



County of San Diego
HEALTH SERVICES ADVISORY BOARD
Meeting | Zoom | CAC Rm 302

Tuesday, May 13, 2025 3:00pm to 5:00pm
MEETING MINUTES

SEAT	DISTRICT	PRIMARY	ALTERNATE	ATTEND	PRESENTERS	HHSA SUPPORT
1	1				Receive Year-Two Progress and Impacts for the Sustainable, Equitable, and Local Food Sourcing Program and B-75 Policy and Update on Countywide Food Contract, Elizabeth Hernandez, PhD , Director, Public Health Services Administration; Allen Hunsberger , Director, Department of Purchasing and Contracting; Meghan Murphy , MPH, Health Planning and Program Specialist, Maternal, Child, and Family Health Services Branch	Sayone Thihalolipavan , M.D., M.P.H., Public Health Officer, PHS, HHSA
2	1	Dr. Suzanne Afflalo	Samhita Ilango IP	✓		Elizabeth Hernandez, Ph.D. , Director, PHS, HHSA
3	2	Barry Jantz, CHAIR				Jennifer Tuteur, M.D., FFAFP , Chief Medical Officer, MCS, HHSA
4	2	Victoria Floyd				Jamie Beam, M.P.A. , Director, MCS, HHSA
5	3	Todd Walters				Adrienne Yancey, M.P.H. , Assistant Director, PHS, HHSA
6	3	Deanna Alexander-Myers IP		✓		Anuj Bhatia, DrPH. , Deputy Director, PHS, HHSA
7	4	James Lepanto IP		✓		Denise Lozares , Director of Nursing, PHS, HHSA
8	4	Geysil Arroyo, VICE CHAIR IP		✓		Rhonda Freeman, M.P.H. , Branch Chief, Assistant Medical Services Administrator, MCFHS, PHS, HHSA
9	5					Romina Morris , Departmental Budget Manager, PHS Admin, PHS, HHSA
10	5					Joshua Beidler, M.S. , Admin Sec II, PHS Admin, HHSA
11	SDC Med Soc	Paul Hegyi	Jennipher Ohmstede		County Health and Human Services Agency (HHSA) FY 25/26 Budget Presentation, Charissa Japlit , Assistant Group Finance Director, HHSA	Jessica Morales , Office Support Specialist, PHS Admin, HHSA
12	HASDIC	Dimitrios Alexiou	Caryn Sumek Z	✓		Talq Tera , Information Technology Analyst, PHS Admin, HHSA
13	HC Partners	Tim Fraser	Lauren Abrams	✓		
14	Consumer Center	Joanne Franciscus	Kris Jacobs IP	✓		
15	BHAB	Judith Yates IP		✓		
16	Healthy SD-PRO	Dr. Harriet Seldin IP		✓		
17	Healthy SD-Con	Jack Dailey IP	Alexander Perez	✓		
18	3		Dorothy Greene			
19	3		Aida Galindez IP	✓		
20	2		Besma Coda			

Attendance Key: **IP** = In person, **Z** = Zoom

<p>I. WELCOME & INTRODUCTIONS</p>	<p>A. Roll Call a. Geysil Arroyo called the meeting to order at 3:00 PM.</p> <p>B. Remarks from the Chairperson</p> <p>C. Approval of May Agenda a. The motion to approve the agenda was made by James Lepanto and seconded by Jack Dailey. b. Roll Call: All members in attendance voted Aye.</p> <p>D. Approval of April Meeting Minutes a. The minutes were amended to note that Geysil Arroyo and Dr. Harriet Seldin were absent from the April meeting. b. The motion to approve the minutes was made by Dr. Harriet Seldin and seconded by Jack Dailey. c. Roll Call: All members in attendance voted Aye except for Geysil Arroyo, Kris Jacobs, and Lauren Abrams who abstained.</p> <p>E. HSAB Attendance Confirmation a. Barry Jantz was absent due to just cause.</p>
<p>II. PUBLIC COMMENT</p>	<p>There was no public comment.</p>
<p>III. CONSENT ITEMS</p> <p>A. HIV Services, Lauren Brookshire, MSW, MPH, Assistant Medical Services Administrator, HIV, STD and Hepatitis Branch</p> <p>B. Authorize and Waive B-29 Policy for University of California San Diego Grant Funding from Centers for Disease Control and Prevention Center for Forecasting and Outbreak Analytics, Jeffrey Johnson, MPH, Assistant Medical Services Administrator, Epidemiology & Immunization Services Branch</p>	<ul style="list-style-type: none"> • Motion to approve the consent item was made by Judith Yates and seconded by Lauren Abrams. • Roll Call: All members in attendance voted Aye. <ul style="list-style-type: none"> • Motion to approve the consent item was made by Jack Dailey and seconded by Deanna Alexander-Myers. • Roll Call: All members in attendance voted Aye

IV. ITEMS FOR APPROVAL

- A. Receive Year-Two Progress and Impacts for the Sustainable, Equitable, and Local Food Sourcing Program and B-75 Policy and Update on Countywide Food Contract, **Meghan Murphy, MPH**, Health Planning and Program Specialist, Maternal, Child, and Family Health Services Branch; **Allen Hunsberger**, Director, Department of Purchasing and Contracting; **Casey Ng**, Foodshed Small Farm Cooperative

Item #19: Receive Year-Two Update for the Sustainable, Equitable, and Local Food Sourcing Program and Board Policy B-75 and Receive an Update on the Countywide Food Contract (Districts: All)

Allen Hunsberger, Director, Department of Purchasing and Contracting
Meghan Murphy, Health Planning and Program Specialist, Public Health Services

May 13, 2025



Background – Sustainable, Equitable, and Local Food Sourcing Program & Policy



- American Rescue Plan Act Framework including \$20M for food assistance *(June 2021)*
- Implementation of the Sustainable, Equitable, and Local Food Sourcing Program and directed the development of a Policy *(January 2022)*
- Received the Sustainable, Equitable, and Local Food Sourcing Framework and directed return for consideration and adoption of final policy *(June 2022)*
- Adopted the Sustainable, Equitable, and Local Food Sourcing Policy and directed return for updates on Year-Two implementation with progress and impacts *(December 2023)*



Background – Countywide Food Contract



March 12, 2024 (12) Board of Supervisors Action:

- Authorize a competitive procurement for the Countywide Food Contract incorporating Board Policy B-75.
- Require contracted provider track data and present evidence of successful implementation of Board Policy B-75.
- Report back on the data resulting from contracts before options years.
- Develop an action plan to find, uplift, and cultivate local businesses to serve as providers under the contract in partnership with local stakeholders.



Values-Based Food Sourcing

1. Local Sourcing
2. Equity Informed Sourcing
3. Elevated Labor Standards
4. Organic or Regenerative Certification
5. Low-Carbon Intensity
6. Nutritional Co-Benefit



County Food Service Operations Fiscal Year 2023-24



Health and Human Services Agency

- Aging & Independence Services
- County Psychiatric Hospital
- Edgemoor Hospital
- A.B. & Jessie Polinsky Children’s Center
- Ryan White HIV/AIDS Food Services Program
- San Pasqual Academy

