

1

**Behavioral Health Advisory Board (BHAB)
Criminal Justice (CJ) Committee
2023 Annual Report**

Introduction:

The BHAB Criminal Justice (CJ) Subcommittee provided an opportunity for an array of CJ stakeholders to assess, discuss and plan strategies to address issues that impact the various components related to mental health, substance abuse and the impact on the San Diego County systems and programs. Members of the CJ Subcommittee represented a broad range of professionals with experience in addressing the challenges faced by the incarcerated community as well as the County programs designed to improve services for impacted individuals. The wealth of professional experience of the CJ Subcommittee members provided an in-depth discussion that included key elements of the CJ community that needed to be identified and accessed to gain a detail understanding of the issues impacting programs and services such as transparent data collection and sharing, flow charts illustrating client services, and dispatch and program information that demonstrates how community programs (e.g. MCRT, PERT) of services and assessments implanted in the County jails. An example of the programs and recommendations addressed by the CJ Committee in 2023 are listed below and include Mobile Crisis Response Team (MCRT) and the San Diego County Jails. Our CJ meetings aimed to answer the questions identified and as we learned additional information, we invited the specific stakeholders to fill in the gaps and provide access to their program and services that include the next level of presentations to the CJ Subcommittee. We often requested access to program data, overview of dispatch programs, and visits to programs and jails.

**BEHAVIORAL HEALTH ADVISORY BOARD (BHAB)
CRIMINAL JUSTICE (CJ) SUBCOMMITTEE
2023 RECOMMENDATIONS**

MOBILE CRISIS RESPONSE TEAMS (MCRT):

1. Based upon reports that MCRT teams are having difficulty covering calls for service, share data on response times for all calls based on geographic location and time of day, to guide adjustments in staffing to improve responsiveness. *Is there a dollar amount for staffing, source of issue with staffing?*
Need MCRT workgroup within BHAB.
How they came up with dollar amount-should be in contract.
2. Given the challenge of separate data systems for MCRT and law enforcement (LE) dispatch, quickly ensure that these data systems are linked, to provide anonymous data on how each potential behavioral health call was assessed for possible MCRT or Psychiatric Emergency Response Team (PERT) referral, and where each call was sent (to LE, MCRT, or PERT).

**Behavioral Health Advisory Board (BHAB)
Criminal Justice (CJ) Committee
2023 Annual Report**

3. Based on requests for information in Section #2, the provision of data by the LE Dispatch Systems and the LE agencies should help clarify the actual referrals to PERT based on the decision trees and codes used. We would like to receive these by 6/30/23, so that adjustments can be made to our goals for the rest of the year.
4. Review the MCRT contract data to assess client wait times for services after leaving a stabilization center; and, if necessary, establish a new behavioral health referral system to ensure services for a warm handoff for clients.
5. Have all dispatch systems share the decision trees that they use to identify clients appropriate for referral to MCRT.
6. Ensure that comprehensive training of LE officers in the field, dispatchers, and mental health is an integral part of their continuing education to ensure effective communication and referrals.
7. Establish a comprehensive data collection system (outside of HIPPA requirements) to have better communication among all service providers funded by Behavior Health Services (BHS).

COUNTY JAILS:

8. Work with the Sheriff to establish transparency within the jail system for the booking of all individuals that includes appropriate behavioral health screening and assessment tools, and a timely determination of placement (diversion), mental health/substance abuse (MH/SA) treatment needs, and/or placement in jail with a plan to provide the appropriate services. We recommend that this includes a flowchart illustrating the steps involved with each new arrestee that includes an MH/SA screening and comprehensive assessment conducted by a behavior health professional, with a treatment referral or custody plan.
9. Provide an organizational chart, job descriptions, and policies and procedures that show the roles of NaphCare, Inc. and other MH/SA staff, when they are utilized, and the authority they have in the referral of arrestees. In addition, describe MH/SA training that is received by Sheriff deputies to work seamlessly with the Behavioral Health professionals.
10. Implement crisis stabilization services in the jails or adjacent to the facilities to provide MH/SA services for arrestees that need them.
11. Support the CJ Subcommittee's goal to join with other criminal justice community coalitions to increase oversight of medical professionals working in jails to ensure that they work cooperatively with BHS on data and program transparency.

