

# BEHAVIORAL HEALTH DASHBOARD INDICATORS

County of San Diego Behavioral Health Services

# SUBSTANCE USE SERVICES INDICATORS

2



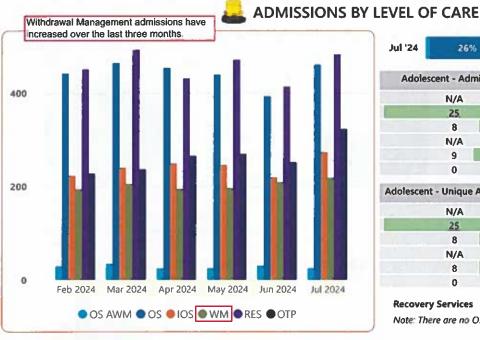
### **TOTAL ADMISSIONS**

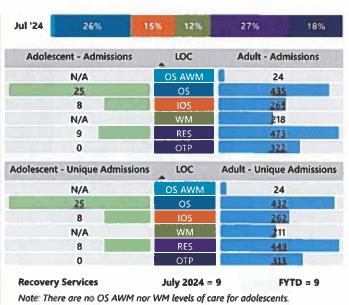
42



### **Current Trends** July '24 vs. July '23 +15.3% (1,788 vs. 1,551) July '24 vs. June '24 +16.3% (1,788 vs. 1,537) **July '24 Admissions** 1.746 Adolescent Adult **Annual Trends Admissions Average Per Month** Year

1,788 FY 2024-25 1,788 FY 2023-24 19.355 1,613





# CLIENT TRANSITIONS BY LOC - JUNE DISCHARGES WITH REFERRAL

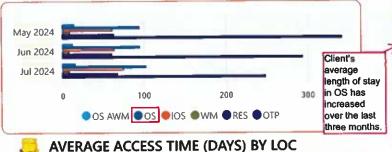
		Connected With	nin 0 to 10 Days	Connected With	hin 0 to 30 Days
10	OS .	70	95%	70	95%
N	/М	100	75%	110	83%
R	ES	112	50%	130	58%

All Discharges: 1,620 Discharges with Referral: 37% (603/1,620) Referred Discharges with 10 Day Connection: 48% (288/603) Referred Discharges without 10 Day Connection: 52% (315/603)

\*Note: Due to reporting requirement, data for client transitions by LOC and discharges reflect a two month delay. For OS and OTP level of care, referrals are typically to community support and maintenance, like self-help groups, which is not tracked in our data system.

	05 AWM - Outpatient		IOS AWM = Intensive	105 = Intensive Outpatient	WM = Withdrawal		OTP = Opig:d Treatment
REC = Recovery Services	Ambulatory Withdrawai Management	OS = Chapatient Services	Outpatient Ambulatory Withdrawal Management	Services	Management	RES - Residential Services	Program





LOC	Current Month	FYTD
OS AWM	16 Days	16 Days
OS	103 Days	103 Days
IOS	75 Days	75 Days
WM	9 Days	9 Days
RES	68 Days	68 Days
ОТР	249 Days	249 Days

# PERCENT OF CLIENT CONTACTS THAT MET ACCESS TIME STANDARDS BY LOC

roc	Current Month	FYTD	
<b>O</b> S	98%	98%	
IOS	95%	95%	
RES	97%	97%	
OTP	100%	100%	
Irgent (All)	91%	91%	
S/IOS AWM	92%	92%	
WM	90%	90%	

OS and IOS Access Compliance Time is 10 Business Days. Residential Access Compliance Time is 10 Calendar Days. OTP Access Compliance Time is 3 Calendar Days. OS/IOS AWM, WM, and URGENT Access

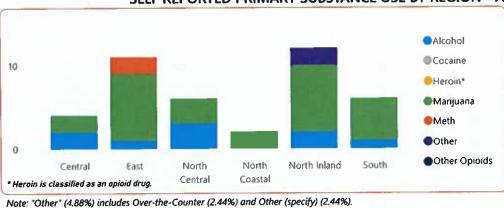
Compliance Time is 48 hours (2 Calendar days). Percent of admissions of adolescents who self reported

Average access time (days) for OS/IOS AWM and RES has decreased over the last four months and Urgent (All) has decreased over the last three months.

Mar 2024 Apr 2024 May 2024 Jun 2024 Jul 2024

OS OS RES OTP Urgent (All) OS/IOS AWM

SELF REPORTED PRIMARY SUBSTANCE USE BY REGION - ADOLESCENTS

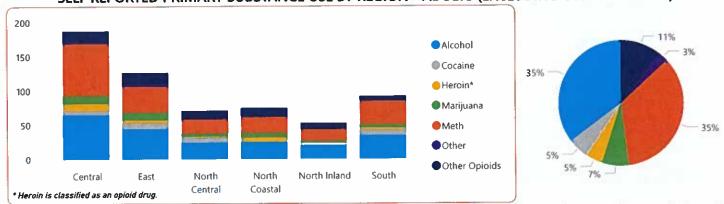




alcohol as primary substance use has increased over the

Percent of admissions of adolescents who self reported marijuana as primary substance use has decreased over the last three months.

# SELF REPORTED PRIMARY SUBSTANCE USE BY REGION - ADULTS (EXCLUDING OTP PROGRAMS)



When OTP programs are accounted for, the top three self reported primary substance use for all regions are Alcohol (28% - 230 admissions), Meth (26% - 213 admissions), and Other Opiates or Synthetics (26.4% - 220 admissions) of which Fentanyl accounts for most (24.7% - 206 admissions).