Budget: **\$16,542,764**
Meals Served: **2,314,106**

Public Safety Group

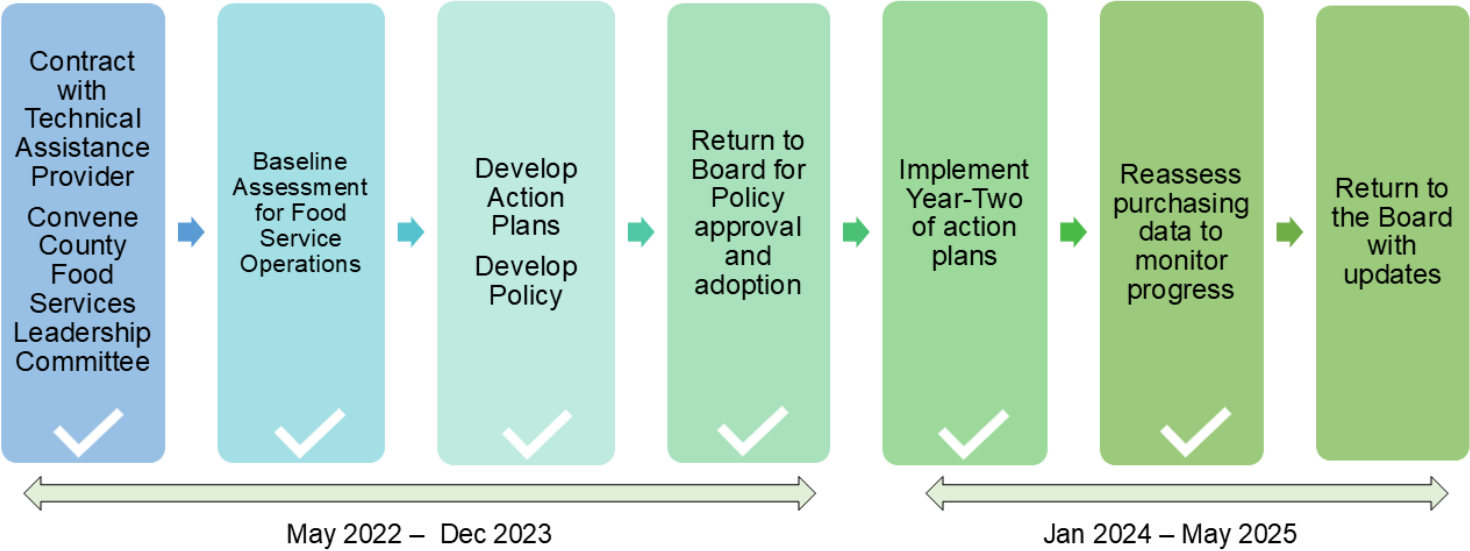
- Probation Department
- Sheriff’s Office

Budget: **\$14,045,976**
Meals Served: **5,729,334**

County of San Diego Total

Budget: **\$30,588,740**
Meals Served: **8,043,440**

Program and Policy Timeline



Board Policy B-75 Overview

Focuses on Program requirements for County administered food service operations. These include:



Develop, maintain, and progress towards action plans



County of San Diego Food Service Leadership Committee Meetings



Collecting and sharing annually food and beverage purchasing data related to food service operations



Year-Two: Strategic Focus

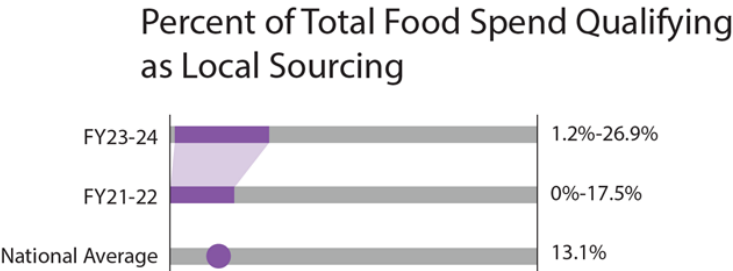
- Each food service program and operation has their own Action Plan to guide progress in value category purchases
- Collective actions emerged from Action Planning process to support all operations
 - Working with vendors to obtain data on where items were grown, produced, and/or manufactured
 - Leveraging collaborative purchasing opportunities across food service operations
 - Increasing local purchasing
 - Menu options that qualify for the Nutritional Co-Benefit and Low Carbon Intensity value categories
 - Budget neutral approach



Year-Two: Progress and Impacts



County of San Diego Assessment for Food Purchases in FY 21-22 and FY 23-24



**Data Subset: Countywide Food Contract
(Sysco Foods)**

- Local Sourcing: Showed an increase compared to baseline with the top of the range increasing from 0.4% to 7.4%



Year-Two: Progress and Impacts



County of San Diego Assessment for Food Purchases in FY 21-22 and FY 23-24

Percent of Total Food Spend Qualifying as Elevated Labor Standards



Data Subset: Countywide Food Contract (Sysco Foods)

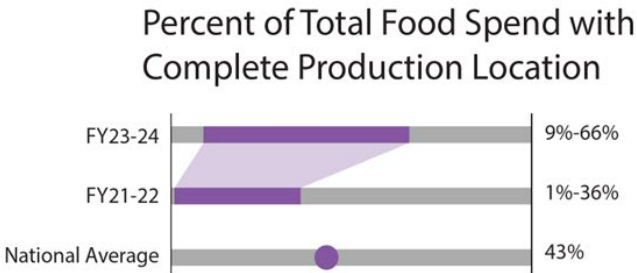
- Showed an increase compared to baseline with the top of the range increasing from 33.1% to 40.3%



Year-Two: Progress and Impacts



County of San Diego Assessment for Food Purchases in FY 21-22 and FY 23-24



Data Subset: Countywide Food Contract (Sysco Foods)

- Showed an increase compared to baseline with the top of the range increasing from 4% to 66%



Year-Two: Progress and Impacts



County of San Diego Assessment for Food Purchases in FY21-22 FY 23-24

Percent of Total Food Spend Qualifying
as Equity-Informed Sourcing



Data Subset: Countywide Food Contract (Sysco Foods)

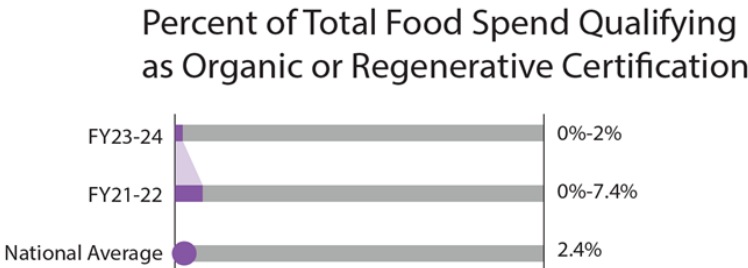
- Top end of the range stayed the same at 1%



Year-Two: Progress and Impacts



County of San Diego Assessment for Food Purchases in FY21-22 FY 23-24



Data Subset: Countywide Food Contract (Sysco Foods)

- Showed a decrease compared to baseline with the top of the range decreased slightly from 0.4% to 0%



Year-Two: Progress and Impacts



County of San Diego Assessment for Food Purchases in FY 21-22 and FY 23-24

Range of Carbon Emissions Related to
Producing Animal Products, Per Meal Basis



Note: Unlike for the other metrics, the goal for this metric is to see a decrease.

Data Subset: Countywide Food Contract (Sysco Foods)

- The top end of the range decreased from 5.66 pounds per CO2 per meal to 4.77 pounds of CO2 per meal representing progress



Year-Two: Progress and Impacts



County of San Diego Assessment for Food Purchases in FY 21-22 and FY 23-24



Data Subset: Countywide Food Contract (Sysco Foods)

- Top of the range decreased slightly, compared to baseline, from 64% to 59%

Countywide Food Contract



Contract awarded in August 2024



County-wide Access



Contract year to date spend of approximately \$7.9 million



Data reporting mechanism established



Stakeholder Engagement Strategy



Harvesting the Local Flavor: the County's Sustainable, Equitable and Local Food Sourcing Policy

The County of San Diego follows a set of guidelines to buy food in a way that is good for the environment, is healthy, and comes from local businesses. We have a contract with Sysco to buy food that we need often and in big amounts. We are looking to buy more food items from local businesses in the San Diego area.

Interest Form

If you are a local farmer, local food supplier, or local food service operator and interested in doing business with the County and Sysco, complete this interest form.

Sysco Contract - 572082

This is also downloadable from our contract search website: <https://www.sandiegocounty.gov/content/sdc/purchasing/docume/sum-contract-search.html>

B-75 Policy

The purpose of this policy is to support a sustainable, equitable, and local food system through County of San Diego food service programs and operations by directing public funds to food and beverage purchases that align with Board of Supervisor identified value categories.



