

County of San Diego

Health and Human Services Agency

Health and Human Services Agency Summary	239

Administrative Support	247

Aging & Independence Services	253

Behavioral Health Services	261

Child and Family Well-Being	275

County Successor Agency	283

Homeless Solutions and Equitable Communities	287

Housing & Community Development Services	299

Medical Care Services	307

Public Health Services	317

Self-Sufficiency Services	327

Health and Human Services Agency Summary

Vision Statement

A region that is building better health, living safely, and thriving to advance a just, sustainable, and resilient future for all.

Mission Statement

To make people’s lives healthier, safer, and self-sufficient by delivering essential services in San Diego County.

Agency Description

The Health and Human Services Agency (HHSA) is an integrated health, housing, and social service organization committed to advancing opportunities for all San Diegans to live well through core services that treat, assist, and protect people across the region. HHSA directly serves about 1.3 million customers annually, more than one in every three county residents.

HHSA’s integrated service delivery network is delivered through eight service departments:

- ◆ **Ageing & Independence Services (AIS)**—protects older adults and persons with disabilities from abuse and neglect through various programs to help keep them safe in their own homes.
- ◆ **Behavioral Health Services (BHS)**—treats nearly 105,000 residents through mental health and alcohol and other drug services to assist individuals and families, including those who are experiencing homelessness, to achieve stability and mental and emotional well-being.
- ◆ **Child and Family Well-Being (CFWB)**—integrates First 5 San Diego, Child Welfare Services, childcare, and child and family service programs under one umbrella to deliver prevention and protection services.
- ◆ **Homeless Solutions and Equitable Communities (HSEC)**—ensures that County services are best positioned to address the needs of traditionally under-resourced and vulnerable groups, immigrant and refugee communities, and people at risk of or experiencing homelessness, with particular attention paid to operational efficiency, data use to inform program planning and delivery of services, and collaboration with County departments, the 18 jurisdictions, and community partners, to ensure access and equity among all San Diegans.
- ◆ **Housing & Community Development Services (HCDS)**—supports the creation and preservation of affordable housing in the region, provides rental assistance for low-income households and other vulnerable populations, and improves neighborhoods through community development opportunities.



- ◆ **Medical Care Services (MCS)**—improves the health and wellness of San Diego County residents by ensuring equitable access to a high-quality, sustainable medical care delivery system that is inclusive and addresses the needs of our most vulnerable citizens.
- ◆ **Public Health Services (PHS)**—promotes health and wellness, healthy behaviors, and access to quality care; prevents injuries, disease, and disabilities; and protects against public health threats, including respiratory viruses such as COVID-19, influenza, and respiratory syncytial virus (RSV); foodborne outbreaks, environmental hazards, and disasters.
- ◆ **Self-Sufficiency Services (SSS)**—connects over one million children, adults, and seniors to federal and State services to meet basic needs, such as medical health insurance, supplementary food assistance, and cash aid.

HHSA optimizes the use of resources and ensures compliance with federal, State, local, and County requirements through a robust centralized Administrative Support Division. HHSA also actively works with its 18 citizen advisory boards and commissions to provide the right services to the right people at the right time, for the best possible outcomes.

HHSA provides these services directly and indirectly with 8,243.50 HHSA employees (staff years) located across 53 facilities, over 360 contracted providers, and hundreds of volunteers committed to providing excellent customer service and a budget of \$3.4 billion derived from federal, State, and local funding.

Strategic Framework and Alignment

In the County’s Strategic Framework, Groups and Departments support five Strategic Initiatives: Equity, Sustainability, Community, Empower, and Justice. Audacious Goals assist departments in aligning with and supporting the County’s Vision and Mission. In addition, department objectives demonstrate how departments contribute to the larger

Audacious Goals. For more information on the new strategic alignment, refer to the Strategic Framework and Alignment section.

Health and Human Services Agency Departments

- ◆ Administrative Support
- ◆ Aging & Independence Services
- ◆ Behavioral Health Services
- ◆ Child and Family Well-Being
- ◆ County Successor Agency
- ◆ Homeless Solutions and Equitable Communities
- ◆ Housing & Community Development Services
- ◆ Medical Care Services
- ◆ Public Health Services
- ◆ Self-Sufficiency Services

Health and Human Services Agency Priorities

The priorities described below are just a few examples of how HHSA advances the health, safety, and quality of life for San Diego County residents, particularly those with the greatest need.