**Behavioral Health Advisory Board (BHAB)
Criminal Justice (CJ) Committee
2023 Annual Report**

12. Ensure that the screening and assessment system is transparent to the community and uses best practices to show that the jail system provides appropriate MH/SA services to all inmates who need them.
13. We rely on input from our BHS and HHSA liaisons, the ATI Task Force, our community members, and the professional partners who regularly participate in our monthly meetings. Therefore, our goals reflect a changing landscape that is flexible and dynamic.

Final Thoughts and Moving Forward:

With the Oct 1, 2023, implementation of the CARE Act/CARE Court and the delay of implementation of SB 43, the BHAB Executive Committee priorities for 2024 will be these two very essential programs. Both are intricately woven with our criminal legal systems and this committee's concerns regarding diversion of those with SMI and SUD from incarceration.

In 2023, we had many community members, experts in their fields and in communication with their communities, such as ATI Task Force members. They regularly attended our meetings and educated us regarding the County's efforts to identify ways to prevent tragedies from occurring in our jails for those who suffer from serious behavioral health issues. We were introduced to programs that enhance the warm hand-off of incarcerated individuals through the CalAIM "Supporting Care Coordination for Justice Involved Individuals" which, if implemented, will begin the process of connecting those in transition from incarceration to re-entry with services in the community. We heard from innovative programs such as the Public Defender's Pretrial Advocacy and Community Connections (Grace Liu, Group Program Manager, Office of the Public Defender) which shows that there are evidenced based ways to address diversion.

Many of our efforts focused on obtaining data from the Sheriff's Dept (SDSD) and other Law Enforcement (LE)/Dispatch specifically targeting how calls for crisis services were not fruitful and we believe, hampered our understanding of how the MCRT and PERT specifically are functioning and if they have been successful in diverting from incarceration. While we were able to have presentations from both BHS staff and LE Dispatch, the unavailability of data prevented addressing gaps.

We developed a good working relationship with Asst. Sheriff for Detentions, Theresa Adams-Hydar, and Melissa Quiroz, the Chief Clinician at SD County Jails. We were able to obtain a flow chart which showed the decision tree used when an incarcerated person demonstrates a need for further assessment, evaluation, and treatment. This was useful in identifying gaps. Judith Yates and Robin Sales were given a tour of the Central Jail specifically focused on the Jail Based Competency Treatment program (JBCT) and we subsequently received a presentation from Brooke Anarde, Program Director at NaphCare, Inc. (contracted by SDSD to oversee the JBCT

**Behavioral Health Advisory Board (BHAB)
Criminal Justice (CJ) Committee
2023 Annual Report**

program. We would have liked to have a delegation from this committee participate, however that request was turned down.

Goal #10 was out of the realm of our influence, requiring the Board of Supervisors (BOS) to amend the charter so that the Citizens' Law Enforcement Review Board (CLERB) could have oversight over medical personnel in the jails and goal #11 – establishing a jail based CSU – was dismissed as infeasible.

Going forward, the BHAB Executive Committee has decided that we will utilize the ad-hoc Committee model to target the priority issues identified above. The structure will be determined by specific topics related to BHS and partners' identification of areas of concern such as training of LE regarding detaining persons with severe SUD as an example. This structure will allow for a time limited group focused on one issue with recommendations back to the BHAB for actions to be taken such as addressing with the BOS through comments or presentations.

To provide an overview of the work performed by the CJ Subcommittee, we are providing agenda summaries for the 2023 meetings (see below).

Jan. 23, 2023

- Presentation: Supporting Care Coordination for Justice Involved Individuals (Board Letter overview) – by Dr. Sayone Thihalolipavan.
- Strategizing CJ support for Alternatives to Incarceration (ATI)/Data-Driven Approach Board Letter (item 19) at 2/28/23 Board of Supervisors (BOS) meeting
- ATI discussion led by Darwin.