Supplier Interest Form

Launched December 2024 to simplify the vendor entry process and reduce barriers to participation

Stakeholder Meetings

Regular engagement with stakeholder groups to gather input and share information about opportunities

Local Food System Partnership

Collaboration with San Diego-based food hub to increase availability of locally sourced products

Action Plan



- Improve vendor data collection & reporting
- Develop & launch Supplier Directory
- Expand stakeholder engagement & technical assistance
- Promote utilization of special order & Harvest of the Month programs
- Enhance community engagement and visibility
- Ensure compliance with Board Policy B-75 across Countywide Food Contract

Program Implementation Next Steps



Completed Actions



Program established: Baseline assessments complete, Action Plans have been developed, Policy developed and adopted



Action plans implemented and progress monitored through assessments

Ongoing Activities



Food Service Leadership Committee Meetings



Outreach to local food suppliers



Technical Support



Request/collect purchasing data annually



Recommendations



1. Receive an update on year-two of implementation with progress and impacts for the Sustainable, Equitable, and Local Food Sourcing Program and Board Policy B-75.
2. Receive an update on the Countywide Food Contract.
3. Authorize the Deputy Chief Administrative Officer, Health and Human Services Agency, or designee, to apply for additional funding opportunity announcements, if available, to support the Sustainable, Equitable, and Local Food Sourcing Program.

Thank You



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Questions and Comments:

James Lepanto: I want to understand this completely. So, when it's showing for fiscal year 23-24, we know the national average is 13.1%. What is that 1.2 to 26.9? Is that the range of all our contracts?

Meghan Murphy: We're reflecting the data today as a range of all of our food service operations. So, that 1.2 number represents the bottom of the range, and the 26.9% represents the top of the range of all of our food service operations.

James Lepanto: So, that's the range within our contracts and our programs?

Meghan Murphy: Correct. Excellent question, and I will add a note to make sure we clarify that.

James Lepanto: Can you give the definition for equity-informed sourcing?

Meghan Murphy: This value category covers businesses, farms, producers that are included in our underserved communities. There are specific allocations for that. Some of them include veteran-owned, women-owned, etc.

James Lepanto: First of all, I was very impressed by this. I don't know if we've ever had this presentation before, and it was fascinating. Thank you. It's going to take me a little while to keep going through stats and stuff. But I'm just curious, just for my education, the board's education, I'm amazed that we're serving 8 million meals a year. Does that stay pretty stable from year to year? Does that change? Obviously, there's new programs and new funding or something on the board, but does it stay at 8 million annually? Does that continue to grow? Does it decrease?

Meghan Murphy: It roughly stays the same. So even when we did our initial landscape analysis in 2022, we were just under 8 million, and now we're just over 8 million. Of course, there are fluctuations, as you mentioned, in various programs, and some will scale down, some will scale up. For instance, sheriff's is dependent on who's in the population at that time. But by and large, overall, for the County, it stays around 8 million.

James Lepanto: What impresses me in addition is the diversity of the demographic, but the people that we're feeding all have special needs. I saw Ryan White on there, foster care, whatever it might be. So, well done. It's impressive.

Dr. Harriet Seldin: It's been going on for a couple years now, right? It sounds all positive. Is there anything negative about the change from going to a traditional institutional outsource to doing something local and regenerative?

Meghan Murphy: Institutional food procurement is a huge endeavor, as you can see by the number of food service operations we have, the budget, the meals served, etc. It's often slow moving. I will circle back, of course, to say it is incredible that we've seen the progress we have in only a couple of years. I'll re-mention that we intentionally did not set countywide targets in recognition of the challenges, potentially, with the timeline around shifting through their action plan. So, wanting to give food service operations ample time to add this program into their process, integrate it into their contracts as contracts came up for re-procurement, socialize the program, onboard new folks, etc. So, I think some of the inherent challenges with institutional food procurement we've tried to build into the program to mitigate. So, yeah, [with] any large scale effort like this, I think the inherent challenge is just the size and the magnitude and all of the nuances for each operation. But we've done our best to try to support each operation through that process.

Samhita Ilango: You might have said this earlier in the slides, but between the two fiscal years that were being compared, were the budgets the same?

Meghan Murphy: So the budget increased slightly from around roughly \$27 million to \$30.5 million. Part of that is accounted for because in the fiscal year '21 and '22 assessments, we did not include San Pasquale Academy. They were in the process of going through a licensure and a bigger process on whether they would continue with food service operations. So, they were not included in that number initially. They represent about \$1.5 million in the budget, so that accounts for

almost half of the increase. The remainder of the \$1.5 million can be attributed to our older Californians' meal program, for instance, had a state increase in the rates per meal. We had some contracts re-procure where the field of contractors had narrowed. One, for instance, went out of business that used to serve one of our food service operations and so the pool narrowed, and who they got was slightly more expensive. So, there are a couple of different reasons to account for that. None of our food service operators shared that implementing the program cost them additional funds, and we've really worked to implement the program in a way that is budget-neutral.

- A motion was made by **Dr. Harriet Seldin** and seconded by **Jack Dailey**.
- **Roll Call:** All present voted Aye.

Geysil Arroyo: And now we're going to take a little pause in our agenda to welcome our new Public Health Officer, Dr. Sayone.

Dr. Sayone Thihalolipavan: Really, I'm so honored to be here. And thank you for pausing and taking some time. Wonderful presentation. And for those of you—I know many of you or most of you, I think, and I have had the pleasure of knowing and working alongside many of you for years. And you may remember me mostly as Deputy Public Health Officer up until 2019. But since then, I know I have not been as regularly in touch with many of you, with certain exceptions. But I continue to watch what some of what you all are doing and how you're impacting the community. And I think it's incredibly important for us to work with you as our advisory board, not just to advise us, but you are here and placed in these positions because you are representing your communities. And it's bidirectional, right? We also rely on you to help us reach the communities that you represent and that you have trusted relationships with. So increasingly I will be asking for some help with getting the word out and spreading the message to certain communities. But I apologize, I'll go back to the beginning. My name is Sayone Thihalolipavan. And so I'm just honored to be here. I'm starting on Friday. We are so incredibly grateful and thankful that Dr. Kadakia really stepped up in this last year to be Interim Public Health Officer, and she's done a terrific job. And so we're continuing to kind of work out what this is going to look like—me as Health Officer and her as Deputy Public Health Officer. But you will likely be seeing a lot of me as well as Dr. Hernandez and many others on our team. Wonderful team. But I want to say that just being in public health, being most recently in Medical Care Services, two departments which have amazing talents and skill sets, and now we are integrating further to maximally conceptualize how we can think about and address public health issues across our region even more efficiently and effectively. So it's just really an honor to have been in both departments as we undergo this internal integration. And of course, we'll be keeping you all up to date on how that's going. But then I also want to just say that as a Public Health Officer in the region and the fifth largest most populated county, we we have so many different subpopulations. We have so many different regions. And so I think during COVID, as you all know, we we have lost a lot of that trust. And so it's really critical to regain some of that trust that we have lost and also enhance the trust of the communities that we do have trust with, right? And so I know there's a lot of collaboration already going on. And the first principle of medicine is always do no harm. So I really need to spend quality time with the Public Health Services department and really get back up to speed since I haven't been on the executive team since 2019. But as I'm doing that, I'm, of course, going to be looking for opportunities to integrate, look and connect dots across the agency, across the County and not just internal within government. But we know that people don't only listen to

government. And so we have to look beyond government and to our community based organizations, to our community leaders, like many of you. And really--and how to gain back some of that trust. Where are those opportunities where we can help? Where are those synergistic opportunities where we can leverage each other's connections and get past some of our mistrusts, if you will? And so I'm here. You know, there's a lot of issues, of course, always in Public Health Services. You know, just on Friday afternoon, I think there were three press releases going out around Salmonella, the Zoo and the bat exposure--rabies exposure--and then also the Tijuana River. And so there just continues to be a lot of kind of high priority, high visibility efforts and issues or topics. But I do want to remind you, as important as those things are, even though we are having the largest Salmonella outbreak that we've had in the county's history right now, you know, and it is just as important to think about and think through and act on the chronic disease type of work that we're doing. Right. Like the presentation we just had, because when we look at the cause of death of San Diegans, it's no longer infectious disease. Right. It was COVID a couple of years ago was up there in the top five, but it's no longer in the top five. It's things like cancer. It's things like stroke and Alzheimer's. So we cannot keep take our eye off of that either. We have to make sure we're giving just as much attention, even if that's not getting the media attention or the other things that it deserves, as we are to our infectious disease and our communicable disease side. So I just want to make sure that there's a continued emphasis on that area. And many of you know that in New York City, I did work on chronic disease prevention and tobacco control, as well as infectious disease and some other emergency responses there and behavioral health as well. So I think some of you know that I worked with Luke Bergmann back in New York City and we both had the same boss at one time in substance use and overdose prevention in that bureau. And so I know that you are the Health Services Advisory Board, and we have kind of artificially divided Health Services Advisory Board and Behavioral Health Services Advisory Board. And to me, that logistically makes absolute sense because there's so much work there to justify that. But I do want to also look at things from a whole person, which I know many of you do, because some of you sit on both boards or have friends on both boards or people in your organizations on both advisory boards. So we just want to kind of applaud the work that you're doing, the excellent work Public Health Services and Medical Care Services is doing, and take this as an opportunity to just look at everything with a fresh lens again. And I'm here and I'll plan to be here and be available for any questions and seeing how we can collaborate further with the Advisory Board. Thank you.