Note: Region is determined by the zip code of client residence at admission. "Other Opioids" (10.67% - 64 admissions) includes OxyCodone/OxyContin (0.50% - 3 admissions) and Other Opiates or Synthetics (10.17% - 61 admissions) of which Fentanyl accounts for most (9.33% - 56 admissions). "Other" includes Tranquilizers (e.g. Benzodiazepine), Other Sedatives or Hypnotics, Other Hallucinogens, PCP, Other Stimulants, Over-the-Counter, and Other (specify).



Calls to the ACL

Jul

Sep

Nov

# **MENTAL HEALTH SERVICES INDICATORS**





3,075

5,152

275

Increase Decrease

7%

-9%

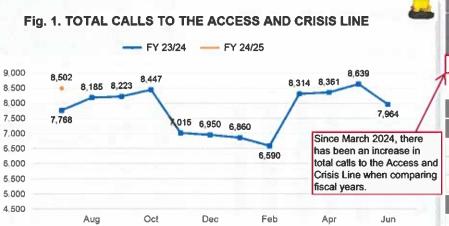
Total Unique

Clients

96

1,117

1,173



Jan

Mar

May

	Curre	nt Tre	<u>nd</u>	<u>S:</u>		0	
	Moi Com		Calls Count			% Increase Decrease	
	Jul 2024	Jul 202	3	8,502		7,768	9%
1	Jul 2024	Jun 202	24	8,502		7,964	7%
	Annual Trends			:	ì		
4	FY			Mean		Tot	tal Calls
	FY 24/	25		8,502			8,502
d	FY 23/24			7,776		9	93,316
9	FY 22/	23		7,190			36,274

soc

MH Access

**MH Crisis** 

SUD

400 — 300 200 —	408	398	350	382	373		367		044	347	373	372
300									341	341		
						311		305				-
200								-				-
100						- 177						

	Current Trends:							
		nths pared		nment unt	% Increase/ Decrease			
ſ	Jul 2024	Jul 2023	433	408	6%			
Ι,	Jul 2024	Jun 2024	433	372	16%			

Jul 2024

3,075

5,152

FY	Mean	Total Assignments
FY 24/25	433	433
FY 23/24	361	4,327
FY 22/23	421	5.057

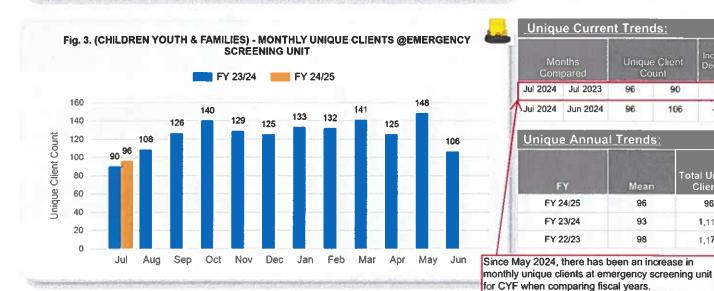
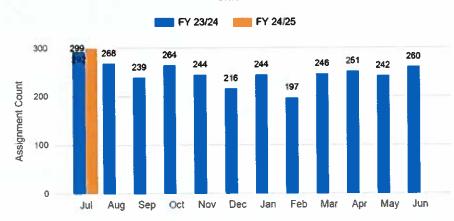








Fig. 4. (ADULT/OLDER ADULT) - INVOLUNTARY PATIENTS @EMERGENCY PSYCHIATRIC UNIT



Curre	Current Trends:							
	Months Compared		Assignment Count					
Jul 2024	Jul 2023	299	292	2%				
Jul 2024	Jun 2024	299	260	15%				

Annual Trends:							
FY	Mean	Total Clients					
FY 24/25	299	299					
FY 23/24	247	2,963					
FY 22/23	299	3,583					

Please Note: This data excludes assignments when a client's CSI Legal Status at admission is listed as either Voluntary (1A) or Unknown (9A).

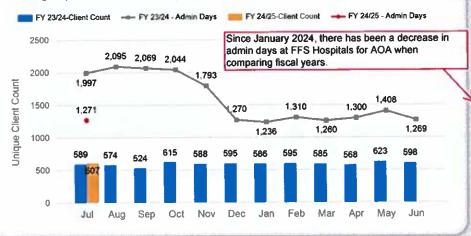
Unique Current Trends:

Jul 2024 Jun 2024

FY 23/24

FY 22/23

### Fig. 5. (ADULT/OLDER ADULT) - MONTHLY UNIQUE CLIENTS @FFS HOSPITALS



10000	Months Compared		Unique Co	% Increase/ Decrease	
ľ	Jul 2024	Jul 2023	607	589	3%
	Jul 2024	Jun 2024	607	598	2%
	Months (	Compared	Admir	Days	% Increase/ Decrease
١	Jul 2024	Jul 2023	1 271	1.997	-36%

1.271

Unique Annual Trends:						
FY	Mean	Total Unique Clients				
FY 24/25	607	607				
FY 23/24	313	3,756				
FY 22/23	313	3,750				

1,269

0%

# Fig. 6. (CHILDREN YOUTH & FAMILIES) - MONTHLY UNIQUE CLIENTS @IP FACILITIES



Since January 2023, there has been an increase in monthly unique clients at IP facilities for CYF when comparing fiscal years.