Feb. 27, 2023

- Discussion of 2023 CJ recommendations.
- Updates:
 - ATI report – Darwin
 - Presentation – Dr. Sayone
 - Exodus – Robin
- Jerry shared links to Medical Services Division Operations Manual from SD Sheriff, Naphcare contract with Sheriff.

March 27, 2023

- Info Share (by Dr. Sayone): 03/14/23 BOS Agenda Item #23: Equity In Action: Strengthening Communities of Color by Expanding Data Access and Training for Community Leaders

**Behavioral Health Advisory Board (BHAB)
Criminal Justice (CJ) Committee
2023 Annual Report**

- Discussion of revisions to CJ recommendations – Recs were Action Item presented at April 6 BHAB meeting.

April 24, 2023

- Presentation: Data Governance and Integration for Justice-Involved Care Coordination – by Dr. Sayone Thihalolipavan
- Discussion of 04/16/23 U-T Article - *Inside San Diego's Mental Health Crisis*

May 22, 2023

- Discussion: Strategizing how to share CJ Recommendations with BOS staff.
- Discussion: Subcommittee letter/questions to Assistant Sheriff Adams-Hydar.
- Discussion: Subcommittee mid-year update to BHAB (tentatively for July 6th BHAB meeting).

June 8, 2023 (Ad Hoc Meeting)

- Meeting to discuss HMA, Inc. (consultant for Justice-Involved health services) contract.

June 26, 2023

- Assistant Sheriff Theresa Adams-Hydar provided responses to questions submitted by CJ Co-Chairs, with follow-up questions led by attendee Tom Packard.
 - It was suggested that Theresa might be able to arrange for a small group of CJ members to tour a jail facility for first-hand observation of site/procedures.

July 24, 2023

- Presentation/Q&A: CalAIM Justice-Involved Benefits – facilitated by Dr. Sayone and Lynn Carr, Chief, Agency Operation, Medical Care Services.
- Discussion: how to address continued deaths while incarcerated.

Aug. 28, 2023

- Discussion/Q&A: new Office of Evaluation, Performance and Analytics (OEPA's) and its ATI-Related Efforts, and the Strategic Research Plan – led by Ricardo Basurto-Davila, OEPA Chief Evaluation Officer
- Report out on Jail visit with Theresa Adams-Hydar – by Robin and Judith

**Behavioral Health Advisory Board (BHAB)
Criminal Justice (CJ) Committee
2023 Annual Report**

Sept. 25, 2023

- Presentation: Overview of Jail Based Competency Treatment (JBCT) – provided by Brooke Anarde, Program Director NaphCare, Inc.
- Discussion: U-T article: *New CARE Court Billed as ‘Voluntary’; Details Complex*. Shelley L. shared her concerns about the CARE Act’s impact on individuals.
- Discussion: SANDAG Report: CJ Bulletin | 2022 Adult Arrestee Drug Use in the San Diego Region (June 2023).
- Discussion: Review of 2023 CJ Annual Report Recommendations.
- Aaron Burgess, Jr. (representing District 3) announced the Gun Violence Reduction Summit on Friday, 9/29, from noon to 2:00pm and invited CJ members and invitees to sign up to attend. Information and flyer forwarded to CJ by Phil on 9/26.

Oct. 23, 2023

- Presentation: **CARE Act Impact**, facilitated by Charity White-Voth, Deputy Director, Programs & Services, BHS
- Discussion: CLERB report on in-custody deaths.
- Discussion: CA Department of Health Care Services (HCS) Report: Transformation of Medi-Cal Justice-Involved.

Nov. 27, 2023

- Presentation: **Pretrial Advocacy and Community Connections (PACC)** program, facilitated by Grace Liu, Director of Community Initiatives, San Diego County Office of the Public Defender

Dec. – DARK (no meeting)

Jan. 22, 2023 (pending)

- Discussion: MCRT Data Share and Discussion/Q&A, facilitated by Piedad Garcia, Deputy Director, BHS AOA System of Care, and Alisha Eftekhari, Assistant Medical Services Administrator, BHS.
- Discussion/review of 2023 CJ Goals/Recommendations report.
- Discussion of 2024 Subcommittee – identify new subcommittee name and goals.

