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TO: Behavioral Health Advisory Board (BHAB)

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BEHAVIORAL HEALTH SERVICES (BHS) DIRECTOR'S REPORT – December 2025

BHS 2025 Year in Review

In 2025, Behavioral Health Services (BHS) continued to strengthen San Diego County's behavioral health Continuum of Care- expanding access, modernizing infrastructure, and deepening partnerships that improve outcomes for residents across all regions. Guided by the County's vision for a comprehensive, person-centered, and data-driven system, BHS advanced efforts that connect people, programs, and communities across the continuum of care. The following sections highlight key 2025 accomplishments in new services, capital investments, workforce and community engagement, grant funding, and legislative progress that together advance a more responsive and equitable behavioral health system.

Programs and Services Updates

CalAIM Integration and System Modernization Initiatives

BHS advanced several major initiatives in 2025 that strengthen prevention, access, and care coordination across the behavioral health continuum as part of California Advancing and Innovating Medi-Cal (CalAIM). A cornerstone of this work was the County's formal opt-in to BH-CONNECT, approved by the Board in March 2025. BH-CONNECT establishes a statewide infrastructure for real-time data exchange, standardized care coordination, and modernized billing between counties, Managed Care Plans, and community providers. Through this effort, BHS is laying the groundwork for a more connected system where Medi-Cal members with complex needs can move more seamlessly between services, and where providers have the information they need to coordinate care across organizations and levels of acuity.

BH-CONNECT represents a long-term systems transformation - one focused on building the technological, operational, and policy foundations needed for a unified behavioral health system. This includes preparing for enhanced data requirements, aligning with new billing and authorization processes, and adopting standardized workflows that support consistent, timely communication across partners. These shifts will help reduce fragmentation, simplify navigation for clients and families, and improve the County's capacity to track outcomes and deliver evidence-based, person-centered services.

Complementing this infrastructure work, BHS also advanced performance-improvement efforts through initiating its participation in Phase 2 of the Medi-Cal Behavioral Health Demonstration Collaborative. While separate from BH-CONNECT, the Collaborative supports CalAIM goals by focusing on two critical measures: follow-up after emergency department visits for mental illness and for substance use. San Diego's local team - including BHS, two Medi-Cal Managed Care Plans, UC San Diego Health, Strive, and additional partners - completed readiness sessions in Fall 2025 and is now developing a Local Improvement Plan to strengthen referral pathways, information exchange, and post-discharge outreach. These improvements aim to ensure individuals leaving the ED receive timely follow-up care, reducing repeat crises and supporting long-term recovery.

Together, BH-CONNECT and the Demonstration Collaborative represent two complementary components of system modernization: one focused on building the statewide infrastructure for integrated care, and the other on improving the day-to-day coordination and continuity of services during high-risk transitions. These efforts position San Diego County to deliver more responsive, equitable, and connected behavioral health care.

Next Move

A major highlight of 2025 was the launch of Next Move - a County-operated outpatient program serving justice-involved youth up to age 21. Next Move provides mental health, substance use, and competency remediation services through two main clinics at the Southeastern Live Well Center and North Coastal Live Well Health Center. Since its launch, the program has served 281 youth, with 163 active in care. Services include evidence-based practices such as Dialectical Behavior Therapy (DBT), Functional Family Therapy (FFT), and trauma-focused interventions. The initiative aligns with California's Justice-Involved Initiative Behavioral Health Links program, ensuring seamless transitions from detention to community care.

MCRT School Pilot Program

Crisis response capacity also expanded through the Mobile Crisis Response Team (MCRT) School Pilot Program. In partnership with the San Diego County Office of Education, MCRT services launched across all public TK–12 districts, providing a compassionate alternative to law enforcement responses for students in crisis. More than 200 school-based referrals have been completed since the rollout, 70% resulting in stabilization in place. These services demonstrate BHS's commitment to youth-centered and trauma-informed care.

EmPATH Model at Sharp Chula Vista CSU

The County and Sharp HealthCare made important progress this year with the opening of a new Crisis Stabilization Unit (CSU) using the EmPATH model at Sharp Chula Vista Medical Center. The unit includes six recliners located right next to the hospital's emergency department, allowing people in behavioral health crisis to move quickly into a calmer, dedicated space rather than staying in the busy emergency room.

