



County of San Diego

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September 25, 2020

TO: The Behavioral Health Advisory Board (BHAB)

FROM: Luke Bergmann, Ph.D., Director, Behavioral Health Services (BHS)

BEHAVIORAL HEALTH SERVICES DIRECTOR'S REPORT – October 2020

ACTION ITEM: MENTAL HEALTH SERVICES ACT THREE-YEAR PROGRAM AND EXPENDITURE PLAN BOARD LETTER

The Mental Health Services Act (MHSA) provides funding to counties to address a broad continuum of mental health service needs, including prevention, early intervention, system development, and to address the necessary infrastructure, technology, and training to effectively support the public mental health system. MHSA programs provide services to children, youth, and families, transition age youth, adults, and older adults, with an emphasis on individuals who are unserved or underserved. In Fiscal Year 2018-19 MHSA programs served over 78,000 unique individuals. MHSA is comprised of five components: Community Services and Supports (CSS); Prevention and Early Intervention (PEI); Innovation (INN); Workforce Education and Training (WET); and Capital Facilities and Technological Needs (CF/TN).

The County of San Diego (County), Health and Human Services Agency Behavioral Health Services (BHS) department is presenting the recommended MHSA Three-Year Program and Expenditure Plan for Fiscal Years 2020-21 through 2022-23 (Three-Year Plan). As mandated by the MHSA, the Three-Year Plan, inclusive of all programs and expenditures funded by the MHSA, requires approval by the Board of Supervisors prior to submission to the California Mental Health Services Oversight and Accountability Commission (MHSOAC).

The Three-Year Plan, which includes MHSA funding of over \$192.8 million also includes \$400,000 assigned to the California Mental Health Services Authority (CalMHSA) to continue statewide PEI campaigns and local PEI initiatives. This includes Each Mind Matters, an initiative aimed at reducing stigma and encouraging people struggling with mental health illness to reach out for support, and "Know the Signs," a media campaign designed to educate the community on how to recognize the warning signs of suicide and where to find professional help.

Since the establishment of MHSA, the County has invested over \$1.5 billion of MHSA funding to expand and enhance critical mental health programs. Continued investments in MHSA services through the implementation of the Three-Year Plan supports the goal of dramatically shifting how residents of San Diego county access care and support for behavioral health needs through the continued development of a regionally distributed model of care focused on prevention and continuous care, rather than perpetual crisis.

Adding increased complexity this year, the COVID-19 pandemic has significantly and disproportionately impacted our most vulnerable populations and has severely impacted financial, staffing, infrastructure, and other resources vital to our system, creating new and ongoing challenges. However, BHS remains committed to the delivery of essential services since the need is more pressing than ever. To maintain continuity of essential services going forward, BHS continues to work diligently to identify short-, mid- and long-term mitigation strategies to address the anticipated decrease of MHSA revenues resulting from the pandemic, along with service delivery, staffing and infrastructure challenges.

It is THEREFORE, staff's recommendation that your Board support the approvals and authorizations needed to implement these recommendations.

UPDATES FROM THE BHS ADULT AND OLDER ADULT (AOA) SYSTEM OF CARE

Advancing the Behavioral Health Continuum of Care Through Regional Collaboration and Innovation

Expansion of Regional Crisis Stabilization Units (CSU)

Palomar Health

On August 4th, 2015, the County Board of Supervisors (BOS) approved the execution of a contract with Palomar Health (Palomar) to provide specialized crisis stabilization services. On July 1, 2020, Palomar moved into their new modular building next to the Palomar Hospital in Escondido. The two-story, modular building is a state-of-the-art facility located directly outside the emergency room at the hospital. This building will accommodate eight additional recliners increasing the total number to 16 (by end of 2020). Crisis stabilization services are designed to prevent clients from being admitted to a more intensive inpatient setting that can cause disruption to their lives. In June 2020, Palomar was able to divert 86.9% of their clients from admitting to their inpatient program. The service is designed to last 24 hours and provides intensive assessment, medications, monitoring, peer support and case management services. Palomar is also able to support clients with one-time funding for housing and other basic needs.

Paradise Valley

On August 4th, 2020, the BOS approved the execution of a contract with Paradise Valley to provide specialized crisis stabilization services. This newest CSU will be housed at Bay View Hospital and will serve the South Region. This site will accommodate 12 recliners and provide all services listed above. The opening date is to be determined. The Paradise Valley CSU is strategically placed to help meet the needs of the local Hispanic community who, as recent research shows, are disproportionately experiencing increases in psychological distress compared with other racial and ethnic groups.