James Lepanto: I guess my question is, why are you starting on Friday?

Dr. Sayone Thihalolipavan: It's for the County pay periods. But I'm moving. I have a long haul. We're moving from one side of the building to the other side. The Medical Care Services and Public Health Services in the same building. County Operations Center.

James Lepanto: For those of you that are new to the board, Sayone has been a huge supporter of this board. All of the board. We're real fortunate. Especially for all the team. And that's one thing about the County. They work as a team. So I thank all of you.

Judith Yates: Well, a pet peeve of mine has always been the division of the whole person. And I heard you use the word "logistically" and I accept that. These are two huge areas. It takes a lot of different types of expertise at the table. And I

accept that. But I also think that we should be challenging ourselves and challenging our director to help us figure out how we can do a little bit better in the coming years on how to be more integrated. We talk about it. We talk about it at the federal level, at the state level. But you never see any real action at the lower level. And I think we can do that in a variety of ways. Yes, it is logistically a challenge. But the fact that one board never speaks to the other or, you know, it's hardly any knowledge exchange or experience exchange. And I think we're missing some opportunities from some excellent expertise that we have sitting on both of those boards. And that also includes, quite frankly, the Social Services Advisory Board. So, you know, we have a number of boards that I think we could figure out better ways to share expertise and interest in furthering integration. So it's not really a question. It's more like challenging you.

Dr. Sayone Thihalolipavan: Thank you, Judith. I appreciate you keeping us honest. And you're right that, you know, we do have these artificial separations. And even if logistically it's easier, we want to do the opposite and we want to integrate. I know that, for example, Behavioral Health has a contract with many of our community clinics and health center partners, I believe, for integration of physical and behavioral health care. So we are paying people to do that. And we should be that same role model, right? And the way that we have our advisory boards, I didn't even think about the Social Services Advisory Board. It's even better, right? And so we say that we are the largest integrated Health and Human Services agency, which is true locally. And so you're right that we still have continued efforts and opportunities for improvement.

B. County Health and Human Services Agency (HHSA) FY 25/26 Budget Presentation, **Charissa Japlit**, Assistant Group Finance Director, HHSA



FY 2025-26 CAO RECOMMENDED OPERATIONAL PLAN
HEALTH AND HUMAN SERVICES AGENCY
MAY 2025



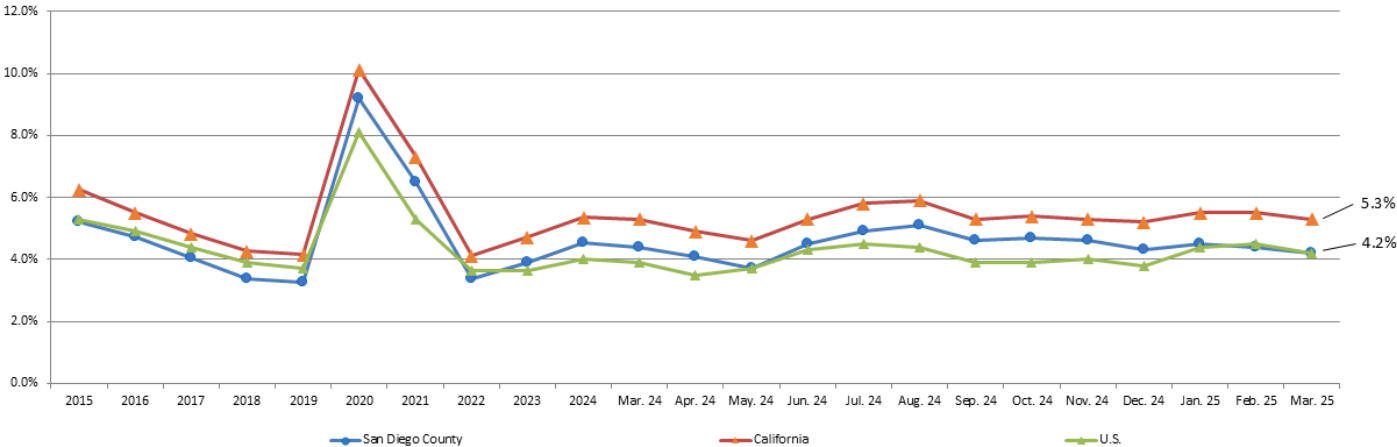
AGENDA

- Economic Updates
- State/Federal Budget
- FY 2025-26 CAO Recommended Budget for HHSA
- Upcoming Budget Events
- Q&A



Unemployment

Unemployment Rate 2015 through March 2025 Comparison



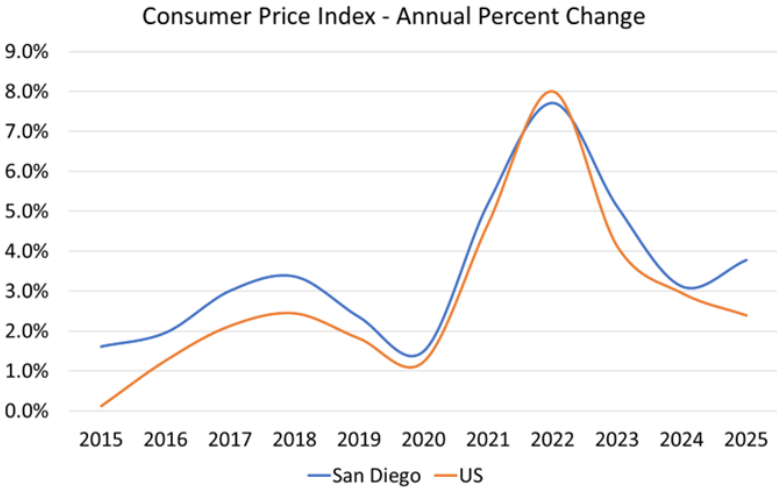
Notes: Data not seasonally adjusted; 2015–March 2025 actuals.
Sources: Actuals: California Employment Development Department,
US Bureau of Labor Statistics



Inflation

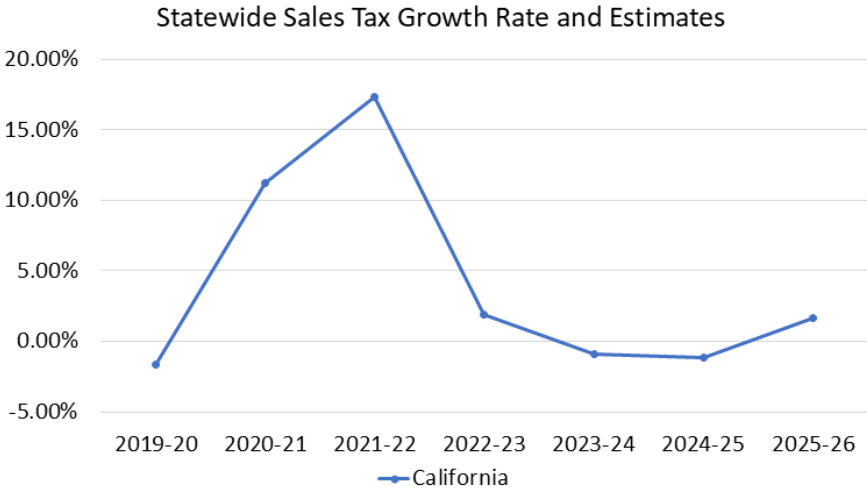


- The trend is slowly moderating but remains above the Fed's 2% target.
- As of March 2025:
 - U.S. Consumer Price Index (CPI) increased 2.4% year-over-year.
 - Inflation in San Diego is higher than national levels with CPI at 3.8%.