Traditional CSUs offer short-term support, usually under 24 hours, for assessment, stabilization, and connection to follow-up care. The EmPATH (Emergency Psychiatric Assessment, Treatment & Healing) model builds on this by placing the CSU directly within the hospital's emergency workflow. This helps reduce wait times, eases pressure on the emergency department and gives people faster access to a therapeutic setting. The space is designed with recliners, soft lighting, artwork, and secure storage to help reduce stress, and is staffed by clinicians skilled in behavioral health crisis care.

This new EmPATH unit expands crisis care in the South Bay, improves regional equity, and strengthens the County's broader Continuum of Care. It offers a more appropriate and supportive setting for people in crisis and helps link them directly to outpatient, residential, and community-based services. The unit

adds to the County's growing network of CSUs, with four already operating and another planned for East County in late 2025.

San Diego Relay Program

BHS also launched the San Diego Relay (SD Relay) Program, a 24/7 peer support and navigation service that bridges emergency departments (EDs) with community-based recovery supports. The program engages Medi-Cal–eligible patients after nonfatal overdoses or behavioral health holds and provides up to 90 days of peer support following discharge. Since launch, SD Relay has received 150 referrals, engaged 138 patients, and distributed 131 harm reduction kits. Expansion to additional hospitals and pursuit of Medi-Cal certification are planned for long-term sustainability.

Capital & Infrastructure Updates

In 2025, the County advanced several major capital and infrastructure initiatives to expand treatment capacity, add new housing options, and modernize core behavioral health systems. These investments strengthen the Continuum of Care while positioning BHS for long-term alignment with CalAIM and BHSA requirements.

New Crisis and Inpatient Care Supports for East County

BHS is advancing several major projects in East County that will come online over the next two years. In late February 2026, the new East Region Crisis Stabilization Unit (CSU) is anticipated to open at 200 South Magnolia Avenue in El Cajon. The CSU will provide immediate, short-term behavioral health treatment in a calming, therapeutic environment for individuals experiencing a behavioral health crisis that requires urgent intervention. Designed to divert people from unnecessary emergency department visits, the CSU will offer rapid assessment, stabilization, and direct linkage to ongoing care. As an LPS-designated facility, it will also serve as a rapid drop-off site for law enforcement and other first responders, allowing them to return quickly to service in the community.

Construction is also beginning on the new 12-bed Acute Psychiatric Hospital (APH) at the Edgemoor campus, with groundbreaking planned for January 2026. This 12,020-square-foot, \$28.1 million project—supported by \$16.8 million in Behavioral Health Continuum Infrastructure Program (BHCIP) funding—will renovate the Pico unit within the Edgemoor Distinct Part Skilled Nursing Facility. Once completed in spring 2027 and licensed, the APH will significantly expand inpatient psychiatric capacity in East County and will serve as the anchor hospital for the SNF, ensuring continued eligibility for enhanced funding.

BHCIP-Funded Projects

Additional BHCIP investments are underway across the region. The County secured \$29.1 million in Round 1 funding to develop two new regional facilities: an 89-bed Substance Use Recovery & Treatment Services (SURTS) center and a 16-bed Children's Crisis Residential Care (CCRC) program - the first in San Diego County. In October, the Board also authorized pursuit of up to \$150 million in Proposition 1 / BHCIP Round 2 funding to support a proposed Behavioral Health Wellness Campus, a co-located, recovery-oriented hub that would include crisis stabilization, sobering and detox services, residential treatment, supportive housing, and wraparound supports. Funding decisions are anticipated in spring 2026.

Homekey

The County also continued leveraging California's Homekey program - one of the State's fastest tools for creating permanent and interim housing by converting hotels, motels, and similar properties into long-term supportive housing. Homekey provides capital dollars for acquisition and rehabilitation, while allowing counties to integrate onsite behavioral health services to support residents' stability. Under

BHSA, counties may later use Housing Interventions funding to help sustain operations and ensure residents receive ongoing behavioral health supports.

In 2025, BHS maintained 1,321 Permanent Supportive Housing units across 43 developments across several fund str, including earlier rounds of Homekey. Three additional projects - Presidio Palms, Pacific Village, and Abbott Street Apartments - added nearly 250 new units, expanding the region's supply of service-enriched housing for people with serious mental illness or substance use conditions. These units form an important part of the County's housing infrastructure, working in tandem with efforts such as Behavioral Health Bridge Housing (BHBH), CalAIM Community Supports and Transitional Rent, and the emerging BHSA Housing Interventions component to create a full spectrum of housing and treatment options.