**Behavioral Health Advisory Board (BHAB)
Criminal Justice (CJ) Committee
2023 Annual Report**

Criminal Justice Subcommittee Members

| <u>First name</u> | <u>Lat name</u> | <u>Affiliation</u> |
|--------------------------|------------------------|---|
| Robin | Sales | BHAB Member D3 |
| Rick | McGaffigan | BHAB Member D5 |
| Judith | Yates | BHAB Member D4 |
| Stuart | Gaiber | BHAB Member D3 |
| Jerry | Hall | Community & former BHAB Member, Civic Mapping |
| Yusef | Miller | North County Equity & Justice Coalition |
| Darwin | Fishman | ATI Advisory Group |
| Tom | Packard | Showing Up for Racial Justice NC |
| Mary | Best | Community Member |
| Steven | Dilley | Veterans Art Project |
| Matt | Halverson | CCHEA/LASSD |
| Andrea | Dauber-Griffin | ATI Advisory Group |
| Bill | Payne | ATI Advisory Group/Secon |
| Danielle | Fettes | UCSD |
| Aaron | Burgess | Sup. Lawson Remer (D3) – Public Safety Policy Advisor |
| Theresa | Adams-Hydar | SD Sheriff Dept. |
| Melissa | Quiroz | SD Sheriff Dept. |
| Philip | Ainsworth | BHS Staff |
| Dania | Barroso-Conde | BHS Staff |
| Michael | Krelstein, MD | Liaison, BHS |
| Sayone | Thihalolipavan, MD | Liaison, HHS Justice Involved Care |

AOD Subcommittee Report

11.27.2023

Written by: Serita Polinaire, M.A
Alcohol and Other Drug Subcommittee - Chair

AOD Subcommittee Report: Goals and Strategies

Introduction

On 7/1/2022, the AOD Subcommittee released its SMART Goals, initiating a strategic approach to address the escalating public health crisis posed by Fentanyl and other related issues. This report aims to provide a cohesive overview of the Subcommittee's objectives and the methodologies employed to achieve them.

The primary focus is on the crisis surrounding Fentanyl. The Subcommittee aims to increase awareness and education about Fentanyl, particularly regarding its potential inclusion in various drugs and the availability of testing strips. A critical part of this initiative involves gathering data on age groups most affected by Fentanyl, specifically those admitted to hospitals or emergency care, and fatalities due to overdoses. This data will help tailor educational efforts more effectively.

In the realm of prevention, the Subcommittee is engaging in community conversations, focusing on dialogues with youth, and collaborating with educational programs. A key area of this prevention strategy is to heighten awareness about the dangers of Fentanyl and educate the public on identifying drugs potentially laced with it.

Another crucial element is mapping, which involves getting a comprehensive picture of the existing resources and identifying any gaps. This includes developing a strategic mapping system and a publicly accessible map to increase access to resources in various neighborhoods. The Subcommittee plans to utilize its network to reach out to the community and gather information on resources monitored or mapped by the County.

Data collection forms a significant part of the Subcommittee's approach, focusing on understanding how funds are being allocated and ensuring they are used effectively in the fight against drug abuse and its consequences.

Lastly, the Subcommittee emphasizes that success in recovery varies for each individual and must be measurable. This personalized approach acknowledges the diverse needs and

circumstances of those affected by drug abuse, aiming for a comprehensive and adaptive strategy in tackling the AOD crisis in the county of San Diego.

AOD Subcommittee Report: Goals and Strategies

As of May 8th, 2023, the AOD Subcommittee established new goals to combat the Fentanyl public health crisis. This report outlines the SMART goals set by the Subcommittee and the steps taken to achieve them.