Source: Bureau of Labor Statistics. Non-seasonally adjusted figures as of March 2025.

Statewide Sales Tax



Source: State Controller’s Office Half-Percent Sales Tax for Public Safety for actuals from FY2019-20 to FY2023-24. HdL 4Q24 Prop 172 Report for FY2024-25 to FY2025-26 growth estimate.

Sales tax drives HHSA realignment revenue: \$815.2M, 23.2% of HHSA’s Budget



Upcoming Budget: State Budget

- Governor's January Proposed Budget for FY 2025-26
 - More stable than FY 2024-25
 - Modest surplus
 - No significant new investments in programs
 - Placeholder budget
- Contingencies
 - LA fires – which state resources will be shifted
 - Federal funding uncertainty
- **May Revise – May 14**
- Enacted Budget – June 15

Upcoming Budget: Federal Uncertainty

- Over \$1 billion in federal revenue in the proposed HHS budget.
- Medicaid is the largest source, but also included are federal streams for food assistance (SNAP), cash assistance (TANF), and a variety of public health and housing grants.

Key legislative issues:

Reconciliation	Federal Budget
<ul style="list-style-type: none">• Medicaid• SNAP• TANF• Social Services Block Grant	<ul style="list-style-type: none">• President’s ‘skinny budget’ request• Appropriations

Upcoming Budget: County

County Budget Outlook: FY 2025-27



While the County is seeing an amount of revenue growth, the costs of operations continues to increase



Focusing on core services and programs



Planning for the needs of the region in the face of uncertainty



HHSA: Budget Strategy



Prioritize
Mandated Services

- Reduction of discretionary services to reallocate local funding to core mandated services
- Align to State required service levels where outperforming



Consolidate/Restructure &
Streamline Operations

- Reorganization of offices previously under Homeless Solutions and Equitable Communities
- Merger of Public Health Services and Medical Care Services
- Facility footprint optimization

HHSA: Budget Strategy



Maximize Alternative
Funding

- Behavioral Health Revenue under Medicaid Waivers
- Opioid Settlement Funds, Tobacco Settlement Funds
- Grant Opportunities



Delay/Suspend
New Requests

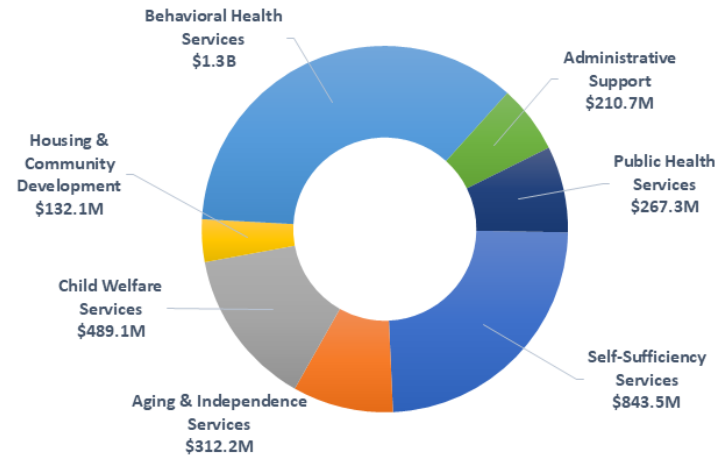
- Staffing
- Discretionary service expansion



Employ Revenue
Stabilization Strategies

- Realignment Bridge

HHSA FY 2025-26 RECOMMENDED BUDGET BY DEPARTMENT: \$3.5 BILLION



Increase of \$65.4 million or 1.9%

- \$29.1M Salaries & Benefits
- \$22.5M Safety Net Benefits
- \$13.8M driven by \$90M increased services & supplies budget in BHS offset by decreases throughout HHSA for one-time investments and various other adjustments.



FY 2025-26 CAO RECOMMENDED BUDGET

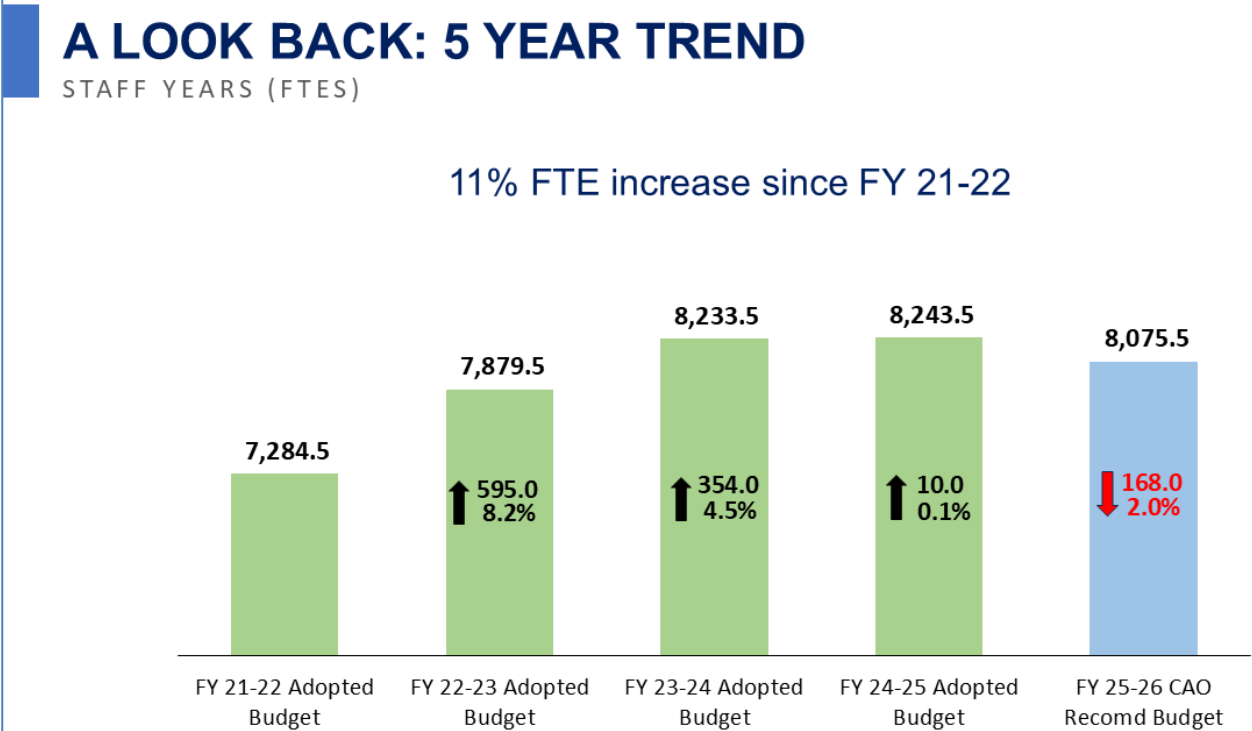
BUDGET BY DEPARTMENT: \$3.5 BILLION

DEPARTMENT	FY 25/26 CAO RECOMMENDED		CHANGE FROM FY 24/25 ADOPTED TO FY 25/26 CAO RECOMMENDED	
	FTE	BUDGET (in millions)	FTE	BUDGET
Administrative Support	456.00	\$210.7	26.00	\$11.8
Aging & Independence Services	651.00	\$312.2	(3.00)	\$7.4
Behavioral Health Services	1,332.50	\$1,257.2	-	\$100.6
Child and Family Well-Being	1,661.00	\$489.1	(11.00)	\$10.1
Homeless Solutions and Equitable Communities	0.00	0.0	(160.00)	(\$112.4)
Housing and Community Development Services	244.00	\$132.1	86.00	\$41.1
Medical Care Services	0.00	0.0	(216.00)	(\$55.0)
Public Health Services	981.00	\$267.3	206.00	\$30.5
Self-Sufficiency Services	2,750.00	\$843.5	(96.00)	\$31.3
TOTAL	8,075.50	\$3,512.1	(168.00)	\$65.4

HHSA FY 2025-26 FTE CHANGE

Decrease of 168.00 net full time equivalents (FTE)

- Decrease of 104.00 staff years to align with available funding and State requirements around timely access to safety net services.
- Decrease in 46.00 staff years due to alignment of resources with slowing revenue streams within discretionary programs.
- Decrease in 18.00 staff years due to internal transfer of positions, consolidation efforts, staffing alignment and focus on core mandated functions.