North Coastal Live Well Health Center

The North Coastal Live Well Health CSU is an outpatient program operating 24-hours per day to provide community-based, crisis stabilization services to both voluntary and WIC 5150 clients. The program is designed to deescalate the severity of a person's level of distress and/or need for urgent care associated with substance use or serious mental illness (SMI), while promoting care in a voluntary recovery-oriented setting. This CSU will be located at the North Coastal Live Well Health Center at 1701 Mission Avenue in Oceanside, where an array of other behavioral health services are provided and will include care coordination to ensure clients are connected to ongoing behavioral health and community support services.

The construction planning process is approximately 90% complete and construction is anticipated to be completed in October 2021. The service procurement process is expected to begin within the next 2-4 weeks.

Mobile Crisis Response Teams (MCRT)

On June 25, 2019, the Mobile Crisis Response Team (MCRT) pilot project in the North Coastal Region was approved by the BOS. The MCRT provides non-law enforcement, crisis intervention services in the field. Working in tandem with the Access and Crisis Line, teams consisting of a clinician and a peer will respond to individuals experiencing a behavioral health crisis with the goal of de-escalating the crisis and diverting the client from higher and more costly levels of care. After MCRT has mitigated the immediate crisis, the enhanced care coordination component will allow for care coordinators to assist clients further, linking them with appropriate and ongoing services.

On June 23, 2020 (26), the Board also approved a recommendation to fully fund an expedited rollout of MCRTs countywide.

Development of the North Coastal MCRT pilot program is in progress and planning for the additional teams is underway in collaboration with local law enforcement entities.

COVID-19 BHS Response

In response to the COVID-19 pandemic, BHS partnered with Public Health Services (PHS) and other HHS departments to ensure that the behavioral health needs of individuals impacted by COVID-19 are addressed.

Mental Health Systems, Inc. (MHS) and the San Diego Convention Center (Convention Center)

Effective April 1, 2020, several contracts with MHS were amended to deploy numerous services at the Convention Center in partnership with the San Diego Housing Commission (SDHC), City of San Diego, County PHS, Medical Care Services, homeless services providers, and a number of other community service agencies to ensure temporary shelter space that would allow for physical distancing, COVID-19 testing, and connections to services. MHS provides onsite crisis intervention, medication management, individual counseling services, and referrals to additional behavioral health services. As of September 1, 2020, MHS provided over 5,000 contacts/service encounters to guests at the Convention Center.

Telecare Tesoro/Convention Center

Effective May 1, 2020, Telecare Tesoro was co-located at the Convention Center to accept referrals for individuals who met criteria for Assertive Community Treatment (ACT) eligibility and project-based housing vouchers through SDHC. To date, 25 housing vouchers have been made available along with treatment slots for guests on site.

Public Health Lodging Sites

Effective April 1, 2020, several contracts with Telecare were amended to deploy staff to the public health lodging sites in partnership with County PHS to provide on-site behavioral health services for COVID-19 positive individuals requiring safe isolation. Telecare provides 24/7 support at the public health lodging sites to include crisis intervention, case management, treatment/safety planning, coordination with external providers, and discharge planning. As of September 1, 2020, Telecare has provided services to more than 1,200 guests at the public health lodging sites.

Housing and Homeless Services

Local Government Special Needs Housing Program (SNHP)

BHS recently completed the lease-up of the first two developments in the South Region that have dedicated MHPA units: San Ysidro Senior Village and Benson Place. Both developments serve individuals with SMI who are experiencing homelessness and provide clients access to project-based housing vouchers through SDHC.

San Ysidro Senior Village is a services-only MHPA development in San Ysidro with 12 units dedicated to MHPA-eligible older adult tenants. Benson Place is a hotel/motel rehabilitation project in Otay Mesa that contains 25 MHPA units. It is the fourth development to become operational that was funded, in part, by the Local Government SNHP, which provides funding to affordable housing developers to create permanent supportive housing units for MHPA-eligible clients. This program is funded by \$20 million in MHPA funding allocated by the BOS, and will ultimately lead to the creation of 128 supportive housing units (88 currently operational and 40 currently in development) and the augmentation of Capitalized Operating Subsidy Reserves to maintain the affordability of MHPA units.

The lease-ups of Benson Place and San Ysidro Senior Village bring the total number of operational (funded and services-only) MHPA permanent supportive housing units to 364.