SMART Goals

Specific

The main objective was to increase awareness and education about the Fentanyl crisis. The steps taken to achieve this long-term goal included:

1. Data Collection:
 - Assessed age grouping curves for hospital and emergency care admissions, as well as fatal dosages.
 - Gathered demographic data.
 - Identified gaps and needs based on data collection to inform future strategies.
2. Utilization of Collected Data:
 - Informed tailoring of education programs based on the data.
 - Addressed the Board of Supervisors (BOS) with questions regarding current and future plans to tackle the Fentanyl crisis.
3. Creation of a Formal Recommendation:
 - Assessed current community education and campaigning efforts.
 - Identified creators and implementers for tailored education programs.
 - Bolstered recommendations for collaborations with Community-Based Organizations (CBOs).

Measurable

Success was measured by:

- The AOD Subcommittee's ability to make recommendations to the larger Behavioral Health Advisory Board (BHAB).
- Collection and utilization of relevant data from the County of San Diego to create a report with specific suggestions and recommendations for BHAB.
- BHAB's final recommendation to Behavioral Health Services (BHS)/BOS.

Achievable/Attainable

The goal was achievable, with the potential challenge being the availability of current data. Identifying missing data helped pinpoint gaps.

Realistic/Relevant

This goal aligned with the overall mission and was both realistic and relevant. It emphasized the importance of current data in shaping future plans and goals.

Timely

The timeline for achieving this goal was as follows:

- May to July: Reviewed Fentanyl goals, requested data from the County of San Diego.
- August: Reviewed data and started drawing preliminary conclusions for discussion within the AOD group.
- September: Refined conclusions and prepared recommendations; brought vital pieces to the awareness of BHAB Executives.
- October: Created a rough draft of recommendations and submitted it to the BHAB executive team.
- November: Incorporated feedback and edits from BHAB Executives.
- December: Presented a preliminary report to BHAB.

AOD Subcommittee Report: Mission

On May 8th, 2023, the Alcohol and Other Drug (AOD) Subcommittee under the Behavioral Health Advisory Board (BHAB) delineated its strategic objective in response to the countywide crisis of opioid addiction and the rising incidents of drug overdoses, specifically due to Fentanyl. The Subcommittee's goal was to systematically evaluate the present strengths and weaknesses and to discern potential areas of opportunity, aiming to mitigate Fentanyl usage and its associated overdoses throughout the county.

This strategy involved a special emphasis on forging deeper relationships with community engagement stakeholders. In pursuit of realizing this objective, the AOD was committed to persistently identifying, engaging, and assimilating insights from stakeholders who were thoroughly involved in the prevention and treatment of individuals affected by this overwhelming crisis. The information garnered served a dual purpose: primarily, to identify domains where success had been achieved by leveraging existing resources, and secondarily, to detect areas exhibiting gaps in the current process. Subsequent to this comprehensive data analysis, the AOD delivered to the full BHAB a detailed report.

This report proposed potential policy amendments and procedural improvements, which could be incorporated into a future communiqué by the Board of Supervisors if they chose to do so. Additionally, it is important to note the following:

1. The AOD aimed to provide specific and actionable recommendations to the community engagement team concerning county-led initiatives.
2. The team dedicated time to discussing these recommendations in detail.
3. An ongoing dialogue was encouraged to understand what prevention measures were most effective for young individuals.
4. Finally, the subcommittee intended to suggest strategies for improving access to resources and tools such as Naloxone (commonly known as Narcan), particularly for younger demographics and disadvantaged groups.

AOD Subcommittee Report: Input & Speakers

At AOD Subcommittee meeting, we had the pleasure of having various experts present on distinct topics related to opioid overdose surveillance, prevention strategies, and harm reduction initiatives.

Dr. Wilma J. Wooten, M.D., M.P.H., serving as the Public Health Officer and OD2A Principal Investigator.

Stephanie Lao, M.S.W., the Harm Reduction Program Coordinator.

Deirdre Browner, M.P.H., Senior Epidemiologist, spoke about the County's Overdose Data to Action (OD2A) program. This CDC-funded program is focused on opioid overdose surveillance and prevention strategies to address the opioid misuse crisis.

