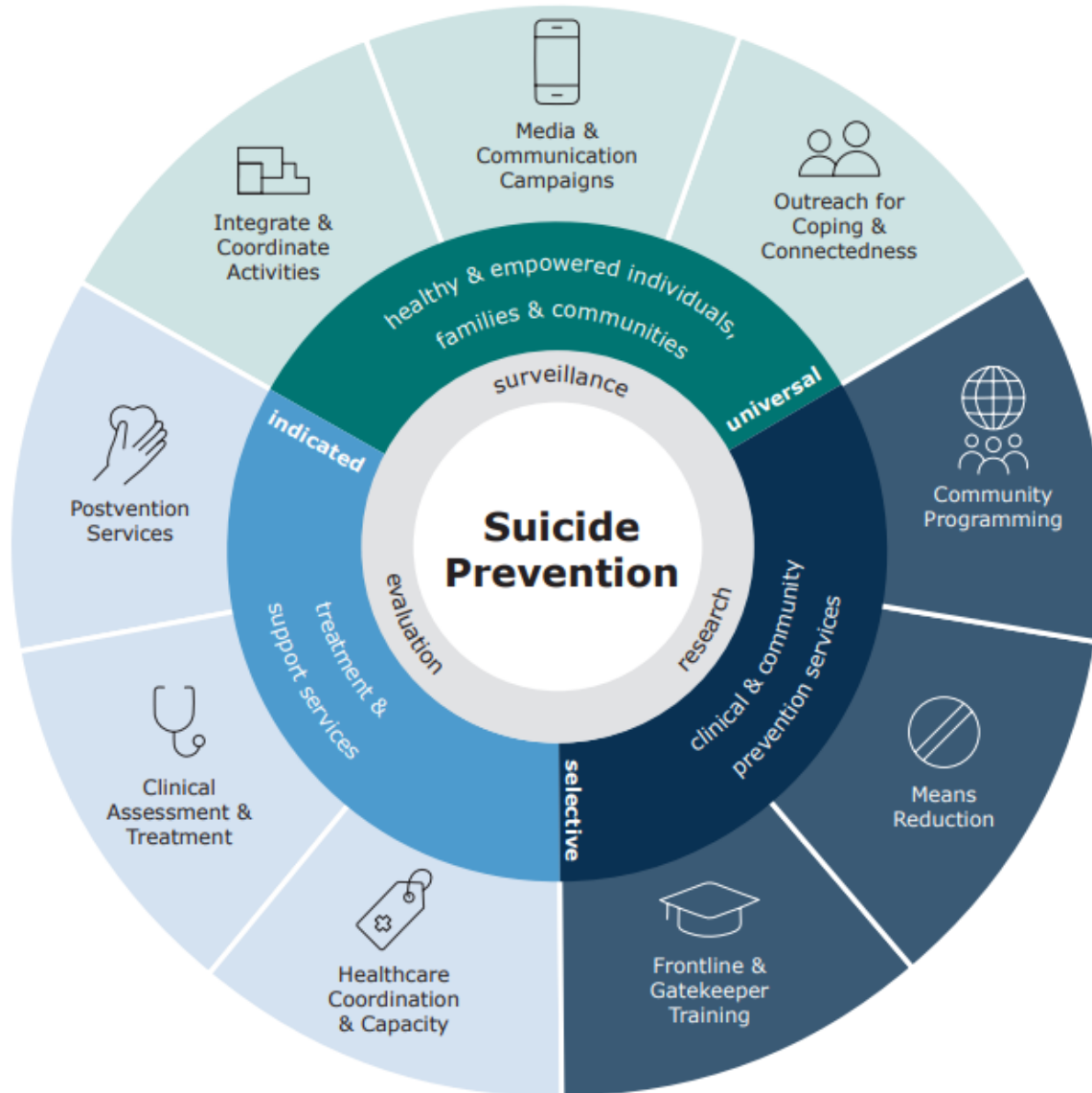
ESCANEA AQUÍ

Mayo 2024

Behavioral Health Services Directories for
Children, Youth, and Families

Suicide Prevention Council

Community Health Improvement Partners (CHIP)



Suicide-Prevention- Action-Plan Update 2024 - CHIP

Strategy Framework

Suicide Prevention Council

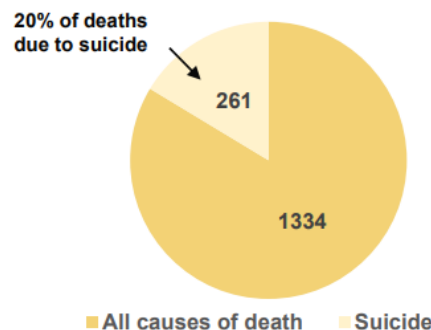
Community Health Improvement Partners (CHIP)



Suicide-Prevention-Council-Annual-Report-to-the-Community-2024.pdf

Suicide is a leading cause of death among youth, accounting for 20% of deaths among youth aged 10-24 in 2022. According to data from CDC Wonder, the County saw a decrease overall in the youth suicide mortality rate from 2013 to 2022, however recent mortality data from vital records indicates a slight increase in the rate for this age group [from 2022 to 2023](#). Additionally, emergency department (ED) encounter rates for [suicide attempt, intentional self-harm](#), and [suicidal ideation](#) have increased for youth in the last five years, with ED rates particularly high among female and Black youth ([Table 1](#)). This section of the report highlights suicide related data for youth, followed by a description of youth prevention programs and strategies.