Months (	Compared		Client unt	// Increase/ Decrease
Jul 2024	Jul 2023	86	78	10%
Jul 2024	Jun 2024	86	100	-14%
Months (	Compared	Admir	n Days	% Increase Decrease
Jul 2024	Jul 2023	11	4	175%
Jul 2024	Jun 2024	11	3	267%
<u>Unique</u>	Annual_T	re <u>nds:</u>		
FY		Mean		al Unique Clients
FY 24	25	86		86
FY 23	124	59		710

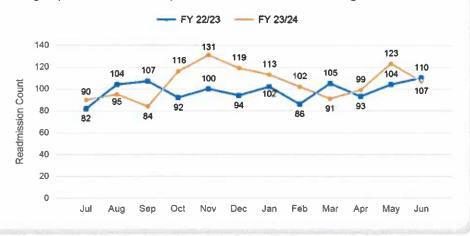
51 Please Note: Graph expanded from just FFS hospitals effective in July 2022.







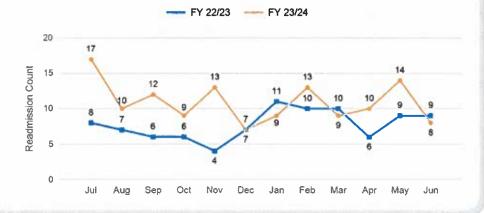
Fig. 7. (ADULT/OLDER ADULT) - READMISSIONS WITHIN 30 DAYS @FFS HOSPITALS



Curre	nt Trend	<u>s:</u>		
	nths pared		nission unt	% Increase/ Decrease
Jun 2024	Jun 2023	107	110	-3%
Jun 2024	May 2024	107	123	-13%

Annual Tre	nds:	
FY	Mean	Total Readmissions
FY 23/24	106	1,270
FY 22/23	98	1,179
FY 21/22	96	1,148

Fig. 8. (CHILDREN YOUTH & FAMILIES) - READMISSIONS WITHIN 30 DAYS @CYF INPATIENT HOSPITALS



Curre	nt_Trends	<u>s:</u>		
	nths pared		mission ount	% Increase/ Decrease
Jun 2024	Jun 2023	8	9	-11%
Jun 2024	May 2024	8	14	-43%

Annual Tren	nds:	
FY	Mean	Total Readmissions
FY 23/24	11	131
FY 22/23	8	93
FY 21/22	7	81

Please Note: Graph expanded from just FFS hospitals effective in July 2022.







Report graphs are currently being reviewed due to recent changes in some Case Management programs level of care determinations.	







Fig. 11. (Adult/Older Adult) - Average Mental Health Assessment Access Time



	Jul 2024		FYTD	
Response Type	Avg	%Made Standard	Avg	%Made Standard
FFS OP Routine	9,8	85%	9,8	85%
FFS OP Urgent	1.8	94%	1.8	94%
OP Routine	2.5	99%	2.5	99%

Note: The access time standard for routine mental health assessments is 10 business days. The standard is 48 hours for urgent requests. While the urgent requests are recorded in hours, they are converted to days on the chart.

Note: OP Urgent data has been excluded as BHS works to address data entry errors.

Fig. 12. (Adult/Older Adult) - Average Psychiatric Assessment Access Time



	Jul 2024		FYTD	
Response Type	Avg	%Made Standard	Avg	%Made Standard
FFS OP Routine	7.2	92%	7.2	92%
FFS OP Urgent	0.7	94%	0.7	94%
OP Routine	2.8	98%	2.8	98%

Note: The access time standard for routine psychiatric assessments is 15 business days. The standard is 48 hours for urgent requests. While the urgent requests are recorded in hours, they are converted to days on the chart.

Note: OP Urgent data has been excluded as BHS works to address data entry errors.

Fig. 13. (Children, Youth & Families) - Average Mental Health Assessment Access Time



	Jul	2024	F	YTD
Response Type	Avg	%Made Standard	Avg	%Made Standard
FFS OP Routine	13.7	83%	13.7	83%
FFS OP Urgent	2.5	89%	2.5	89%
OP Routine	14.2	86%	14.2	86%

Note: The access time standard for routine mental health assessments is 10 business days. The standard is 48 hours for urgent requests. While the urgent requests are recorded in hours, they are converted to days on the chart.

Note: OP Urgent data has been excluded as BHS works to address data entry errors.

Prepared By: Optum PS SD Data Source: CCBH, CMS, TRES Date: August 13, 2024 SD County Report: CO-24

# **PATHWAYS TO SUCCESS:** PEER SUPPORT CAREER **OPPORTUNITIES IN SAN** DIEGO



# **SPACE IS LIMITED**

Reserve your spot by scanning the QR code

A Job Fair & Workforce Education **Event Hosted by the County of San** Diego

September 13, 2024 9:00AM-4:30PM Southeastern Live Well Center



Your own lived experience in the justice system and recovery can help others and open potential career paths in:

- **Behavioral health**
- Social services
- Justice system
- Reentry services
- Community healthcare

This event offers a unique opportunity to connect with potential employers, learn new information, and hear success stories from peer specialists.

**Insightful Panels & Discussion** Learn from experts about peer specialist career opportunities in different fields with a special emphasis on working with justice-involved individuals.



# **Reentry Leadership Insights**

Gain insights from peers currently working in the reentry field.



## HR Roundtables & Mock Interviews

Receive tailored advice from hiring managers and enhance your interview skills through interactive sessions.



## **On-the-Spot Interviews**

Bring your resume and meet with different employers who are hiring for peer support positions.

You are encouraged to dress for success!

Complimentary snacks and lunch provided!