No Place Like Home

In August 2020, The Iris at San Ysidro (Iris) housing development was the fifth development countywide to receive conditional funding and services commitment through the No Place Like Home (NPLH) program. NPLH provides loans to affordable housing developers to create permanent supportive housing units for individuals with an SMI or Serious Emotional Disturbance diagnosis who are experiencing homelessness or chronic homelessness, or who are at risk of chronic homelessness. Like SNHP, supportive services for these NPLH units will be provided by BHS. Unlike previous MHPA-funded housing programs, NPLH loans are administered locally by County Housing and Community Development Services. Iris joins four other developments with NPLH commitments. The other developments will be located in downtown San Diego, San Ysidro, Carlsbad, and Chula Vista. The five developments combined will contain a total of 148 NPLH-funded units, which will be deed-restricted to serve this population for 55 years, and the first developments are scheduled for completion beginning in 2022.

The 2nd round NPLH Notice of Funding Availability (NOFA) was released on October 31, 2019; the NOFA is currently open, and additional NPLH funding is still available.

Housing Convention Center Resources

BHS has partnered with SDHC to direct BHS-associated housing resources to eligible Convention Center residents with behavioral health needs. Since April 2020, more than 40 sponsor-based subsidies have been matched to clients and approved through the BHS-contracted Alpha Project Home Finder program, which serves clients enrolled in services at two BHS outpatient mental health clinics in the Central and North Central Regions. BHS has also created a carveout of 25 ACT service slots through BHS-contracted Telecare Tesoro, for eligible individuals at the Convention Center. These ACT service slots provide intensive, wraparound services paired with an array of housing resources, including sponsor-based subsidies through SDHC.

Board of Supervisors Authorization for \$5.4 Million for Supportive Housing Services

As part of the County budget approved on August 25, 2020, the BOS approved \$5.4 million for BHS supportive housing services, funded with one-time State General Funds, to include onsite care coordination and behavioral health services at new housing projects.

DMC-ODS Updates

Residential: The Way Back

The Way Back, a residential Drug Medi-Cal program serving ASAM LOC 3.1 and 3.5, has modified operations to ensure compliance with the Center of Disease Control requirements for a congregate care facility. The measures taken to ensure the safety of clients and staff have included physically distancing beds and chairs in the facility and hiring additional maintenance staff to sanitize and clean more frequently.

During the COVID-19 pandemic, the program has been able to maintain occupancy of at least 90% of the 22 contracted beds and add two additional beds via an amendment to serve clients in need of high-intensity residential services. Overall, the adult residential programs have consistently maintained 90% occupancy of all beds with social distancing in place from July 1, 2020 to present.

Outpatient: Union of Pan Asian Communities

During Quarter 1 of FY 2020-2021, the Union of Pan Asian Communities (UPAC) Substance Use Outpatient Treatment Program made an impressive transition from February 2020 to April 2020: from no telehealth services to offering a majority of their services via telehealth platforms. As of August 2020, 70% of all services provided utilized telehealth.

While most of their client population do have access to technology, those who do not or need assistance come into the clinic where a laptop is used in a sanitized area for access to therapeutic services via telehealth. Clients who are residing in a recovery residence access telehealth with the help of the owners of the residence.

The UPAC Outpatient Clinic has increased DMC services by 12% when comparing data from February 2020 and August 2020.

Opioid Treatment Program: SOAP MAT

Take-home exceptions have been submitted and approved for patients per Department of Health Care Services, Drug Enforcement Administration, and Substance Abuse and Mental Health Services Administration guidelines to reduce possible exposure to and infection with COVID-19. Currently 76% of active patients have take-home medications approved, reducing clinic visits to between five days a week and once a month. Curbside dosing has been offered and implemented for all patients who suspect possible exposure/infection or have reported symptoms of COVID-19.

Telehealth services are being utilized frequently to reduce contact among patients at high risk for infection. This includes intakes and doctor consultations with patients, as well as counseling and case management sessions.

The volume of services at SOAP MAT has remained consistent during the COVID-19 pandemic. When comparing data from February 2020 and August 2020, there was less than a 3% variance in the amount of services provided.

In response to the increase in opioid and Fentanyl use, SOAP MAT led an outreach program at Tri-City Hospital. The program provided information regarding access and availability of Opioid Treatment Program (OTP) services.