HHSA KEY INCREASES & CONTINUED INVESTMENTS

Behavioral Health

- \$90 million net increase to build out continuum of care including board and care, residential and outpatient services
- Building capacity as outlined in the Mental Health and Substance Use Optimal Care Pathways
- New Substance Use Residential and Treatment Services (SURTS) and Tri-City Psychiatric facility
- Two new Crisis Stabilization Units

**\$90 million excludes salary and benefit adjustments*



HHSA KEY INCREASES & CONTINUED INVESTMENTS

Safety Net Services and Vulnerable Populations

- \$22 million increase for CalWORKs and General Relief cash assistance
- Continued enrollment and renewals to help people secure and keep their benefits
- In-Home Supportive Services increase of \$11.5 million for a total of over \$223 million
- Strengthen and keep at-risk families together with front-end intervention and prevention with the Family Connection Hub



HHSA KEY INCREASES & CONTINUED INVESTMENTS

Housing and Homelessness

- Starting construction on 60 Troy Street Sleeping Cabins
- Continued \$15M Regional Homeless Assistance Program (RHAP) for 250 households per night
- Over \$6 million in grant funds in the upcoming year to help those experiencing homelessness in the San Diego riverbed and Plaza Bonita areas
- Continuation of \$500-a-month rental subsidy pilot for nearly 400 low-income, rent-burdened older adults
- 16 affordable housing developments partially funded by the County are under construction regionwide. Another 18 developments are in the works.

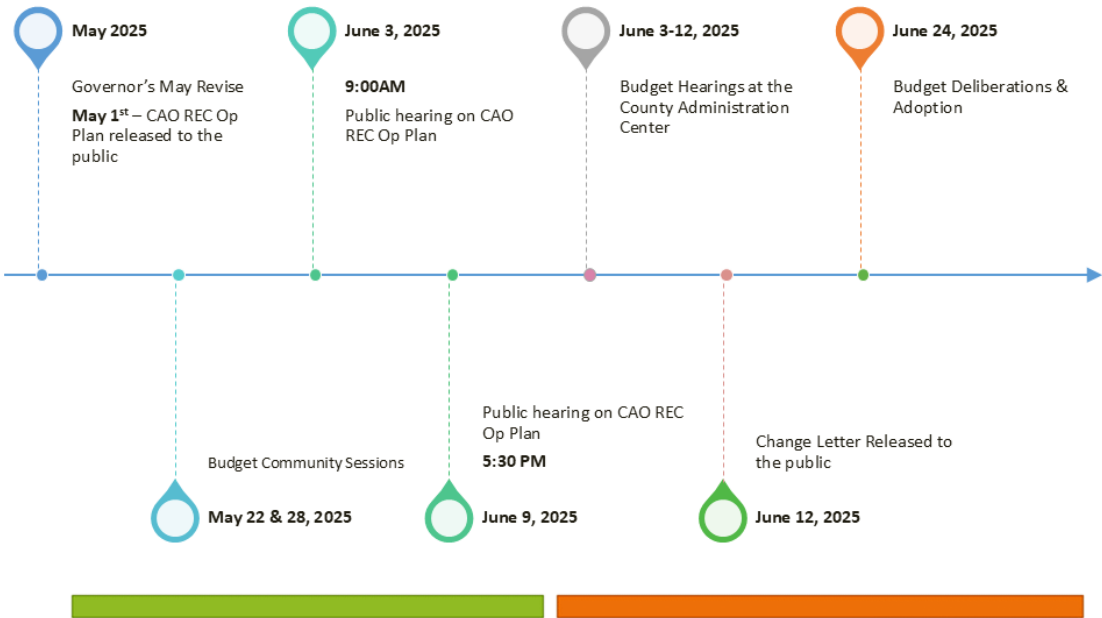


HHSA KEY INCREASES & CONTINUED INVESTMENTS

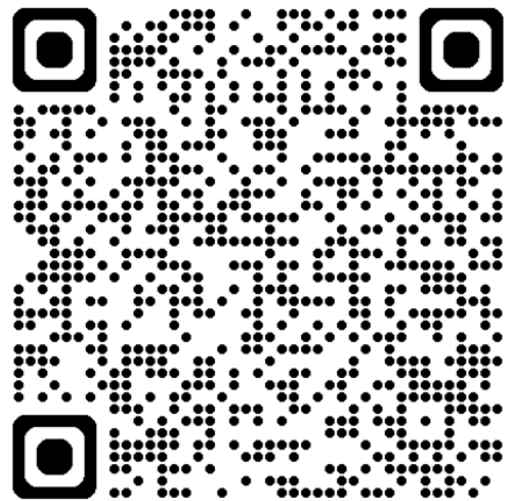
Public Health

- \$267.3 million to prevent epidemics and the spread of disease and ensure access for all through public health centers, home visiting programs and pharmaceutical services.
- Includes funding to operate a new \$93 million state-of-the-art public health lab that will protect the public by testing for infectious diseases

UPCOMING BUDGET EVENTS: KEY DATES



[County Budget 2025 - 27 | Engage San Diego County](#)



CLOSING REMARKS AND Q&A

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"I met with the budget people and we agreed that the cheapest way to fix all of our problems is chocolate."



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Questions and Comments:

James Lepanto: I did appreciate getting that feedback as far as what we knew at this point from the County. And it was pretty comprehensive. But it's so fluid right now. I mean, this is so unknown. And we're talking about a billion federal dollars. That could change on a whim here. So maybe give us an update on what we're expecting, if there is any kind of foreshadowing here?

Sarah Dawe: Sure, I appreciate that. And again, I'm Sarah Dawe, I'm the Deputy Director for Strategy and Intergovernmental affairs for our Economic Development and Government Affairs department. And as you mentioned, it's an incredibly fluid situation. The other big question mark is the state budget as well and how they're going to impact, or how they're going to cope with potential federal cuts as well. So we are waiting for tomorrow to see what the May revise, if it provides any more information for us. But as far as EDGA, we really focus on doing three things during this. We monitor, we inform, we're in constant communication with our congressional and state delegation members, informing them of potential impacts to the

county and to our communities and the clients we serve. And then when we find those appropriate inflection points where there might be a gap to have an influence, that's where we really insert ourselves and advocate as strongly as we can for the county. So, and I'm always happy to come to these meetings. I understand that it's frustrating not to have answers and I feel the same way. But Rissa mentioned that our ICS structure too, our Incident Command Structure, which is very unique for other counties in California. I just came from our CSAT conference. And that's a way where we are centralizing all information that we receive on federal information and can respond in a comprehensive manner. So that doesn't give very much additional information, but please know that we're working every day on that.

James Lepanto: So, I'm not sure how much we can do other than, you know, vote on this, receive the presentation. But I want as much detail proactively as we can. So, would we be able, when's our meeting in June? Is there any way we could get additional updates after the revise?

Sarah Dawe: Of course, yeah.

James Lepanto: Could we get that and another sometime before our next meeting? Because we can always, if we decide to do something with this, or depending on what we decide to communicate, we have done this before, I'm not saying we're gonna do it, but we've called a special ad hoc kind of meeting to specifically address those. We could submit something, or at least get some feedback, whatever it might be. Could we get an update again from not only the county for the May revise, but anything that has changed federally for the County, that we could have that as soon as it's updated, or as soon as changes have been made, possibly by the end of May?