Equity

HHSA continues to work with the hardest-to-reach and most vulnerable populations to ensure all residents have equitable access to opportunities to enhance well-being. Critical to this effort is the expansion of the array of behavioral health programs available throughout the region, referred to as the Continuum of Care. HHSA also establishes behavioral health hubs and new care coordination services to ensure clients of all ages have access to the appropriate level of psychiatric services to meet their immediate needs and support long-term recovery. HHSA will also continue to support the development of new emergency housing options and outreach to people experiencing or at risk of homelessness. HHSA’s Housing and Community Development Services (HCDS) will leverage additional underutilized County property and various funding sources to support the construction of new affordable housing. Thousands of affordable homes are in the process of being opened to give more San Diegans, like seniors, families, and veterans, the opportunity to have a safe and affordable place to call home. Some of the new buildings will feature community support, such as childcare centers, which also support the County’s Childcare Blueprint.

Sustainability

HHSA is committed to promoting a resilient economy, environment, and region while protecting future generations' abilities to flourish and thrive. To this end, HHSA has developed a Sustainability Plan, with each department identifying specific efforts, such as converting our fleet to more electric vehicles, incorporating remote work into workplace policies when feasible, and offering more services over the phone and online to reduce travel. To promote economic sustainability for residents, HHSA continues to identify new strategies to make it easy to enroll eligible residents in safety net programs such as CalFresh food assistance, Medi-Cal health insurance, and California Work Opportunity and Responsibility to Kids (CalWORKs) cash assistance. These are just some of the core HHSA services that aim to reduce poverty and ensure residents can respond to immediate needs with resiliency. Financially, HHSA continues to align available resources from local, State, and federal sources with the most critical services to sustain core treat, assist, and protect functions.

Community

HHSA strives to strengthen and invigorate communities with opportunities for all to grow, connect, and thrive. Community engagement with residents, community-based organizations, and local municipalities continues to be a central focus to ensure everyone’s voices are heard, and our actions meet the community's needs. HHSA will continue to prioritize the community by establishing an additional Immigrant and Refugee Welcome Center for refugees and asylum seekers in North County. Supported by the Office of Immigrants and Refugee Affairs, this new one-stop shop for this vulnerable population will be modeled after the successful Immigrant and Refugee Welcome Center located at the South Region Live Well Center at National City, which HHSA opened in 2023. HHSA will also continue engaging the community through Community Health Workers, a classification of staff who are trusted messengers for harder-to-reach communities.

Empower

HHSA is committed to engaging employees so they feel valued, have a sense of belonging, and are motivated to work together toward one vision. Through HHSA’s training and development arm, The Knowledge Center, employees are offered continuous training and professional development opportunities. While many HHSA services are governed by State and federal policies, HHSA strives to continually innovate and engage with employees to implement best practices. HHSA will continue to expand communication and engagement with employees, advisory boards, and the public to be transparent about services, decision-mak-





ing, and outcomes. This includes the launch of new public dashboards that provide up-to-date information on efforts to address homelessness. With the rest of the County enterprise, HHSA also continues to actively engage in Justice, Equity, Diversity, and Inclusion initiatives that benefit our employees and the people we serve.



HHSA prioritizes fair and equitable systems that reduce health and economic disparities and reach the people who need services most. The establishment of the Child and Family Well-Being Department (CFWB) is one example of HHSA's focus on justice. Now in its second year, CFWB is transforming the County's child protection and foster care system into a child well-being system. CFWB will launch a culturally accessible and appropriate Prevention Hub for families to access services before reaching a crisis point, with the ultimate goal of keeping families together and reducing unnecessary child protection actions that have historically harmed and separated families. HHSA will also continue to address inequities with the justice-involved population by coordinating with partners and ensuring access to health-related services and housing opportunities when they return home to their community.