New Psychiatric Health Facility in North County

The new 16-bed Psychiatric Health Facility (PHF) on the Tri-City Medical Center campus represents a major milestone for North County and is the first County-funded inpatient psychiatric health facility in the region. The single-story, 13,560-square-foot facility will provide short-term inpatient psychiatric care for approximately 350 to 500 patients per year, offering a structured, therapeutic environment for individuals needing stabilization beyond what outpatient or crisis services can provide.

The PHF was jointly funded by the County and the Tri-City Healthcare District as part of a \$27.6 million infrastructure investment. Long-standing County partner Exodus Recovery will operate the facility, with psychiatrists, therapists, nurses, and peer support specialists providing care. Average stays are expected to run five to seven days, with a strong focus on coordinated discharge planning and linkage to ongoing care.

The facility was built to LEED Silver environmental standards and incorporates energy-efficient systems, sustainable materials, and ample natural light to support healing. Located on the western edge of the Tri-City campus, the PHF adds a critical level of care to the region and complements the County's existing crisis services - helping create a more complete and accessible continuum for North County residents. The facility will begin accepting patients in December.

SmartCare Implementation

In addition to expanding physical infrastructure, BHS made major investments in technology to improve coordination, accountability, and access. The department began implementing SmartCare, a modern electronic health record and case management system that will serve as the foundation for integrated behavioral health data countywide. SmartCare replaces multiple legacy systems to create a unified digital platform that supports real-time service documentation, billing, and performance monitoring across more than 300 County and contracted provider sites.

As part of implementation, BHS established a dedicated system support team to assist with error resolution, dashboard development, and staff training. These efforts are reducing system efforts, improving billing accuracy, and supporting data readiness for CalAIM and BHSA reporting, including population-level outcomes tracking and enhanced fiscal transparency.

SmartCare also supports electronic data exchange with Medi-Cal and other health systems, enabling care teams to better coordinate services for clients with complex needs. Once fully implemented, it will help streamline referrals, improve quality reporting, and make it easier for residents to connect with care—serving as a critical tool in advancing a truly connected and data-driven behavioral health system.

Community Outreach and Engagement Updates

Earlier this year, the department embarked on a phased redesign of its meetings and activities to better align with new State requirements under the Behavioral Health Services Act (BHSA). The department continues to revise approaches for outreach and engagement based on key learnings from stakeholders. Over the spring and summer, while awaiting State guidance, BHS focused on promoting State and local updates related to Behavioral Health Transformation, piloting smaller, tailored activities based on community requests, and improving community awareness of upcoming opportunities through website enhancements and additional outreach.

Community Health Worker Outreach (CHW)

BHS also expanded its Community Health Worker (CHW) operations to strengthen neighborhood-level engagement and outreach. In 2025, CHWs supported more than 450 community events across the region—including tabling opportunities, educational sessions, and collaborative presentations with community partners. The department also initiated three separate pilot efforts with CHWs this year: follow-up support for clients exiting inpatient programs at hospitals within 72 hours of their discharge, delivery of BH-CONNECT Enhanced CHW Services, and naloxone distribution as part of harm reduction education efforts. Through this growing workforce, BHS has extended behavioral health education, stigma reduction, and resource navigation to hundreds of community members, building stronger connections between County services and communities across San Diego County.

Public Messaging Campaigns

Public messaging was also central to engagement this year. Through the department's flagship *It's Up to Us* brand, BHS launched several new campaigns: a youth suicide prevention campaign encouraging open dialogue and help-seeking; a harm reduction campaign focused on overdose prevention and naloxone awareness in partnership with the City of San Diego; and a crisis response services campaign highlighting the 9-8-8 Lifeline and the County's expanding network of Mobile Crisis Response Teams, Crisis Stabilization Units, and related supports. Collectively, these campaigns reached hundreds of thousands of residents across television, digital, social, and transit media.

BHS is finalizing a revised stakeholder engagement ecosystem based on insights and recommendations collected between March-July 2025. New stakeholder meetings planned to launch in 2026 will provide regular opportunities for bi-directional dialogue and collaboration. These efforts reflect BHS's commitment to an engagement approach that evolves with community needs and supports the County and State's broader transformation toward integrated, person-centered behavioral health.

Public Behavioral Health Workforce

Workforce development continued to be a major focus for BHS, which partnered with local education and training institutions to strengthen and diversify San Diego County's behavioral health workforce pipeline. In collaboration with the San Diego County Office of Education, BHS delivered behavioral health career presentations that reached 350 high school students. Through a partnership with the San Diego Community College District's Public Mental Health Academy, 541 students - three-quarters of whom identified as having lived experience - received training and exposure to public behavioral health careers. BHS also collaborated with San Diego State University's Public Behavioral Health Master of Social Work Training Program and UC San Diego's Community Psychiatry Program to prepare dozens of emerging clinicians and award 53 graduate stipends through the Statewide Clinical Rotations Program.