San Diego County, Total Deaths and
% Suicide, Ages 10-24, 2018-2022



In 2022, the County's youth suicide rate **fell below** the state rate for the first time in five years. However, the national rate has generally increased since 2013.

Suicide-Prevention-Council-Annual-Report-to-the-Community-2024.pdf

California Healthy Kids Survey

Percentages of youth reporting suicidal ideation (SI) and chronic sadness/hopelessness have generally **increased since 2015-2017**, with Tables [2](#) and [3](#) highlighting differences among groups. Specifically, students who identified as **nonbinary; gay, lesbian, or bisexual; were two or more races**; or were living in a **foster home or homeless** reported higher percentages of SI and chronic sadness / hopelessness.

Youth Centered Messaging Campaigns

Own Your Mindset

Talk It Out SD

It's Up to Us

BrightLife Kids

Soluna

CalHOPE Home

Never a Bother

CHIP Training - Question, Persuade, and Refer

— **COPES Goals and Objectives** —

Suicide Prevention, Intervention, and Postvention

- Trainings for staff and families to increase awareness and knowledge
- Technical assistance in developing comprehensive protocols and practices
- Access to current tools, data, promising practices, and high quality resources

Mental Health Promotion and Stigma Reduction

- Trainings and resources to increase mental health literacy, create healthy help-seeking cultures, and cultivate staff, student, and caregiver wellness and resiliency
- Student programs, resources, and events to increase peer support skills

School Mental Health Referral Pathways

- Resource mapping, gap analysis, and process development
- Community resource identification and effective partnership building
- Coordination and collaboration between schools and mental health services

Creating Opportunities in Preventing and Eliminating Suicide (COPES)

San Diego County Office of Education



COPES July 2023 - June 2024 Highlights

Participating LEAs
represent over
440
schools
and over
290,000
students

100% of COPES districts and charters use an evidence-based suicide risk screening tool and have staff trained on suicide intervention

Training and Technical Assistance

SDCOE provided **27 trainings** to increase mental health literacy to:

1,205
COPES school/district staff
&
894
Parents/caregivers



Through capacity building efforts
COPES LEAs provided:

385 mental health and suicide prevention
trainings and events in their school
communities that engaged over...



33,300 Students
9,100 Staff
900 Parents/caregivers

MCRT Schools Fact Sheet



School call is
received by MCRT
dispatch center



Triage by MCRT
dispatch center



Appropriate
response team
is dispatched

How can MCRT help schools?

MCRTs can respond to behavioral health crisis calls in schools if there is no known threat of violence or medical emergency. Depending on the situation, MCRT can:

- Provide assessments
- Utilize crisis intervention and de-escalation techniques
- Initiate and transport a 5585* (5150) hold when there is a not a safety concern
- Make connections to appropriate behavioral health services and resources, provide initial coordination for treatment services as needed, and follow-up for up to 30 days after initial service

**A 72-hour psychiatric hold in a hospital when a minor is evaluated to be dangerous to themselves, others, or gravely disabled.*

If you are not sure what to do or what you need, call MCRT to consult a trained expert.



Scan for more information
or visit
sandiegocounty.gov/mcrt

**MCRT School Training
Video**

**Mental Health Supports -
San Diego County Office
of Education**
Recorded Webinar

11/6/24



Module 1: SchooLink Introduction

Module 2: Prevalence

Module 3: Access & Eligibility

Module 4: Annual School Meeting

Module 5: SchooLink Thresholds

Module 6: Referral, Screening, Assessment & Consent

Module 7: Treatment

Module 8: Teen Recovery Centers

Module 9: Best Practices

Module 10: Confidentiality

Module 11: Suicide & Self-Harm Response

Module 12: Psychiatric Crisis Response Teams

Module 13: School Threat

Module 14: Special Education

Module 15: Outreach & Engagement

Module 16: Add/Remove SchooLink or Change Provider Organizations

Module 17: San Diego County Office of Education

Module 18: Links to Resources

SchooLink San Diego

Manual with training modules that outline how school-based services are offered through partnerships between the County, School Districts and CBOs

DHCS Children & Youth Behavioral Health Initiative
Fee-Schedule

Proposition 1



Community Engagement

The combination of newly added responsibilities (e.g. required shift to housing, substance use disorder services, and evidence based practices to fidelity) and increased state control with less overall funding, will likely lead to fewer services for Californians.