To support the local community, SOAP MAT delivered close to \$300 worth of school and art supplies, cleaning products, masks, gloves, other personal protective equipment, kitchenware, milk, and miscellaneous goods to Project HOPE, a homeless shelter in Vista.

SOAP MAT has launched social media campaigns amid the COVID-19 pandemic on various platforms with the intention to deliver education on OTP services to a wide audience and promote the use of Medication Assisted Treatment.

Medication Assisted Treatment: ACTION East

The ACTION East Program provides supportive housing services integrated with SMI and substance use disorder (SUD) treatment services for individuals experiencing homelessness in the East Region. ACTION East operates two treatment program tracks. These include Short-Doyle/Medi-Cal MHSa Full-Service Partnership (FSP) ACT and recovery services, and Drug Medi-Cal certified Alcohol and Other Drug (AOD) treatment and recovery services.

ACTION East began offering Medication Assisted Treatment (MAT) in May 2020, adhering to all applicable federal, state, and local guidelines in the administration of FDA-approved medications for SUDs, including the utilization of long-acting injectable Naltrexone. The first client utilization of MAT was in June 2020. By the end of August 2020, there have been a total of eight MAT evaluations. Currently, three clients are receiving MAT. ACTION East is projected to serve 98 clients in FY 2020-21.

Supported Employment

Five-Year Strategic Employment Plan for Fiscal Years (FY) 2020 to 2024

Maximizing employment opportunities has been a key goal for BHS; the new Five-Year Strategic Employment Plan FY 2020 to 2024 (Plan) outlines a clear vision for continued expansion of employment opportunities for people with behavioral health issues, including investing in

evidence-based and evidence-informed practices that are effective in increasing employment opportunities.

The Plan was developed through in-depth consultation with key community, consumer, and business partners, including focus groups and interviews over a three-month period. The Plan provides an overview of the County's investments in behavioral health and employment services and the highly prioritized work stemming from the initial Five-Year Strategic Employment Plan, which launched the Work Well Initiative in San Diego. In addition, the Plan provides an overview of the Individualized Placement and Support (IPS) Model of Supported Employment, an evidence-based best practice, and how it is being implemented locally. As part of the Plan's roadmap, it was crucial to include an analysis of priority and emerging sectors, and employment opportunities in San Diego county, outlining key opportunities for employment for people living with behavioral health issues. The Plan also identifies gaps that must be addressed and potential resources in achieving these efforts.

The Plan recommends clear goals, objectives, and strategies which form the foundation to maximize employment opportunities and act as key drivers of positive change and greater employment outcomes in the coming years. The goals over the next five years are to:

- Expand access to the IPS Model of Supported Employment;
- Engage employers as key partners in the Work Well Initiative;
- Enhance data collection and analysis;
- Champion peer employment and advocacy to increase peer involvement; and
- Identify and pursue funding opportunities.

East Corner Clubhouse Success Story

Amid the challenges with COVID-19, Community Research Foundations' East Corner Clubhouse (ECC) is thriving. ECC is the only member-driven clubhouse in the County's East Region that assists adults ages 18 and older diagnosed with an SMI, including those who have a co-occurring SUD. A fundamental principle at ECC is the belief that persons affected by mental illness can and do recover. Recovery is enhanced through strong, consistent relationships and strength-based, recovery-focused, integrated services and supports.

Included below is a recent account of how the support at the ECC is positively affecting the lives of people affected by mental illness:

A gentleman came to the ECC initially for Social Security services. He then realized the clubhouse had more to offer and immediately signed up to become a member. He noticed ECC offered employment services and scheduled an appointment with an Employment Specialist. This gentleman had a history of work experience; however, he had not worked since 2016. Before 2016, he had been the primary caregiver for his mother for over a decade. This gap in employment lowered his confidence in gaining employment. Unfortunately, with the current pandemic, COVID-19 exacerbated his depressive symptoms, which interfered with his motivation. The Employment Specialist reached out week after week to follow up with on his employment status. The gentleman was hesitant at first and questioned if he would ever get hired due to his age. Through persistent communication, ECC's Employment Specialist was able to meet with him more frequently, help him re-discover strengths and transferable skills, help him boost his self-confidence, and increase his level of self-care. He came in weekly and applied for jobs, sometimes

two or three per visit. In early August, he was able to secure employment within walking distance of his residence.