Sarah Dawe: We prepare documents quickly for impacts, potential impacts of the May revise, so we're happy to provide that to Anuj and pass it along to all of you.

James Lepanto: I just wanna make sure that if we are gonna respond in some way, and we'll have to discuss it, that we have the most up-to-date information so we can make an informed decision.

Geysil Arroyo: In terms of process, are you suggesting that the legislative subcommittee needs--

James Lepanto: I'm not necessarily suggesting anything. I think it's gonna be a decision of Barry's. But I think we're not sure how we're gonna respond at this point, and it is late, and it's fluid, so I think at some point, we'll see how to make a decision like we've done before when we've made recommendations of what we want that to be, if anything, at this point. Or we say that we think, because of the fluidity, it's not likely that we're gonna be able to make an informed decision. All I'm saying is the more information we have is gonna help us make that eventual decision, so I don't have a proposal at this point.

Sarah Dawe(?): I'd like to add on to that. You said this situation is very fluid, and we may end up in the next fiscal year still trying to learn more. And so I think that any feedback even received after the deadline is still going to be useful, because we may still be at a decision point where we're making, we may need to make adjustments, and we'll have status letter

adjustments at that point in time, and so I would continue that advocacy on your behalf to provide your input at that point in time as well.

James Lepanto: Maybe we could just include that in the motion, that we will get another additional update by the end of May. Would that be possible for us?

Rissa Japlit: That's possible for me for the May revise, I can do that.

James Lepanto: And for the County document that we got on the federal issues and what, could we?

Sarah Dawe: I know that was a longer term project, so I'm not sure if there's going to be another one completed by the end of May, but I'm happy to provide you additional information, maybe not a formal memo or something that's comprehensive from the county.

James Lepanto: So we'll include that in the motion.

Judith Yates: Yeah, just a brief comment. I want to respect James's concern about where we are in the process, but also I think, I've been very impressed, compared to over the years, how the County has positioned itself to go with the flow. I mean, not to be too light about it, but you have no other choice. It's not as if they can produce something that they don't have, and I think all of us that are paying attention, even on the margins, to what's going on at the federal level, realize that you've positioned yourself very well to at least accommodate that we are in a place up and down, and I think protecting what we are, you know, over and over, you can say we're trying to protect the things that are the most fundamental to public health, to Health and Human Services. And I think that's where we need to stay right now. I'm not too concerned, literally, about a budget going forward, because I know, because you have center in place, command center in place, and because you're taking things as they come. The chances are very good that it will be well into July, perhaps August, before we have some clarity, and at that point, you would have to make changes to some of the budget. So things would come back to us that realign, perhaps, what you told us is what we are going forward. And I don't know, maybe it's just my age, but I can wait, you know what I mean? I'm okay with not knowing. I mean, I would prefer that we did, but it's not, there's nothing the County's going to do to change that. So I think we just need to take, be positioned to accept where they're going. You know, if we were critical of how they were handling it, that would be another issue. So I just want to reinforce, at least from my perspective, that is, criticism does not belong there, you know, and I think we'll just have to go with the flow. If we don't do a letter this year, that's fine with me, because there isn't really a lot to do a letter on.

James Lepanto: And my discussion was in no way critical, because I think the County knows how much I respect what they do and how hard they work. It's just that we have up-to-date information when we make the decision of what we wanna do with this this year. Do we wanna write a letter? Do we not wanna write a letter?

Jack Dailey: With regards to the reductions to self-sufficiency, I'm wondering, if the federal policy regarding work requirements and Medi-Cal's handed down, I imagine that will increase workload on Medi-Cal workers and the self-sufficiency department in particular. It seems like a tough time to be cutting self-sufficiency workers when the additional obligations and verifications relating to work requirements will add additional burdens and may adjust your comfort level with the state-mandated and federal-mandated processing timelines. Because you guys, as you noted, you're well within, you're probably half of what the Medi-Cal application processing timelines are right now. Your call centers are leading the state in terms of responsiveness. But those things may take a hit on their own if they also have to add work requirements. So I'm just wondering how that factors into the analysis.

Charissa Japlit: Absolutely, so that's a really, really good point. And as Judith mentioned, we are on it. We're constantly reassessing. And we are responsive to those assumptions that come down, the different policy changes. And so we will continuously monitor. Like I mentioned and reinforced, we are ahead of the game in terms of where we're at, in terms of the timeframes that it takes to do enrollment at this point in time. So we will regularly monitor where we're at and how we're impacted. And so we have some pretty good tools in place and we have a great working relationship with our self-sufficiency services department. We're always in tune looking at caseloads and looking at the FTEs and how it's impacted. It's not totally a perfect science, but we have that relationship and the knowledge behind it to build in those assumptions and react accordingly.

Jack Dailey: The team there has done a great job with regards to their efficiency and bringing down processing time. It's a shame to have to give some of that up given the circumstances, but it's understandable.

Sarah Dawe: I just wanted to add too, that's one of the points that we recognized as a key part of advocacy strategy, so we sent a letter to our congressional delegation citing the administrative concerns of moving forward with some of these ideas. And this is sometimes before anything is really official, but just bringing to their attention, this may sound like it's cutting waste or whatever it is, but really these are the impacts that the County will see if you make these slight administrative changes. So that's just an example of one of our letters.

Jack Dailey: And those costs are borne by the County, correct?

Charissa Japlit: Yes.

James Lepanto: I just want to add one more thing. One thing that this County does well is being proactive and strategic. And this is impressive. This is new. I feel bad for you all, but this is really a new thing that you're doing as far as being this far ahead of trying to stay minute by minute, literally, because it can change. So it's kudos to the County for being as strategic with this. We're really lucky to have such a cohesive team. When I first heard about the incident command structure, I thought, well, that's what we did when we were responding to Hep A, but we were treating this like an immediate need and we need the reaction. So that's what it takes.

	<p>Samhita Ilango: When you were talking about the reduction in discretionary services and reallocating that money, I was kind of curious, because the ones that you were mentioning, services that were cut, kind of sound important. So I was wondering if down the line, if you were to be able to reintroduce those services, is there a prioritization or is there some sort of community platform for people to voice what they want to reprioritize if there was room in the budget to add these back in?</p> <p>Rissa Japlit: And so there's always the communal process of responding to the budget and having community input put back in. But when it comes to reprioritization, or first of all, well, let me take a step back. There's the change letter process, right? And so things that we've seen reduced in the CAO recommended budget, there could be opportunities in the change letter to provide your feedback as an individual, as an organization. And so there's that opportunity. And additionally, in terms of prioritization, our leadership really takes a role in looking at everything across the board in terms of what are those core mandated services. And so our GMs are having that communication and making those decisions across partners, across the business groups. And so that leadership is really taken into account, being advised by our staff here. And so there is always that regular thought process behind looking at what our priorities are and taking in that feedback. And like I mentioned, in terms of the budgetary process, we have our community engagement sessions in May for the formal budgetary process. Did I mention that?</p> <p>Jamie Beam: Hi, I'm Jamie Beam, the Director for Medical Care Services, and one particular reduction that Rissa mentioned was reducing our home visiting program. And in the presentation, it's hard to provide all the context, but it's about a 12% reduction to the program. So we're not eliminating it by any means. We're just holding vacancies. And all of these reductions, we really use the lens that we need to contract and reduce. But we want to do make sure that we keep capacity so we can expand again when we identify funding streams. And even for that specific program, we're looking at other ways to fund it outside of realignment and like local dollars. And so we have all these activities kind of happening in parallel so that we don't lose those services completely and we can still continue to support the community. But if that gives you context, it's about 90 families out of the 1,000 that we serve. It's about 12%.</p> <ul style="list-style-type: none"> • A motion to receive the budget presentation was made by Jack Dailey and seconded by Samhita Ilango. • Roll Call: All present voted Aye.
<p>C. Election of Officers</p>	<ul style="list-style-type: none"> • No members responded to a poll soliciting candidates for Chair and Vice-Chair, but there was one comment recommending that Barry Jantz and Geysil Arroyo continue to serve. A motion to re-elect Barry Jantz as Chair and Geysil Arroyo as Vice-Chair was made by Dr. Harriet Seldin and seconded by Jack Dailey. • Roll Call: All present voted Aye.