> FREE PARKING ONSITE ONE MINUTE WALK FROM EUCLID AVE TROLLEY STATION



Southeastern Live Well Center 5101 Market Street San Diego CA, 92114





Bill	Description	Position
Author		
AB.5 Gonzalez D	Worker status: employees and independent contractors. (Chaptered: 9/18/2019) Would state the intent of the Legislature to codify the decision in the Dynamex case and clarify its application. The bill would provide that for purposes of the provisions of the Labor Code, the Unemployment Insurance Code, and the wage orders of the Industrial Welfare Commission, a person providing labor or services for remuneration shall be considered an employee rather than an independent contractor unless the hiring entity demonstrates that the person is free from the control and direction of the hiring entity in connection with the performance of the work, the person performs work that is outside the usual course of the hiring entity's business, and the person is customarily engaged in an independently established trade, occupation, or business. The bill, notwithstanding this provision, would provide that any statutory exception from employment status or any extension of employer status or liability remains in effect, and that if a court rules that the 3-part test cannot be applied, then the determination of employee or independent contractor status shall be governed by the test adopted in S. G. Borello & Sons, Inc. v. Department of Industrial Relations (1989) 48 Cal.3d 341 (Borello). The bill would exempt specified occupations from the application of Dynamex, and would instead provide that these occupations are governed by Borello.  Status: 9/18/2019 - Approved by the Governor. Chaptered by Secretary of State - Chapter 296, Statutes of 2019.	8. Watch
AB 333 Eggman D	Whistleblower protection: county patients' rights advocates. (Chaptered: 10/2/2019) Current law relating to mental health advocacy requires each local mental health director to 8. Watch appoint, or contract for the services of, one or more county patients' rights advocates to perform prescribed duties. Current law prohibits the knowing obstruction of a county patients' rights advocate in the performance of the advocate's duties. This bill would establish similar whistleblower protections specifically for county patients' rights specifically for county patients' rights advocates.  Status: 10/2/2019 - Approved by the Governor. Chaptered by Secretary of State - Chapter 423, Statutes of 2019.	8. Watch
AB 819 Stone, Mark D	Foster care. (Chaptered: 10/12/2019) Current law requires foster family agencies to prepare a written report on an applicant's capacity to foster, adopt, and provide legal guardianship of a child based on information gathered through the resource family application and assessment processes, and requires counties and foster family agency or transfer of their approval to a county, to request or provide the above-specified written report, including any updates to the report, to request or provide documents in the resource family agency or transfer of their approval to a county, to request or provide documents in the resource family file maintained by a county or the resource family case record maintained by a foster family agency, including any updates to the file or record.  Status: 10/12/2019 - Approved by the Governor. Chaptered by Secretary of State - Chapter 777, Statutes of 2019.	8. Watch
AB 984 Lackey R	Personal income taxes: voluntary contributions: Suicide Prevention Voluntary Tax Contribution Fund. (Chaptered: 10/2/2019) Would allow a taxpayer to designate an amount in excess of personal income tax liability to be transferred into the Suicide Prevention Voluntary Contribution Fund, which the bill would create. The bill would require the Franchise Tax Board to revise the tax return to include a space for this fund when another voluntary contribution designation is removed or space becomes available, whichever occurs first. The bill would require the fund to meet an annual minimum contribution amount of \$250,000, as specified.  Status: 10/2/2019 - Approved by the Governor. Chaptered by Secretary of State - Chapter 445, Statutes of 2019.	8. Watch
AB 1004 McCarty D	Developmental screening services. (Chaptered: 9/30/2019) Would require, consistent with federal law, that screening services provided as an EPSDT benefit include developmental screening services for individuals zero to 3 years of age, inclusive, and would require Medi-Cal managed care plans to ensure that providers who contract with these plans render those services in conformity with specified standards. The bill would require the State Department of Health Care Services to ensure a Medi-Cal managed care plan's ability and readiness to perform these developmental screening services, and to adjust a Medi-Cal managed care plan's capitation rate.  Status: 9/30/2019 - Approved by the Governor. Chaptered by Secretary of State - Chapter 387, Statutes of 2019.	8. Watch
AB 1085 McCarty D	After school programs: substance use prevention: funding: cannabis revenue. (Vetoed: 10/7/2019) Current law establishes the After School Education and Safety Program under 8. Watch which participating public schools receive grants to operate before and after school programs serving pupils in kindergarten or any of grades 1 to 9, inclusive. The After School Education and Safety Program requires each program component to consist of an education and literacy element and an educational enrichment element, as specified. This bill would	8. Watch