Justice Involved Services

Collaborative Courts Programs

Drug Courts

There are four drug courts regionally distributed throughout the county, as well as one juvenile drug court. The contracted BHS SUD treatment program works in collaboration with justice partners, including an assigned judge, the Offices of the District Attorney, Public Defender, and City Attorney, and the Probation and Sheriff Departments to provide an 18-month, highly structured and monitored treatment program for persons who have committed a non-violent, drug-related crime, and who are at high risk for recidivism and high need for SUD treatment. These programs serve approximately 110 persons in each court at any given time. Emphasis is placed on sobriety, housing, employment, education, and family re-unification. Criminal charges may be reduced or dismissed upon successful completion of the program. Drug Courts entered the Drug Medi-Cal Organized Delivery System (DMC-ODS) in December of 2019.

Re-entry Court

The re-entry court operates in the Central Region and is similar to the drug courts in program structure and collaboration between BHS-contracted service providers and justice partners. This program serves up to 60 persons at a time who have engaged in behavior that has violated their community supervision (probation) and who have been assessed as having a SUD. Some participants also suffer from co-occurring mental health disorders. Emphasis is placed on sobriety, housing, employment, education, and family re-unification. Successful program completion can result in early termination of probation.

Behavioral Health Court

Operating in the Central Region, the Behavioral Health Court (BHC) applies the Collaborative Court model for persons who are diagnosed with SMI and who have engaged in criminal behavior in the community. The BHC program was recently augmented with funding from the Department of State Hospitals and now serves up to 90 persons at a time, including up to 30 diversion clients with this new funding. The BHC program provides intensive mental health treatment with concurrent emphasis on sobriety, stable housing, linkage to benefits and/or employment, re-unification with family, and employment/education when appropriate. Successful program completion may result in the reduction or dismissal of charges.

Other Diversion Programs

Serial Inebriate Program (SIP)

SIP is a collaborative effort involving a BHS-contracted service provider, courts, police, emergency medical services, and hospitals to provide services to “chronically homeless inebriates.” SIP provides outpatient SUD treatment and housing for persons who have been sentenced, as an alternative to custody, serves 56 persons in transitional housing with another 65 clients in permanent supportive housing, and provides case management services for another 100 individuals experiencing homelessness who are referred to the program through SDHC.

Inebriate Sobering Center

This program provides a safe alternative to custody for “public inebriates” who are in need of sobering services in lieu of an arrest. This includes individuals that are under the influence of alcohol and (with more recent PLEADS* augmentation) other intoxicants. The program takes in individuals who have been transported and subsequently dropped-off by law enforcement. Individuals receiving these sobering services (minimum of four hours) are provided with counseling and linkage to treatment resources in the community once they regain functional capacity. Multiple contacts within a one-month period result in a mandated referral to SIP.

*PLEADS: City of San Diego's Prosecution and Law Enforcement Assisted Diversion Services.

Psychiatric Emergency Response Team (PERT)

PERT is a collaboration between BHS and law enforcement agencies around the throughout the county, and pairs a licensed mental health clinician with a uniformed law enforcement officer in the field. The PERT clinician provides mental health and substance use consultation, case coordination, linkage, and limited crisis intervention services to individuals who come into contact with law enforcement. PERT teams can transport individuals to a hospital or other treatment facility as appropriate. There are currently 72 PERT teams allocated Countywide.

Justice Involved Assertive Community Treatment (ACT) Programs

Center Star ACT

Utilizes the ACT model of care to provide comprehensive, multi-disciplinary, field-based mental health services for justice-involved clients experiencing homelessness who are diagnosed with SMI and co-occurring disorders. This program operates countywide and serves approximately 200 persons at a time with the ability to step clients down to a lower level of care within the program utilizing a strengths-based case management approach. The program has both transitional and long-term housing resources and is funded through MHSA.

Vida ACT

This program utilizes the ACT model of care, as described above, to serve clients who are diagnosed with SMI, are experiencing homelessness, may have co-occurring disorders, and who are re-entering the community directly from custody. The program specializes in assessing the likelihood of criminal behavior (“criminogenic need”), and ensures these needs are addressed in the treatment plan along with SMI, SUD and housing needs.

AB109 Contracted Mental Health Providers

Telecare PROPS ACT

Utilizes the ACT model of care as described above to serve clients diagnosed with SMI and co-occurring disorders, who have been adjudicated under AB-109, and who are supervised by local Probation. The program has funding for transitional housing along with comprehensive mental health services. This program is funded with AB-109 re-alignment funds and serves up to 60 clients at a time.