Their presentation covered the program's initiatives, including the installation of naloxone vending machines and prescriber training modules for safe prescribing practices.

Marla Kingkade, the San Diego County Substance Use and Overdose Prevention Taskforce Facilitator from the Center for Community Research (CCR), also presented at an AOD meeting.

Dr. Roneet Lev also spoke at the meeting, focusing on "Tranq" and its effects on the human body, providing valuable information on this specific aspect of the opioid crisis.

In many separate session, Katherine Briggs, Chief of BHS Communication & Engagement Team, and Evan Hodges, BHS North Central & North Coastal Liaison, contributed their insights.

Additionally, representatives from the Rescue Agency, BHS' contractor for the "It's Up to Us" campaigns, shared draft creative concepts for their upcoming Harm Reduction-Naloxone campaign aimed at heavy use and Substance Use Disorder (SUD) populations.

Each speaker/presenter contributed their unique expertise and perspectives to the overall discussion on combating the opioid epidemic in the subcommittee meeting.

AOD Subcommittee Report: Goals and Strategies Achieved

As previously stated, this report proposed potential policy amendments and procedural improvements, which could be incorporated into a future communiqué by the Board of Supervisors if they chose to do so. The AOD met and acceded all goals that were set by doing the following:

1. **The AOD aimed to provide specific and actionable recommendations to the community engagement team concerning county-led initiatives.**

In the AOD Subcommittee's efforts to enhance community engagement and effectiveness in addressing the opioid crisis, a strategic approach was adopted in tailoring resources to the community. This approach focused on making the resources more relevant and aesthetically appealing to the intended users. Recognizing the significance of digital platforms in contemporary communication, the Subcommittee also made recommendations for expanding the use of internet technologies and social media platforms.

Specifically, the Subcommittee suggested leveraging popular platforms such as Instagram, TikTok, and YouTube, with a particular emphasis on YouTube due to its status as one of the most streamed services currently. These recommendations were made with the intention to increase the reach and impact of the resources, ensuring that they are accessible and engaging for a broader audience, especially among younger demographics who are predominant users of these platforms.

By incorporating these modern communication channels, the AOD Subcommittee aimed to amplify its message and resources, making them more accessible and resonant with the community. This approach aligns with the evolving landscape of information dissemination and engagement, and it demonstrates the Subcommittee's commitment to adopting innovative strategies in its mission to combat the opioid crisis. These recommendations were made to stakeholders, Rescue Agency, as well as Katherine Briggs, Chief of BHS Communication & Engagement Team. Additionally, a five-page proposal was also given to the community and engagement team on behalf of the AOD subcommittee detailing different names and types of

events that could help make an impact and further assist the community and engagement team.

2. **The team dedicated time to discussing these recommendations in detail.**

In addressing the point about the team dedicating time to discussing these recommendations in detail, the AOD Subcommittee engaged in a collaborative dialogue with the core planning team for the National Recovery Month Celebration (NRMC). This interaction was a crucial opportunity for the Subcommittee to provide feedback and explore potential involvement in the NRMC's proposed interactive art activity.

The NRMC team approached the AOD Subcommittee seeking input on their concept of creating an interactive space where participants could engage in reflective and inspiring activities. The proposed questions for this activity included:

- "What does recovery mean to you / look like to you?"
- "What's a message of hope you'd like to share?"
- "What have you learned on your recovery journey?"
- "How have you learned to best support someone in recovery?"

The Subcommittee recognized the value of this initiative in fostering a deeper understanding and awareness of recovery. The discussion centered around refining the idea and considering the possibility of Subcommittee members participating at the booth to guide the activity. This involvement would not only enhance the experience for participants but also align with the Subcommittee's commitment to community engagement and support for recovery.

Through this collaboration, the AOD Subcommittee aimed to contribute to a meaningful and impactful event that resonates with individuals' experiences in recovery and provides an avenue for sharing messages of hope and learning. The interactive art activity proposed by the NRMC presented a unique platform for achieving these objectives, aligning well with the Subcommittee's focus on community outreach and awareness.