AB 2805 Ju Eggman D pi ta bu	AB 2746 Fu Gabriel D re Su Su Su Su Su Su Su Su Su Su Su Su Su	AB 2741 CI Rubio, se Blanca D to th	AB 1544 CO Gipson D Err to to	AB 1454 Tr. Jones- Sawyer D ap	AB 1287 UI Nazarian D as fo as	AB 1235 Yo Chu D yo ho	8 8
Juveniles: reunification. (Chaptered: 9/30/2020) Current law prohibits a court from ordering reunification services when the child was under 5 years of age and suffered severe physical abuse by a parent or guardian unless the court finds, based on competent testimony, that the services are likely to prevent reabuse or continued neglect of the child or that failure to try reunification will be detrimental to the child because the child is closely and positively attached to that parent. This bill would instead require the court to make that finding based on competent evidence.  Status: 9/30/2020 - Approved by the Governor. Chaptered by Secretary of State - Chapter 356, Statutes of 2020.	Funding accountability: state funding for homelessness. (Vetcoed: 9/29/2020) Would require a recipient, as defined, that receives state funds for specified CalWORKs programs related to homeless assistance, the Housing and Disability Income Advocacy Program, or state funds appropriated in the Budget Act of 2019 for a Whole Person Care pilot program, to submit a report containing specified information regarding the use of state funds to the appropriate agency. The bill would require the recipient to submit that report on a form and method provided by the agency annually.  Status: 9/29/2020 - Vetoed by Governor.	Children's advocacy centers. (Chaptered: 9/30/2020) Would authorize a county, in order to implement a multidisciplinary response to investigate reports involving child physical or sexual abuse, exploitation, or maltreatment, to use a children's advocacy center that includes representatives from specified disciplines and provides dedicated child-focused settings for interviews and other services. The bill would authorize members of a multidisciplinary team associated with a children's advocacy center to share with each other information in their possession concerning the child, the family of the child, and the person who is the subject of the abuse or neglect investigation, as specified. The bill would exempt an employee or designated agent of the center from liability under specified circumstances.  Status: 9/30/2020 - Approved by the Governor. Chaptered by Secretary of State - Chapter 353, Statutes of 2020.	Emergency Medical Care Personnel Act until January 1, 2024, the Community Paramedicine or Triage to Atternate Destination Act. (Chaptered: 9/25/2020) Would establish within the Emergency Medical Services System and the Prehospital Emergency Medical Care Personnel Act until January 1, 2024, the Community Paramedicine or Triage to Atternate Destination Act of 2020. The bill would authorize a local EMS agency to develop a community paramedicine services. The bill would require the authority to develop, and after approval by the Commission on Emergency Medical Services, adopt regulations and establish minimum standards for the development of those programs. The bill would require the director of the authority, on or before March 1, 2021, to establish a community paramedicine and triage to alternate destination oversight advisory committee to advise the authority on the development and oversight of specialties for those programs.  Status: 9/25/2020 - Approved by the Governor. Chaptered by Secretary of State - Chapter 138, Statutes of 2020.	Trauma-informed diversion programs for youth. (Chaptered: 10/8/2019) Would, commencing with the 2019–20 fiscal year and thereafter, additionally authorize grants to be awarded to nonprofit organization applicants to administer the diversion programs, as specified. The bill would increase the maximum grant award to \$2,000,000 and would require an applicant to provide a cash or in-kind match, as specified. The bill would make the board solely responsible for administration oversight and accountability of the grant program, and would require the board to set aside up to \$250,000, exclusive of the 3% of funds set aside for administrative costs, to contract with a research firm or university to conduct a statewide evaluation of the grant program. By changing the purpose of existing appropriations for the program, the bill would make an appropriation.  Status: 10/8/2019 - Approved by the Governor. Chaptered by Secretary of State - Chapter 584, Statutes of 2019.	Universal assessments: No Wrong Door system. (Chaptered: 10/12/2019) By executive order, the Governor ordered that a master plan for aging be developed and issued to serve as a blueprint to implement strategies and partnerships that promote healthy aging and prepare the state for upcoming demographic changes. This bill would require the master plan for aging developed pursuant to that executive order to consider the efficacy of utilizing a No Wrong Door System. The bill would specify the purpose of the No Wrong Door system as assisting older adults, people with disabilities, and caregivers in obtaining accurate information and timely referrals to appropriate community services and supports.  Status: 10/12/2019 - Approved by the Governor. Chaptered by Secretary of State - Chapter 825, Statutes of 2019.	Youth homelessness prevention centers. (Chaptered: 9/26/2019) The California Community Care Facilities Act provides for the licensing and regulation of runaway and homeless youth shelters by the State Department of Social Services. Current law requires these shelters to offer short-term, 24-hour, nonmedical care and supervision and personal services to homeless youth and runaway youth, as those terms are defined, who voluntarily enter the shelter. Curent law defines "short-term" to mean no more than 21 consecutive days. This bill would rename these facilities "youth homelessness prevention centers," and would expand the categories of youth for which the center is required to provide services to also include youth at risk of homelessness and youth exhibiting status offender behavior, as those terms are defined by the bill.  Status: 9/26/2019 - Approved by the Governor. Chaptered by Secretary of State - Chapter 341, Statutes of 2019.	substance use and improve school retention and performance.  Status: 1/21/2020 - Consideration of Governor's veto stricken from file.
8. Watch	8. Watch	Watch	8. Watch	8. Watch	8. Watch	8. Watch	