Related Links

For additional information on HHSA programs, refer to the website:

◆ www.SanDiegoCounty.gov/HHSA

For additional information about *Live Well San Diego*, go to:

◆ www.LiveWellSD.org

Budget Changes and Operational Impact: 2023–24 to 2024–25

Overview

The Health and Human Services Agency (HHSA) Fiscal Year 2024-25 adopted budget includes appropriations of \$3.5 billion, a net increase \$256.9 million or 8.0% from the Fiscal Year 2023-24 Adopted Budget. This budget reflects a focus on maintaining core mandated programs and services including the significant investments made in prior years to improve service delivery and address an increasing need for safety net services. In an environment of slowing growth in more discretionary revenue streams coupled with increasing costs, several budget strategies were employed to help bridge essential services, including the use of

over \$100 million in one-time available Realignment funds based on sales tax receipts from prior years. Continued planning at the County enterprise is underway to develop strategies and solutions, including service level adjustments as needed, to address next year's anticipated budget shortfall.

A significant portion of the proposed budget increase is in salaries and benefits, which is going up by \$98.2 million. This is tied to negotiated labor agreements as well as adjustments to reflect implementation of successful recruitment strategies that have significantly reduced vacancy rates. Last year's budget included an increase of 354.00 staff years across all HHSA departments. This year's budget holds positions flat for the most part, but maintains the significant additional capacity that was added in recent years. In light of slowing revenue growth and anticipated State budget deficits, position increases were limited to those that were fully funded by federal and State revenue and include positions to make public health services more accessible and to modernize nutrition and supportive services funded under the Older Californians Act.

While there are funding constraints limiting growth in several areas, there are still areas of opportunity available to leverage dedicated funding to meet community need in County priority areas. In Behavioral Health, there are investments of over \$118 million tied to dedicated funding available to further develop the Behavioral Health Continuum of Care including areas like the Evergreen Component of the American Rescue Plan Act (ARPA) Framework, Innovation Funds under the Mental Health Services Act, State grant funds, and enhanced funding as part of Medi-Cal Transformation (formerly CalAIM). Investments include items such as expanding San Diego's Behavioral Health Workforce to recruit, train, and educate public behavioral health workers within County-funded behavioral health programs, implementation of Involuntary Behavioral Health Treatment under Senate Bill (SB) 43, and youth suicide prevention activities.

The budget also reflects Board action to approve another infusion of \$10.6 million supported by the Evergreen Component of the ARPA Framework into the Innovative Housing Trust Fund (IHTF) to increase regional inventory of affordable housing and reflects \$7.8 million in grant funds to address the immediate needs of those experiencing homelessness within the San Diego Riverbed and Plaza Bonita areas. There are also increases associated with growth in the mandated General Relief cash assistance program, the Migrant Transition Day Center that will provide essential services to support onward travel for asylum seekers, the ¡Más Fresco! Plus Produce Prescription Program, Senior No Cost Transportation, and mandated increases for In-Home Sup-

portive Services associated with prior year negotiated wage increases and the annual statutory 4% increase in the County’s share of program costs.

Staffing

Increase of 10.00 staff years

- ◆ Increase of 4.00 staff years to support the deployment of the *Live Well San Diego Live Well on Wheels* mobile clinic in bringing services to communities with limited access to resources.
- ◆ Increase of 2.00 staff years to provide additional fiscal support to the Housing Choice Voucher (HCV) programs.
- ◆ Increase of 2.00 staff years in the San Diego Veteran Services at any Age (SD-VISA) program to expand capacity to help veterans in need of long-term support to avoid institutionalization and continue to live in their communities by arranging consumer, self-directed services.
- ◆ Increase of 2.00 staff years to support modernizing the Mello-Granlund Older Californians Act (OCA) Supportive Services and Nutrition Services. Staff will support the expansion of the Linkages Program, Older Californians Nutrition Program, and Caregiver Respite, as well as planning and coordinating future opportunities to maximize this one-time funding available into 2029.