3. An ongoing dialogue was encouraged to understand what prevention measures were most effective for young individuals.

A draft of materials sent via email for AOD to discuss about Fentanyl and Naloxone provided guidance on how to initiate past conversations with youth about drug safety, focusing particularly on the dangers of Fentanyl and the life-saving role of Naloxone. A key approach was to start with general discussions about anxiety, stress, and medications, emphasizing that these feelings are normal and offering suggestions for managing them. The importance of focusing on safety rather than punishment was highlighted, keeping in mind that a young person's brain continues to develop until age 25. The materials explained what Fentanyl is and its risks, noting that even a small amount equivalent to two grains of salt can cause an overdose and that it is often mixed into powders and counterfeit pills without detectable signs.

The materials stressed the importance of educating teens on the availability and use of Naloxone, which can reverse opioid overdoses. They taught that Naloxone is not the only medical attention needed and emphasized the importance of calling 911 after administering Naloxone. The guide encouraged discussing safety with youth who might be using opioids and stressed the importance of looking out for one another, as a person overdosing cannot self-administer Naloxone. It also provided information on how teens could legally access Naloxone at any age, without an ID, either online or from local providers. Recognizing the signs of an overdose was crucial, and the guide outlined symptoms to watch for. Keeping communication open and encouraging teens to learn more about opioid overdose, Fentanyl, and Naloxone was emphasized, along with the availability of the Access and Crisis Line for parents, caretakers, and youth seeking help.

AOD Subcommittee Report: Recommendation

The AOD Subcommittee, under the Behavioral Health Advisory Board (BHAB), has made significant progress in addressing the opioid crisis, particularly the Fentanyl public health crisis, in San Diego County. Based on the achievements and insights gained from our SMART goals and strategic objectives set forth since July 1, 2022, and May 8, 2023, we recommend the following actions to continue and enhance our efforts against this crisis:

1. Expand Community Engagement and Education Initiatives:

- Continue and intensify efforts to increase awareness about the dangers of Fentanyl, leveraging digital platforms such as Instagram, TikTok, and YouTube to reach a broader audience, especially younger demographics.
- Implement community-based initiatives, such as National Recovery Month Celebration (NRMCC), to engage the public in meaningful dialogues about recovery and hope.

2. Data-Driven Approach and Resource Mapping:

- Utilize collected data on age groups affected by Fentanyl, hospital admissions, and overdose fatalities to tailor education and prevention programs more effectively.
- Develop and enhance a strategic mapping system to identify resources and gaps in the community, making this information publicly accessible for better resource allocation and access.

3. Naloxone Access and Education:

- Promote the widespread availability and use of Naloxone, ensuring that individuals, especially teens, are aware of its legal accessibility without an ID and its crucial role in reversing opioid overdoses.
- Educate the community on recognizing overdose symptoms and the importance of immediate action, including calling 911 and administering Naloxone.

4. Foster Continuous Dialogue and Feedback:

- Encourage ongoing discussions within the Subcommittees, stakeholders, and the community to understand the most effective prevention measures, particularly for young individuals.

- Utilize feedback from these dialogues to refine and adapt our strategies, ensuring they remain relevant and effective in combating the opioid crisis.

In conclusion, the AOD Subcommittee is committed to a multi-faceted approach that combines community engagement, data analysis, policy advocacy, and resource optimization. We believe these recommendations will significantly contribute to mitigating the opioid crisis in San Diego County.

Title: Community Engagement Subcommittee Report 1/22/24

Introduction: The BHAB Community Engagement Committee is instrumental in authentically engaging a diverse range of stakeholders, crucial for improving the mental health services care-delivery system. This ensures meaningful opportunities for community input within the Behavioral Health Advisory Board (BHAB).

Mission and Goals: The mission of the BHAB Community Engagement Committee is to facilitate informed stakeholder contributions throughout year-long planning processes. The goal is to enhance the mental health services delivery system by involving a wide community of stakeholders, promoting inclusivity and responsiveness.