8. Watch	other things, identify mainstream resources, benefits, and services that can be accessed to prevent and end homelessness in California and to serve as a statewide facilitator, coordinator, and policy development resource on ending homelessness in California. Current law requires the Governor to appoint up to 17 members of the council, including representatives from specified state agencies and departments, and a formerly homeless person and a formerly homeless youth who both live in California. Current law requires the Business, Consumer Services, and Housing Agency to provide staff for the council. This bill would additionally require the Governor to appoint a representative of the state public higher education system to the council, as specified.  Status: 9/26/2019 - Approved by the Governor. Chaptered by Secretary of State. Chapter 345, Statutes of 2019.	Rubio D
8. Watch	San Diego-Coronado Bridge: physical suicide deterrent system. (Chaptered: 10/8/2019) Would require the Director of Transportation to select members for an advisory committee to provide input into the selection of a physical suicide deterrent system for the San Diego-Coronado Bridge that would include, but would not be limited to, a representative	SB 656 Hueso D
8. Watch	Incarcerated persons: mental health evaluations. (Chaptered: 10/8/2019) Would require that psychiatrists or psychologists from the State Department of State Hospitals, the Department of Corrections and Rehabilitation, or the Board of Parole Hearings be given access to prisoners being temporarily held at a county correctional facility, a county medical facility, or a state-assigned mental health provider.  Status: 10/8/2019 - Approved by the Governor. Chaptered by Secretary of State. Chapter 649, Statutes of 2019.	S8 591 Galgiani D
8. Watch	Workers' compensation. (Chaptered: 10/1/2019) Under current law, a person injured in the course of employment is generally entitled to receive workers' compensation on account of that injury. Current law provides that, in the case of certain state and local firefighting personnel and peace officers, the term "injury" includes various medical conditions that are developed or manifested during a period while the member is in the service of the department or unit, and establishes a disputable presumption in this regard. This bill would provide, only until January 1, 2025, that in the case of certain state and local firefighting personnel and peace officers, the term "injury" also includes post-traumatic stress that develops or manifests itself during a period in which the injured person is in the service of the department or unit. The bill would apply to injuries occurring on or after January 1, 2020.  Status: 10/1/2019 - Approved by the Governor. Chaptered by Secretary of State. Chapter 390, Statutes of 2019.	\$8 542 Stern D
8. Watch	Criminal procedure: diversion for primary caregivers of minor children. (Chaptered: 10/8/2019) Would authorize the presiding judge of the superior court, in consultation with the presiding juvenile court judge and criminal court judges and together with the prosecuting entity and the public defender, to create a pretrial diversion program for defendants who are primary caregivers of a child under 18 years of age, as specified, who are charged with a misdemeanor or a nonserious, nonviolent felony, and who are not being placed into diversion for a crime alleged to have been committed against a person for whom the defendant is the primary caregiver. The bill would set the period of diversion at not less than 6 months, but not more than 24 months. The bill would require the defendant to participate in classes relating to subjects that may include parenting, anger management, and financial literacy, and to receive services relating to housing, employment, and drug, alcohol, and mental health treatment, among others.  Status: 10/8/2019 - Approved by the Governor. Chaptered by Secretary of State. Chapter 593, Statutes of 2019.	Skinner D
8. Watch	Medical interpretation services. (Chaptered: 9/27/2019) Current law, until July 1, 2020, among other things, requires the State Department of Health Care Services to work with stakeholders to conduct a study to identify current requirements for medical interpretation services and make recommendations on strategies that may be employed regarding the provision of medical interpretation services for Medi-Cal beneficiaries who are limited English proficient (LEP). Current law requires that the department work with stakeholders to establish a pilot project based on the recommendations of the study, as specified. This bill would instead require the department to establish a pilot project concurrent with the study, as specified. The bill would, among other things, require that the pilot project be designed to evaluate certain factors, including whether disparities in care are reduced, with respect to LEP Medi-Cal beneficiaries compared with Medi-Cal beneficiaries who are proficient in English.  Status: 9/27/2019 - Approved by the Governor. Chaptered by Secretary of State. Chapter 365, Statutes of 2019.	SB 165 Atkins D
3. Watch	Conservatorship: serious mental illness and substance use disorders. (Chaptered: 10/2/2019) Would authorize the court to establish a temporary conservatorship for a period of 8. Watch 28 days or less if the court is satisfied that the person is presently incapable of caring for the person's own health and well-being due to a serious mental illness and substance use disorder, as those terms are defined by the bill, the person has been detained 8 times for evaluation and treatment in a 12-month period pursuant to existing law authorizing the detention of mentally disordered persons who are a danger to self or others or gravely disabled, without reference to evidence of frequent detention for evaluation and treatment, the temporary conservatorship is necessary, and the county health director, or their designee, has met specified requirements relating to those previous detentions.  Status: 10/2/2019 - Approved by the Governor. Chaptered by Secretary of State. Chapter 467, Statutes of 2019.	Wiener D

SCR 64 Bates R Drug abuse awareness. (Chaptered: 9/9/2019) This measure would designate the month of September 2019 as Opioid, Heroin, Fentanyl, and Prescription Drug Abuse Awareness 8. Watch Month, as specified.

Status: 8/30/2019 - Chaptered by Secretary of State- Chapter 141, Statutes of 2019

Total Measures: 21

Total Tracking Forms: 21

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# CALLEGORNIA CBHDA 2019-2020 Legislative Update As of 8/27/2024