Exodus Strengths-Based Case Management

This service includes outpatient mental health services including medication management and strengths-based case management. This program has flex funds to cover various needs including temporary housing. Participants in this program are referred by the Probation Department and

are under supervision as AB-109 offenders. The program serves adults ages 18 and older and serves a minimum of 465 clients annually.

In-Reach Programs

Project In-Reach

Project In-Reach is a collaborative program between BHS mental health services and the Sheriff's Department to engage and serve persons in custody (County Jails) and diagnosed with SMI and co-occurring disorders. This bridging program receives client referrals identified by the Sheriff to be in need of these services and begins services 30-60 days prior to release into the community. Services include physically assisting clients with moving from custody into community-based services. The program continues to monitor and support the client for up to 90 days. Emphasis is on successful transition from custody to community and reduction in recidivism.

Wellness Ministry

Utilizes a similar program model to the program described directly above with the added element of pairing a religious pastor with a mental health clinician providing these services. This program serves the same population as described above with the same outcome objectives. Emphasis is placed on meeting spiritual needs and linking persons served with community religious organizations of the clients' choice.

Other BHS Programs with Justice Intersections

Public Defender Unit

The Public Defender Unit is a collaboration between the Office of the Public Defender and BHS mental health services. BHS provides funding for clinicians to screen and assess clients identified and referred by defense attorneys as needing services for SMI. Embedded clinicians identify level of mental health need and link clients with services in the community such as ACT and Outpatient Mental Health Clinics.

In Home Outreach Team (IHOT)

IHOT serves as the starting point of a treatment continuum with the goal of linking and connecting individuals with SMI to appropriate services and, if eligible, referring individuals to Assisted Outpatient Treatment (AOT). Referrals may come through hospital staff, family members, HHSA's Homeless Outreach Teams, PERT, law enforcement, crisis residential centers, jails, etc. Field-based teams generally consist of a licensed clinician, case manager, family support specialist, and a peer specialist who all work to engage the person in need in a comfortable setting, which allows the team an opportunity to build a trusting relationship. Although this coordinated approach is typically successful in linking individuals to treatment and other needed services, there are some participants who remain resistant to engagement and may meet the nine criteria under Laura's Law. IHOT may refer an individual for a Laura's Law evaluation by an AOT Clinician (embedded in the IHOT program) if, after several attempts, engagement efforts have been unsuccessful. The evaluation will determine if the path to court-ordered treatment via AOT is appropriate.

Assisted Outpatient Treatment (AOT)

Once the AOT clinician from the IHOT program has determined that an individual appears to meet the nine criteria for AOT, they are referred to an AOT program which is an FSP/ACT program. This FSP/ACT program provides a continuum of services with the goal of improving the quality of

life of participants and supporting them on their path to recovery and wellness, as well as preventing decompensation and cycling through acute services (i.e. psychiatric hospitalization) and incarceration. Following IHOT involvement, a participant who continues to be resistant to treatment may enter the AOT program either voluntarily or through a court process, which may include opting to enter voluntarily (via a settlement agreement) or an AOT court-order. Regardless of the way in which an individual is referred, the program relies on a highly collaborative, field-based team to provide intensive services to prevent further decompensation.

Proposition 47 Funded Programs

Prop 47 took effect in 2014 reducing certain drug and property offenses from felonies to misdemeanors. The State redirected prison savings to grants for community services, and BHS is a recipient of these grant funds.

San Diego Misdemeanants at Risk (SMART) Program

The SMART Program is a collaboration between BHS, the City Attorney's Office, and the Public Defender's Office. This program assists low-level misdemeanor offenders who cycle through the system of care without accessing services that are available to them. The SMART Program prioritizes chronic offenders with complex social needs. Services include care coordination and housing.

Strengthening Lives Through Treatment and Holistic Services (StrengTHS) - Central East Regional Recovery Center

Clients are referred by the Central Court(s) to receive an in-person screening while at the court by an in-court liaison. Linkage is provided to behavioral health and case management services for individuals with a primary SUD or co-occurring mental health condition(s) and who have committed an offense impacted by Proposition 47.

North County Lifeline Recovery for Life

This program is designed to serve transitional age youth (TAY) and adults. Participants in this program are referred by the courts and receive wrap-around services including mentoring, academic support, and work-readiness training with the goal of early intervention and positive redirection. This program includes in-court screenings to reach potential clients while they are in the courthouse and works in close contact/collaboration with the Office of the Public Defender and court officials.

Respectfully submitted,



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