Membership: Key members include Katherine Briggs (Chief – BHS Communication & Engagement), Danielle Fettes, Ph.D. (UCSD Health Partnership Team), and representatives from the community and grassroots CBO service providers. Among the members and attendees are members of the BHAB and the BHAB Executive Committee. The CE Subcommittee is chaired by Janice Luna Reynoso, representing District One. Ongoing efforts focus on increasing diversity within BHAB, with cultural representation from each county district and the inclusion of a County supervisor.

Activities and Initiatives: The committee addresses pressing issues related to mental health and substance use, emphasizing increased BHAB membership diversity and community involvement. Strategies involve meeting the community where they are, partnering with CBOs, and enhancing understanding of the CPP process for better community service. The collaboration has led to the community's involvement in the Renewal Reprocurement Request for Information.

Community Outreach and Partnerships: Language accessibility, relationship-building, and community co-facilitation with organizations and members in their hubs are vital aspects of outreach efforts. Plans include specific strategies and timeframes for effective co-facilitation.

Challenges and Solutions: “Meeting the Community Where They Are”, is one of the primary challenges faced by the Community Engagement Subcommittee has been meeting the community where they are. This challenge, however, also presents an opportunity for innovative solutions. Adapting engagement strategies to align with the community's unique needs has been the cornerstone of overcoming these obstacles.

Adapting to Diverse Needs: The community is diverse, and each segment has distinct needs and preferences. Recognizing this, the subcommittee has actively worked towards adapting its engagement strategies to be inclusive and culturally competent. This involves tailoring communication methods, language accessibility, and outreach approaches to resonate with the varied demographics present in the community.

Engaging Priority Communities for Equity: An essential aspect of meeting the community where they are involves intentional engagement with priority communities, including Black, Indigenous,

and People of Color (BIPOC). The subcommittee acknowledges the historical disparities faced by these communities and is committed to addressing them through targeted efforts. This includes focusing on areas such as the Central Region and the Black Community, which have been identified as facing a disproportionate amount of disparities.

Equity as a Focal Point: Equity is not just a goal but a focal point in the subcommittee's conversations. Recognizing that different communities may have unique challenges, the subcommittee is actively working towards ensuring that the strategies employed are equitable and promote fair access to behavioral health resources.

Community-Centric Solutions: Rather than adopting a one-size-fits-all approach, the subcommittee is dedicated to tailoring solutions that emerge from the community itself. This involves active listening, conducting needs assessments, and involving community members in decision-making processes. By doing so, the subcommittee ensures that the solutions implemented are reflective of the community's aspirations and priorities.

Building Trust and Collaboration: Building trust is foundational to successful community engagement. The subcommittee recognizes the importance of establishing trusting relationships with community members, organizations, and leaders. This involves transparent communication, active collaboration, and a commitment to long-term partnerships that go beyond specific initiatives.

In conclusion, while meeting the community where they are poses challenges, the Community Engagement Subcommittee views these challenges as opportunities for growth and improvement. The adaptability and commitment to equitable engagement strategies position the subcommittee to overcome obstacles and contribute positively to the behavioral health landscape in San Diego County.

Impact and Results: The committee's work resulted in increased community involvement, improved understanding of mental health issues, and successful partnerships. Data, testimonials, and success stories highlight the positive impact on the community. BHS Communication and Engagement leadership seek community involvement in upcoming Renewal Reprourement Request for Information sessions.

Future Plans: Ongoing efforts focus on increasing BHAB membership diversity, community participation in meetings, and enhancing outreach strategies. The Community Engagement Subcommittee aims to grow and strengthen relationships with the Community Experience team at UCSD, Community Health Improvement Partners, and BHS regarding the CPPP.

Conclusion: In summary, the Community Engagement Subcommittee is committed to meaningful stakeholder engagement, contributing to a healthier community. The ongoing dedication of the

committee reflects its commitment to fostering positive change in San Diego County's behavioral health landscape.