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O	Residential facilities. (Chaptered: 9/25/2020) Would require an applicant or licensee of an adult community care facility or a residential care facility for persons with chronic life-threatening illness to maintain an email address of record with the State Department of Social Services and notify the department in writing of the email address and any	7	AB 2377
	Telehealth: mental health. (Vetoed: 9/26/2020) Would require health care service plans and health insurers, by July 1, 2021, to provide access to a telehealth consultation program that meets specified criteria and provides providers who treat children and pregnant and certain postpartum persons with access to a mental health consultation program, as specified. The bill would require the consultation by a mental health clinician with expertise appropriate for pregnant, postpartum, and pediatric patients to be conducted by telephone or telehealth video, and to include guidance on the range of evidence-based treatment options, screening tools, and referrals. The bill would require health care service plans and insurers to communicate information relating to the telehealth program at least twice a year in writing.  Status: 9/26/2020 - Vetoed by Governor.	AB 2360 Maienschein D	AB 2360 Maiensc
	State armories: homelass shelters: security. (Chaptered: 9/25/2020) Current law makes specified state armories located in specified counties available to those counties, or a city in one of those counties, for the purpose of providing temporary shelter for homeless persons from October 15 through April 15 each year, and authorizes any county or city not listed, subject to the approval of the Adjutant General, to use an armory within its jurisdiction, in accordance with specified requirements. Current law requires that a county or city that elects to use an armory as a temporary shelter obtain a license that meets specified requirements. This bill would instead require, prior to shelter services commencing, that the county or city notify local law enforcement officers and request that officers make periodic visits to the armory on each night of operation.  Status: 9/25/2020 - Approved by the Governor. Chaptered by Secretary of State - Chapter 145, Statutes of 2020.	D 5	AB 2275 Nazarian D
	Mental Health Services Act: use of funds for substance use disorder treatment. (Chaptered: 9/25/2020) The Mental Health Services Act (MHSA), an initiative measure enacted by the voters as Proposition 63 at the November 2, 2004, statewide general election, funds a system of county mental health plans for the provision of mental health services, as specified. The act establishes the Mental Health Services Fund, which is continuously appropriated to, and administered by, the State Department of Health Care Services to fund specified county mental health programs. This bill would authorize the services for adults, older adults, and children, as well as innovative programs and prevention and early intervention programs that are provided by counties as part of the MHSA to include substance use disorder treatment for children, adults, and older adults with cooccurring mental health and substance use disorders who are eligible to receive mental health services pursuant to those programs.  Status: 9/25/2020 - Approved by the Governor. Chaptered by Secretary of State - Chapter 144, Statutes of 2020.	b D	AB 2265 Quirk-Silva D
_ o	Transgender Wellness and Equity Fund. (Chaptered: 9/26/2020) Would establish the Transgender Wellness and Equity Fund, under the administration of the office, for the purpose of funding grants, upon appropriation by the Legislature, to organizations serving people that identify as transgender, gender nonconforming, or intersex (TGI), to create or fund TGI-specific housing programs and partnerships with hospitals, health care clinics, and other medical providers to provide TGI-focused health care, as defined, and related education programs for health care providers.  Status: 9/26/2020 - Approved by the Governor. Chaptered by Secretary of State - Chapter 181, Statutes of 2020.	80 80	AB 2218 Santiago D
7	Homeless multidisciplinary personnel teams. (Chaptered: 9/25/2020) Would additionally authorize the Counties of Yuba and Sutter to jointly establish a homeless adult and family multidisciplinary personnel team. This bill would make legislative findings and declarations as to the necessity of a special statute for the Counties of Yuba and Sutter. Status: 9/25/2020 - Approved by the Governor. Chaptered by Secretary of State - Chapter 143, Statutes of 2020.	R	AB 2174 Gallagher R
	require the office to perform specified duties, including providing information and technical assistance to statewide and regional partners regarding best practices on suicide prevention policies and programs and reporting on progress to reduce rates of suicide, and authorize the office to apply for and use federal, state, and foundation grants. The bill would require the office to consult with the Mental Health Services Oversight and Accountability Commission to implement suicide prevention efforts. The bill would require that the duties and responsibilities of the office be accomplished with existing staff and resources. The bill would make these provisions operative subject to an appropriation for these purposes in the annual Budget Act or another statute.  Status: 9/25/2020 - Approved by the Governor. Chaptered by Secretary of State - Chapter 142, Statutes of 2020.	0 2	Ramos D

	change to that address, as specified.  Status: 9/25/2020 - Approved by the Governor. Chaptered by Secretary of State - Chapter 146, Statutes of 2020.	
AB 2405 Burke D	Right to safe, decent, and affordable housing. ( Vetoed: 9/29/2020) Would declare that it is the policy of the state that every individual has the right to safe, decent, and affordable housing, and would require the policy to consider homelessness prevention, emergency accommodations, and permanent housing, as specified. The bill would, among other things, require all relevant state agencies and departments, including, but not limited to, the Department of Housing and Community Development, the State Department of Social Services, and the Office of Emergency Services to consider that state policy when revising, adopting, or establishing policies, regulations, and grant criteria when those policies, regulations, and criteria are pertinent to advancing the guidelines listed as core components of Housing First. The bill would make these provisions operative on January 1, 2026, and would make implementation of these provisions subject to an appropriation of funds in the annual Budget Act for these purposes.  Status: 9/28/2020 - Vetoed by Governor.	7. Neutral
AB 2944 Stone, Mark D	Foster care. (Chaptered: 9/18/2020) Current law, as part of the Continuum of Care Reform (CCR), requires the State Department of Social Services to implement a resource family approval process, and directs counties and foster family agencies, to approve resource families, as defined, in lieu of licensing foster family homes, certifying foster homes by foster family agencies, approving relatives and nonrelative extended family members as foster care providers, and approving guardians and adoptive families. Current law requires a foster family agencies that have certified the applicant. This bill would, among other things, clarify that the reference check is to determine whether it is safe and appropriate approve the resource family, and would require that a foster family agency that has previously certified the applicant as a resource family to divulge information, as specified, regarding the applicant within 20 business days of being contacted by a foster family agency or county conducting a reference check.  Status: 9/18/2020 - Approved by the Governor. Chaptered by Secretary of State - Chapter 104, Statutes of 2020.	7. Neutral
AB 3242 Inxin D	Mental health: involuntary commitment. (Chaptered: 9/25/2020) The Lanterman-Petris-Short Act authorizes the involuntary commitment and treatment of persons with specified mental health disorders for the protection of the persons so committed. Under the act, if a person, as a result of a mental health disorder, is a danger to others, or to themselves, or is gravely disabled, the person may, upon probable cause, be taken into custody for a period of up to 72 hours for assessment, evaluation, and crisis intervention, or placement for evaluation and treatment. Current law requires persons providing the evaluation services to be properly qualified professionals, and authorizes those professionals to provide telehealth evaluation services. Current law also provides immunity from civil and criminal liability for similar detention by specified licensed general acute care hospitals, licensed acute psychiatric hospitals, licensed professional staff at those hospitals, or any physician and surgeon providing emergency medical services in any department of those hospitals if various conditions are met. This bill would authorize an examination, assessment, or evaluation specified, required, or authorized by the above-mentioned provisions to be conducted using telehealth.  Status: 9/25/2020 - Approved by the Governor. Chaptered by Secretary of State - Chapter 149, Statutes of 2020.	
SB 275 Pan D	Health Care and Essential Workers: personal protective equipment. (Chaptered: 9/29/2020) Current law establishes the State Department of Public Health to implement various programs throughout the state relating to public health, including licensing and regulating health facilities and control of infectious diseases. This bill would require the State Department of Public Health and the Office of Emergency Services, in coordination with other state agencies, to, upon appropriation and as necessary, establish a personal protective equipment (PPE) stockpile. The bill would require the department to establish guidelines for the procurement, management, and distribution of PPE, taking into account, among other things, the amount of each type of PPE that would be required for all health care workers and essential workers in the state during a 90-day pandemic or other health emergency.  Status: 9/29/2020 - Approved by the Governor. Chaptered by Secretary of State. Chapter 301, Statutes of 2020.	8. Watch
SB 803 Beall D	Mental health services: peer support specialist certification. (Chaptered: 9/25/2020) Current law establishes the Medi-Cal program, which is administered by the State Department of Health Care Services and under which qualified low-income persons receive health care benefits. The Medi-Cal program is, in part, governed and funded by federal Medicaid program provisions. Existing law establishes a schedule of benefits under the Medi-Cal program and provides for various services, including behavioral and mental health services that are rendered by Medi-Cal enrolled providers. This bill would require the department, by July 1, 2022, subject to any necessary federal waivers or approvals, to establish statewide requirements for counties or their representatives to use in developing certification programs for the certification of peer support specialists, who are individuals who self-identify as having lived experience with the process of recovery from mental illness, substance use disorder, or both.  Status: 9/25/2020 - Approved by the Governor. Chaptered by Secretary of State. Chapter 150, Statutes of 2020.	SHEW

