



# CONTINUUM OF CARE UPDATE

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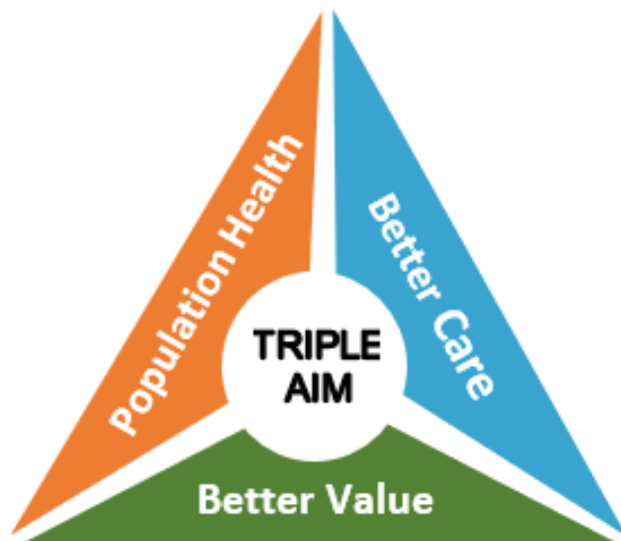
*February 4, 2021*



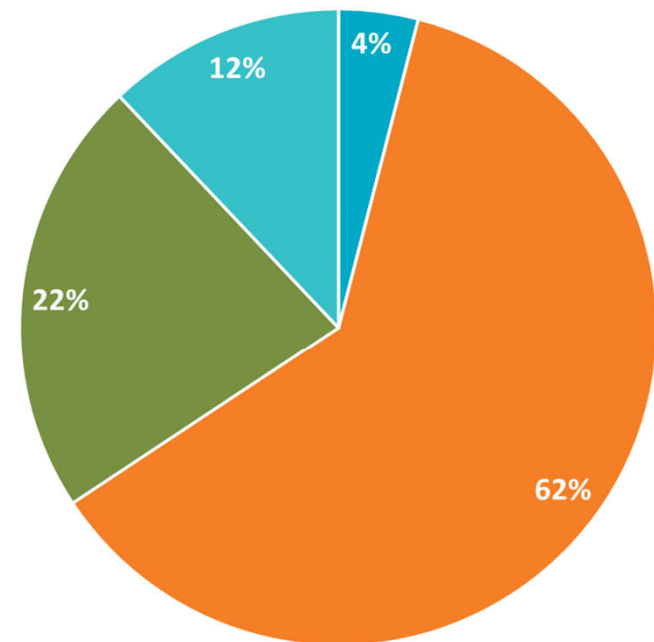
# Finance Overview



- Triple Aim approach
- Maintaining continuity of services



**FY 2020-21 Budget: \$778.5 Million**



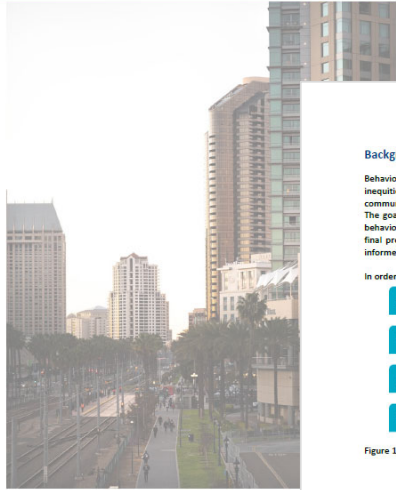
- BHS Admin
- Substance Use Disorder
- Mental Health
- County Hospitals

# Performance



- UCSD equity-oriented outcomes
- Value incentives
  - Crisis Stabilization Units (CSUs)
  - Inpatient care

**Community Experience Project**  
Identifying Behavioral Health Needs in San Diego County  
*PROPOSED METHODOLOGY*  
CASRC/HSRC, 12/29/2020



**Background & Summary**

Behavioral health is shaped by the environments in which people live, learn, work, and play. Health inequities are caused by disparities in access and opportunity. These disparities disproportionately affect communities of color, sexual minorities, those living in poverty, and other high risk and minority groups. The goal of the Community Experience Project is to develop a process to identify and address unmet behavioral health needs, and the systemic and regional inequities that lead to these unmet needs. The final product will promote a continuous feedback process by which issues can be identified, further informed by community engagement, and mediated by actionable plans (see Figure 1).