V. CHAIR’S REPORT	<p>A. Youth Engagement:</p> <p>James Lepanto: We're still trying to schedule with Supervisor Lawson-Remer. We had something scheduled and I was out of town so we're rescheduling.</p> <p>B. Proposed Date Changes for HSAB Meetings in July and September of 2025:</p> <p>Dr. Anuj Bhatia: We wanted to propose two meeting date changes for July and September of this year. The current scheduled meetings for the Health Services Advisory Board fall on July 1st, which is a Tuesday, as well as September 2nd, which is a Tuesday. The July 1st meeting falls close to the July 4th holiday, that weekend. And the September 2nd meeting falls the day after Labor Day holiday. So, we're proposing that those dates be moved. We've made reservations at the CAC in this building for July 8th, which is a week later. And for September, we didn't get a date reserved for a week later, but it's in the middle of the month. So, it would be Tuesday, September 16th, 2025 for the board's [inaudible].</p> <ul style="list-style-type: none">• The date change was accepted by show of hands.
VI. INFORMATIONAL ITEMS	<p>A. Subcommittee and Work Group Updates: None</p>

**VII. PUBLIC HEALTH SERVICES
LEADERSHIP REPORT**

Dr. Elizabeth Hernandez, Director, PHS



Health Services Advisory Board Meeting Public Health Services Report

May 13, 2025





Public Health Director Update

Elizabeth A. Hernandez, Ph.D.
Public Health Director
Public Health Services



Public Health Services

BOARD LETTER FORECAST	
Board Meeting Date	Subject
May 20, 2025	Accept HRSA funding for Ryan White Part A and Ending the HIV Epidemic funding.
May 20, 2025	Sustainable, Equitable, and Local Food Sourcing Program and Policy B-75
May 20, 2025	UCSD CDC Resilient Shield

Confidential: Subject to the deliberative process.

Media/Community Events



Targeted Date and Time	Description & Location of Event
November 2023 and ongoing	Perinatal Equity Initiative (PEI) radio ads run on local radio stations , Z90 and Magic 92.5. Digital banners pop up on high-traffic websites. Both the radio and digital ads are played for the target audience and will redirect listeners and viewers to the Black Legacy Now website.
June 2024 and ongoing	PEI creatives (brochures, door hangars, and postcards) are being distributed in the community to promote educating African-American mothers on the importance of advocating for equitable and dignified maternity health treatment for themselves and their babies.
May 12, 2025 9:00 AM to 1:00 PM 5530 Overland Ave. San Diego, CA 92123	Filming of Stop the Bleed Training with Valhalla High School Career Technical Education students. This event will have approximately 30 Valhalla High School students and their teacher.
May 15, 2025 367 N Magnolia Ave. El Cajon, CA 92020	East Region Community Leadership Team: Community Health Assessment Presentation
May 18, 2025	The PEI Fathers First program staff has been invited to participate and co-facilitate a round table discussion around important fatherhood topics at the THRIVE Tour hosted by UC San Diego and Elev8 Health
May 29, 2025 Time: 11:00 AM to 1:00 PM 5540 Overland Ave. San Diego, CA, 92123	The Public Health Lab Ribbon Cutting Ceremony will celebrate the opening of the state-of-the-art facility dedicated to safeguarding community health. This milestone marks a new era of innovation, rapid diagnostics, and public health preparedness.

New Public Health Services Live Well on Wheels Bus Hits the Road



By [Anita Lightfoot](#), County of San Diego Communications Office
Apr. 17, 2025 | 1:56 PM

- PHS has a new mobile resource to assist with public health outreach and response events.
- A recently added HIV, STD, and Hepatitis Live WoW bringing the total number to four mobile vehicles available for use.
- The new Live WoW will have a special focus on public health.
- It can be used to respond to communicable diseases, like Hepatitis A, dengue, and food-borne illness.

[Live Well on Wheels \(Live WoW\) Request Form](#)

Highlights

Nora Bota Nominated for Award, SDSU School of Public Health

- **Date:** Wednesday, May 7, 2025
- **Time:** 6:00 PM – 9:00 PM
- **Location:** Scripps Cottage on SDSU campus
- **Description:** Public Health Services Administration’s Nora Bota, Performance Improvement Manager, in the Office of Performance & Improvement Management, has been nominated for an award from the San Diego State University (SDSU) School of Public Health. This award will be presented at the SDSU School of Public Health End-of-Year Celebration.






Highlights

Denise Lozares Officially Transitions to President Role for APHN

- **Date:** Wednesday, April 23, 2025
- **Location:** During APHN 2025 Members Meeting
- **Description:** Last year, the Association of Public Health Nurses (APHN) members voted Public Health Services Denise Lozares, Director of Nursing, as President-Elect for April 2024 – April 2025. Denise officially transitioned to the President role during the annual APHN 2025 Members Meeting.
- **Background:** The APHN is a national organization whose mission is “to advance the practice of public health nursing to promote the public’s health,” and vision for “healthy communities through excellence in public health nursing practice and leadership.”
 - All County of San Diego public health nurses are members of the APHN.



	<div><div>Health Services Advisory Board Meeting</div><div></div><div>Thank you!</div><div><div><div>The Public Health Services department, County of San Diego Health and Human Services Agency, has maintained national public health accreditation, since May 17, 2016, and was re-accredited by the Public Health Accreditation Board on August 21, 2023.</div></div></div><div>8</div><div>Questions and Comments:</div><div>Geysil Arroyo: I was at the ceremony where Nora Bota was awarded the recognition. She's an alumni of the School of Public Health of San Diego State University and she's a big supporter of our students. You know, by bringing them in for internships and all that good stuff.</div></div>
VIII. ROUNDTABLE	Samhita Ilango: I don't know how this works procedurally, but if we would like to get an update on certain topics. And in this case, I'm interested in the updates on the Tijuana River situation because I was reading about how the new pipe that's being

	<p>built is causing additional contaminants. And there's a lot of warnings out there for residents. So I was just wondering if we can get an update.</p> <p>Dr. Anuj Bhatia: So that would typically be covered in the health officer report. So Dr. Hernandez did the director's report. The health officer did their report as well. So Dr. Thihalolipavan, going forward, you'll be able to do that.</p> <p>Dr. Elizabeth Hernandez: Anuj, I'm happy to provide a quick update. And also, this is out in the news as noted. On the Mexico side of the house, they are making some infrastructure improvements. And because of those infrastructure improvements, some of the flows may increase temporarily. And so in partnership with the International Boundary Water Commission, with CDPH, with Air Pollution Control District, and many others, we put out proactively a press release to the community, letting them know that this was coming. Because the increased flow could definitely increase the hydrogen sulfide levels that people are experiencing in that community. And so to prepare those that are impacted regarding that rotten egg smell, that unfortunately occurs and it increases. And with that communication out in the community, we reminded individuals about the community guidance and to make sure to stay indoors, make sure when the smell is not at its peak, to open up the windows, and many other community guidance. And also advocated for signing up for any air purifiers, that's the air purifier distribution process that APCD leads. So just wanting to share that we've been working in tandem with many of the agencies involved in the Tijuana River Valley sewage crisis, and frankly, since September, have been meeting on a monthly basis with agencies at the local, state, and federal level. Our next meeting is actually happening this Friday. So we're very much in communication. It is an infrastructure issue. And once the infrastructure issue is resolved, a lot of the smells and the beach closures will resolve as well. Last week, we also were really excited about launching a dashboard that we have been working on for a while now. And this dashboard is on our public health website. And this dashboard provides real-time information about hydrogen sulfide levels, flow information, beach closures, and odor complaints. So it pulls information from various sources all in one document. And so this was also featured through our county news center and again, is noted on our public health website.</p>
IX. PUBLIC COMMENT	None.
X. ADJOURN	Meeting adjourned at 4:47 PM.
Next Meeting	<p>HSAB Monthly Meeting: Tuesday, June 10, 2025</p> <p>CAC: 1600 Pacific Hwy San Diego, CA 92101, Room 302, from 3:00 pm to 5:00 pm</p>