	CalWORKs: homeless assistance. (Chaptered: 9/25/2020) Current federal law provides for allocation of federal funds through the federal Temporary Assistance for Needy Families (TANF) block grant program to eligible states. Current state law provides for the California Work Opportunity and Responsibility to Kids (CalWORKs) program, under which, through a combination of state and county funds and federal funds received through the TANF program, each county provides cash assistance and other benefits to qualified low-income families. Current law entitles a family to receive an allowance for specified nonrecurring special needs after a family has used all available liquid resources in excess of \$100, as specified, with the exception of funds deposited in a certain restricted account. This bill would except homeless assistance from that \$100 liquid resources	SB 1065 Hertzberg D
	California Fostering Connections to Success Act. (Vetoed: 9/29/2020) On March 4, 2020, the Governor proclaimed a state of emergency to exist in California as a result of the threat of COVID-19. Executive Order No. N-53-20, signed by the Governor on April 17, 2020, and as extended by Executive Order No. N-69-20, signed by the Governor on June 15, 2020, authorizes temporary waivers of certain foster youth program requirements to ensure continuity of care in response to the COVID-19 pandemic. Under this bill, a nonminor dependent who turned 21 years of age between March 4, 2020, and June 30, 2021, inclusive, would be eligible to continue receiving extended foster care support through June 30, 2021.  Status: 9/28/2020 - Vetoed by the Governor. In Senate. Consideration of Governor's veto pending.	SB 912 Beall D
0 3	Health coverage: mental health or substance use disorders. (Chaptered: 9/25/2020) The California Mental Health Parity Act requires every health care service plan contract or disability insurance policy issued, amended, or renewed on or after July 1, 2000, that provides hospital, medical, or surgical coverage to provide coverage for the diagnosis and medically necessary treatment of severe mental illnesses of a person of any age, and of serious emotional disturbances of a child under the same terms and conditions applied to other medical conditions, as specified. Existing law requires those benefits to include, among other things, outpatient services, inpatient hospital services, partial hospital services, partial hospital services, and prescription drugs. This bill would revise and recast those provisions, and would instead require a health care service plan contract or disability insurance policy issued, amended, or renewed on or after January 1, 2021, provide coverage for medically necessary treatment of mental health and substance use disorders, as defined, under the same terms and conditions applied to other medical conditions.  Status: 9/25/2020 - Approved by the Governor. Chaptered by Secretary of State. Chapter 151, Statutes of 2020.	Wiener D
0.	Department of Corrections and Rehabilitation to operate facilities to house specified juvenile diversed: 9/30/2020) Current law establishes the Division of Juvenile Justice within the Department of Corrections and Rehabilitation to operate facilities to house specified juvenile offenders. Current law, commencing July 1, 2020, establishes the Department of Youth and Community Restoration with all the powers, functions, duties, responsibilities, obligations, liabilities, and jurisdiction of the Division of Juvenile Justice. An existing executive order delays the deadline for transferring the Division of Juvenile Justice to the Department of Youth and Community Restoration from July 1, 2020, to July 1, 2021, inclusive. This bill would repeal the provisions that would have created the Department of Youth and Community Restoration and the provisions that would have transferred the responsibilities of the Division of Juvenile Justice to that department. Among other things, the bill would, commencing July 1, 2021, prohibit further commitment of wards to the Division of Juvenile Justice, except as specified, and would require that all wards committed to the division prior to that date remain within the custody of the division until the ward is discharged, released, or transferred.  Status: 9/30/2020 - Approved by the Governor. Chaptered by Secretary of State. Chapter 337, Statutes of 2020.	SB 823 Committee on Budget and Fiscal Review

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