A new level of transparency: In addition, Proposition 1 will require counties to report on and be held to a higher level of accountability for all funding sources: 1991 and 2011 realignment, BHSA, and other state and federal funding sources.

Other Proposition 1 Changes:

- Counties must coordinate with Medi-Cal managed care plans' population needs assessment and the county public health needs assessment.
- Counties will be required to expand the array of stakeholders consulted in the three-year plan to newly include:

- | | | |
|----------------------------------|---|--------------------------------|
| 1. Cities | 7. Child welfare agencies | 13. Area Agencies on Aging |
| 2. Public safety | 8. Tribal and Indian Health Program designees | 14. Disability insurers |
| 3. Higher education partners | 9. Labor representative organizations | 15. Continuums of care |
| 4. Early childhood organizations | 10. Independent living centers | 16. Local health jurisdictions |
| 5. Veterans | 11. Regional centers | 17. Health care service plans. |
| 6. County social services | 12. Emergency medical services | |

[MHSA to BHSA Changes](#) – CBHDA

[Community-Planning-Process-and-Local-Stakeholder-Engagement-Infographic](#) – DHCS

[3. County Integrated Plan](#) – DHCS Policy Guide

Behavioral Health Services Act



Community Planning

BHSA requires counties to look at their whole behavioral health system of care through a formal Community Planning Process (CPP). The CPP supports the County of San Diego's goal to involve communities in meaningful conversations and decision-making about local behavioral health services to ensure programs reflect their unique needs and voices.

Sign Up to Receive Updates

By providing your information, you are signing up to receive key information about the BHSA and updates about opportunities to provide input to help inform the BHSA Integrated Plan for Fiscal Years 2026–2029.

Share Input via Our Online Form

Access this online form to share insights and recommendations with BHS to help guide the development of San Diego County's first BHSA Integrated Plan for Fiscal Years 2026–2029.

Join Us in Upcoming Activities

View upcoming and past engagement activities hosted by the department, including community workshops, town halls, and input opportunities to help inform the BHSA Integrated Plan for Fiscal Years 2026–2029.

Sign-Up Form to Receive Updates

Behavioral Health Services Act Online Input Form

Engagement Activities

Engagement Activities



BHSA Input Session: Substance Use Disorder (SUD) Services

Held during Substance Abuse Awareness Month, this virtual session is open to the public and will be held on Wednesday, November 19, 2025, from 10:00am-11:30am. Input session questions will focus on prevention, treatment, and recovery supports that promote wellness and long-term recovery. [Click here to register!](#)



BHSA Input Session: Substance Use Disorder (SUD) Services

Held during Substance Abuse Awareness Month, this virtual session is open to the public and will be held on Wednesday, November 19, 2025, from 5:30pm-7:00pm. Input session questions will focus on prevention, treatment, and recovery supports that promote wellness and long-term recovery. [Click here to register!](#)



BHSA Input Session: Behavioral Health Workforce

Session is open to the public and will be held via Zoom on Wednesday, December 3, 2025, from 10:00am-11:30am. Join and participate in an input session focused on examining strategies to strengthen the behavioral health workforce — from recruitment and training to retention and well-being. [Click here to register!](#)



BHSA Input Session: Behavioral Health Workforce

Session is open to the public and will be held via Zoom on Wednesday, December 3, 2025, from 5:30pm-7:00pm. Join and participate in an input session focused on examining strategies to strengthen the behavioral health workforce — from recruitment and training to retention and well-being. [Click here to register!](#)



BHSA Input Session: Early Intervention

Session is open to the public and will be held via Zoom on Tuesday, December 9, 2025, from 10:00am-11:30am. Join and participate in an input session focused on early intervention, prevention, and youth mental wellness, before holiday school breaks. [Click here to register!](#)



BHSA Input Session: Early Intervention

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Behavioral Health Advisory Board (BHAB)



BHAB is a 20-member citizen board whose purpose is to review and evaluate San Diego County's behavioral health needs, services, programs, facilities, and procedures used to ensure citizen and professional involvement in the planning process.

BHAB is a state-mandated advisory board comprised of community members, behavioral health consumers and/or their family members, individuals in recovery from substance use, veterans, employees of a local education agency, and transition age youth to represent their diverse knowledge of behavioral health.

BHAB Meetings

1st Thursday of every month 2:30pm - 5:00pm

View [meeting information and materials.](#)

Attend In-Person

County Administration Center (CAC)

1600 Pacific Hwy., Room 302

San Diego, CA 92101

Attend Virtually - [Meeting Link](#) (Zoom)

Meeting ID: 893 8656 4768

Meeting Passcode: 262740

Dial-in by phone (US) : +1 669 444 9171

Discussion

Yael Koenig, Deputy Director
yael.koenig@sdcounty.ca.gov
619 252-0734

Behavioral Health Services

Amanda Garcia, Community
Outreach & Engagement
amandaa.garcia@sdcounty.ca.gov
619 228-4376

Connect with BHS