In order to accomplish this goal, a number of activities and objectives need to be completed:

- Objective 1** Create a "Behavioral Health Equity Index" to highlight populations and neighborhoods at greatest risk for unmet behavioral health need
- Objective 2** Develop the "Community Experience Dashboard," an interactive dashboard that allows users to investigate behavioral health experiences by subpopulation (e.g., race/ethnicity, sexual orientation, etc.) and subregional area using timely community data sources
- Objective 3** Engage community members and key stakeholders in the identification, collection, analysis and interpretation of data and in the development of plans for action
- Objective 4** Develop brief, focused "action reports" to synthesize key findings and summarize priorities for intervention

**Figure 1. Community Experience Process**



**Logos:** HHSa, LIVE WELL, CASRC, HEALTH SERVICES

# Staffing Plan



- Administrative staffing
  - Supporting value-oriented work
- Direct service staffing
  - Attrition due to direct service staff leave
  - Challenges recruiting qualified clinical staff
- 5-year Plan Staffing Requests
  - 23 nurses for San Diego County Psychiatric Hospital
  - 5 probation-funded positions



# Upcoming Program Changes



- Program changes reflect our drive to keep people in chronic and continuous care and out of crisis
  - Programmatic changes as a result of increased upstream investments
  - Efforts to uncover the real behavioral health need versus the visible demand

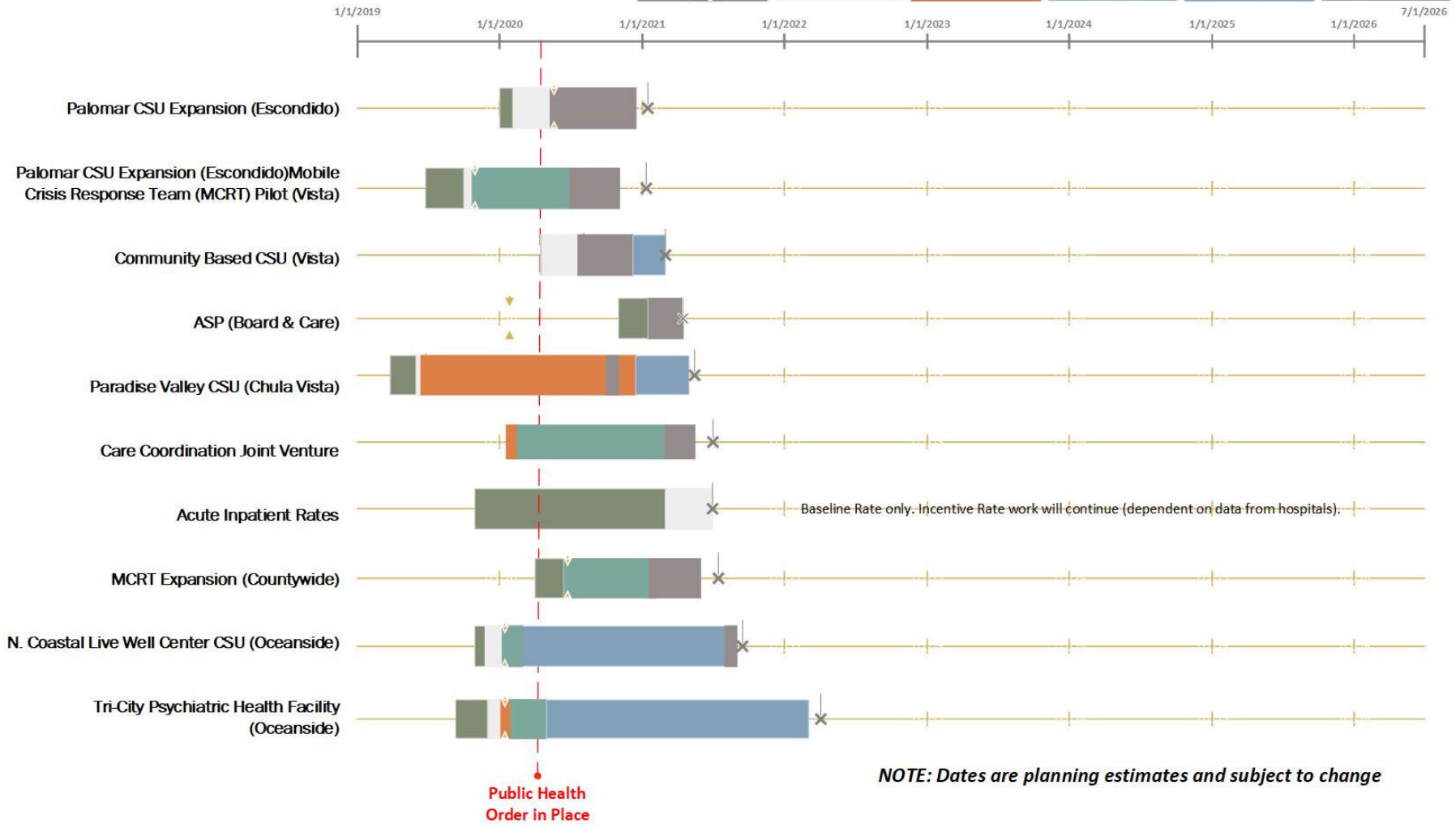
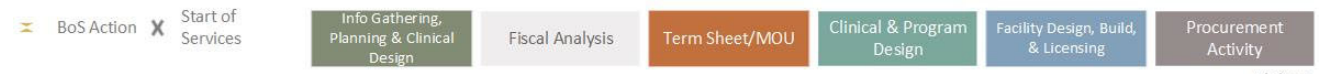
# Revenue Trends