Additionally, the ELEVATE Behavioral Health Workforce Fund officially launched this year, marking a long-awaited and first-of-its-kind local investment to build a stronger, more representative behavioral

health workforce. Backed by \$75 million in MHSA Innovation funding, the Fund is administered by the Policy & Innovation Center in partnership with Social Finance, Trailhead Strategies, and other agencies. The initiative aims to add 3,000 new professionals to the region's behavioral health workforce, directly addressing findings from a 2022 needs assessment conducted by San Diego Workforce Partnership, which identified more than 18,500 additional behavioral health professionals are needed by 2027 to meet local demand for mental health and substance use services.

ELEVATE reduces barriers that have historically limited entry into behavioral health careers - such as high tuition costs, unpaid training, and limited advancement opportunities. The Fund includes five coordinated programs that together expand access to education, training, and paid experience across the continuum of care.

These include the Pay It Forward Loan Program, which provides zero-interest loans for behavioral health workers pursuing graduate degrees and reinvests repayments to sustain future students; the Behavioral Health Apprenticeship Network, which creates hands-on apprenticeship pathways for roles such as SUD counselors, case managers, and community health workers; and the Peer Support Training Grant Program, which expands training and job placement for certified peer specialists in partnership with Pacific Clinics and NAMI San Diego & Imperial Counties. Additional components include a Social Work and Therapy Internship Program offering paid internships in public behavioral health settings, and a Nurse Practitioner Expansion Program that supports students in gaining clinical and educational experience within County-supported sites. Through ELEVATE, the department is pioneering a model that unites education, equity, and innovation and creates sustainable career pathways to strengthen the public behavioral health system.

Department Awards

National Association of Counties (NACo) Achievement Awards

The County also received three National Association of Counties (NACo) Achievement Awards: one recognizing the Strengths-Based Case Management Art Show, another honoring the Illicit Fentanyl and Overdose Prevention Campaign, and a third acknowledging the Community Assistance, Recovery and Empowerment (CARE) Act Program. All exemplify San Diego's creative, community-informed approach to behavioral health education and recovery support.

Strengths-Based Case Management (SBCM) Art Show in the category of Arts, Culture, and Historic Preservation, empowers individuals with behavioral health conditions to express themselves through art, fostering personal growth and improving health outcomes. The annual event showcases artwork created by SBCM program participants and provides a platform for participants to be seen as artists rather than defined by their behavioral health conditions.

Illicit Fentanyl and Overdose Prevention Public Messaging campaigns, in the category of Health, were in response to growing concerns about the rise in regional opioid overdoses and deaths and focused on raising awareness about the dangers of illicit fentanyl and promoting the availability of naloxone, a life-saving medication capable of reversing opioid-related overdoses.

The CARE Act Program, in the category of Human Services, creates a new pathway to deliver mental health and substance use services to individuals who are diagnosed with schizophrenia or other psychotic disorders, are not engaged in treatment, and are at risk of more restrictive placements such as conservatorship or incarceration. The CARE Act program utilizes frequent outreach and engagement to build relationships and trust with these individuals and connect them to the services they need for stability in a community-based setting.

Looking Ahead

BHSA will introduce new programmatic and structural requirements without increasing overall revenue, prompting a comprehensive review of our current system of care. BHS is evaluating program priorities, aligning services with Optimal Care Pathways, incorporating stakeholder input, and identifying opportunities to redesign services for long-term sustainability. This work also includes coordinating BHSA implementation with CalAIM, BH-CONNECT, and other statewide transformation efforts to ensure a streamlined and cohesive experience for clients and providers.

BHS also continues to prepare for its transition to a standalone department separate from the Health and Human Services Agency (HHSA). Related activities include reviewing fiscal and administrative functions currently housed within HHSA. Key priorities will include strengthening Medi-Cal reimbursement, enhancing billing and claiming capacity, and supporting a smooth operational realignment. We continue to monitor State guidance and develop the BHSA Integrated Plan, with internal workgroups synthesizing requirements and supporting the forthcoming Ad-Hoc Committee. These efforts position BHS to modernize service delivery and maximize the impact of local behavioral health resources.

Respectfully submitted,

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