- Budgetary uncertainty and the drive towards value
  - Maintain services and contracts without drastic changes
  - Prioritizing ongoing contract extensions and maintenance
- Policy opportunities
  - MHSA flexibility
  - CalAIM

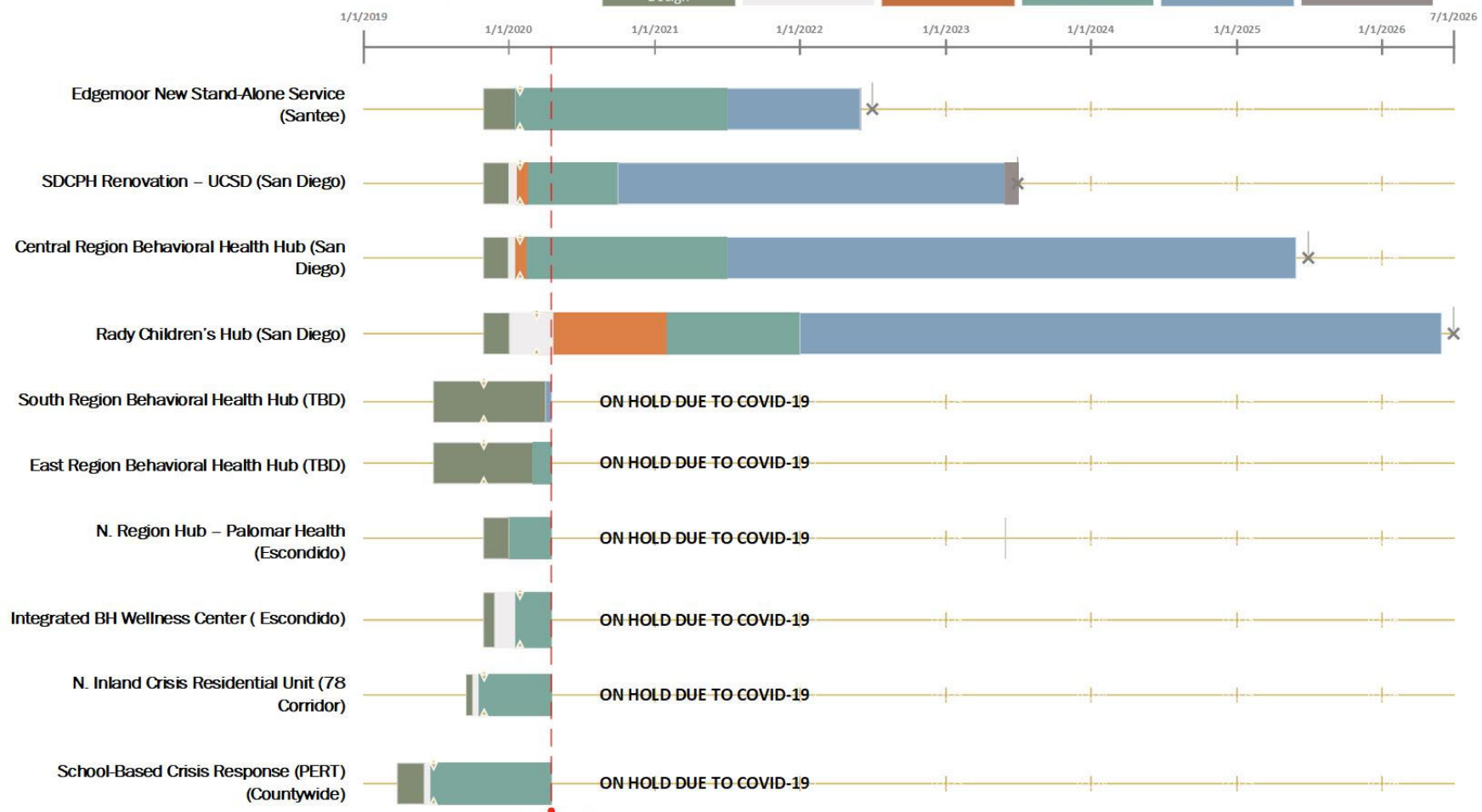
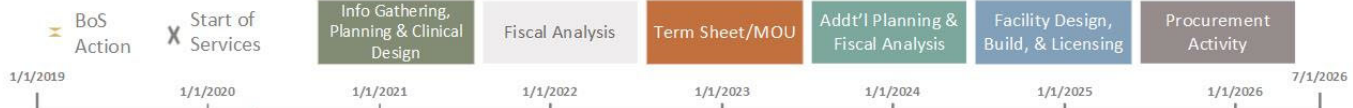
# COC ESTIMATED PROJECT TIMELINE

## LEGEND



# COC ESTIMATED PROJECT TIMELINE

## LEGEND



Public Health Order in Place

NOTE: Dates are planning estimates and subject to change