Expenditures

Net increase of \$256.9 million

- ◆ Salaries & Benefits—increase of \$98.2 million due to negotiated labor agreements, a decrease in overall vacancy rate assumptions given robust hiring strategies and recruitment efforts in place, temporary staffing associated with time-limited grants, and the addition of 10.00 staff years.
- ◆ Services & Supplies—net increase of \$123.2 million.
 - ◆ Increase of \$35.8 million tied to an intergovernmental transfer agreement (IGT) approved by the Board of Supervisors on October 24, 2023 (5) between the County and Revive Pathway, wholly owned by the Viejas Band of Kumeyaay Indians (Viejas), to provide a comprehensive array of community-based behavioral health services to vulnerable populations with substance use conditions.
 - ◆ Increase of \$25.0 million for public behavioral health workforce development with \$15.0 million funded through Mental Health Services Act (MHSA) Innovation funds as approved by the Board of Supervisors on May 2, 2023 (5), and \$10.0 million funded from the Evergreen Component of the American Rescue Plan Act (ARPA) Framework as approved by the Board of Supervisors on February 27, 2024 (11).
 - ◆ Increase of \$18.6 million for substance use disorder (SUD) Residential Services and Outpatient Treatment, with \$16.7 million directly the result of rate increases to SUD

Residential Service contracts associated with payment reform as a part of Medi-Cal Transformation (formerly CalAIM).

- ◆ Increase of \$15.0 million for implementation costs of Involuntary Behavioral Health Treatment under SB 43 funded by the Evergreen Component of the ARPA Framework as approved by the Board of Supervisors on February 27, 2024 (11).
- ◆ Increase of \$12.7 million for one-time costs for the Migrant Transition Day Center that will provide essential services to support onward travel for asylum seekers recently released from the DHS custody.
- ◆ Increase of \$11.4 million for the County’s In-Home Supportive Services (IHSS) Maintenance of Effort (MOE) tied to prior year negotiated wage increases and the annual statutory 4% increase in the County share of program costs.
- ◆ Increase of \$10.6 million for operating costs for the Tri-City Medical Center Psychiatric Health Facility anticipated to be operational on July 1, 2024 and for rate increase for acute inpatient psychiatric beds.
- ◆ Increase of \$10.0 million for Opioid Treatment Program (OTP) rate increases associated with payment reform to provide a full continuum of care from detox and residential rehab to outpatient treatment.
- ◆ Increase of \$7.8 million to address the immediate needs of those experiencing homelessness within the San Diego Riverbed and Plaza Bonita areas.
- ◆ Increase of \$6.8 million for behavioral health support services, mental health treatment services and other support services, including services to be provided at housing sites funded through the State’s Project Homekey program which expands permanent supportive housing options for persons experiencing or at risk of homelessness.
- ◆ Increase of \$4.4 million for the Augmented Services Program (ASP) to enhance and improve client functioning through augmentation of basic Board and Care (B&C) services.
- ◆ Increase of \$4.4 million for the Youth Suicide Prevention Program.
- ◆ Net increase of \$4.3 million to align with new federal funding tied to the Additional Ukraine Supplemental Appropriations Act (AUSAA) to provide resettlement and housing assistance and other benefits to individuals displaced due to the war in Ukraine.
- ◆ Increase of \$2.6 million for children & youth outpatient services, including the foster family agency stabilization and treatment, the intensive outpatient program, and the partial hospitalization program.
- ◆ Increase of \$2.4 million for the Prohousing Incentive Program (PIP) to increase the creation and preservation of multifamily rental housing in the unincorporated area.





- ❖ Increase of \$2.3 million for the Transitional Housing Program Plus in Child and Family Well-Being for housing navigator and other enhanced services and to support increases in housing rates.
- ❖ Increase of \$2.2 million tied to the SD-VISA program to expand program capacity to help veterans in need of long-term support to avoid institutionalization.
- ❖ Increase of \$2.1 million for Opioid Settlement Framework efforts to include overdose prevention, primary prevention, syringe services, emergency department relay, and emergency room drug checking program.
- ❖ Increase of \$2.0 million for implementing SchoolLink software.
- ❖ Increase of \$1.9 million for the ARPA Community-Based Child Abuse Prevention (CBCAP), which funds direct prevention services and planning activities.
- ❖ Increase of \$1.6 million for subacute beds to support enhanced care pathways across the Behavioral Health Continuum of Care.
- ❖ Increase of \$0.6 million for one-time costs for the Grantville Safe Parking site based on Board of Supervisor's direction on April 30, 2024 (32) supporting the CESP to address the critical short-term needs of people experiencing or at risk of homelessness in the unincorporated area of San Diego County.
- ❖ Increase of \$0.5 million to extend the ¡Más Fresco! Plus Produce Prescription Program.
- ❖ Increase of \$0.25 million to extend for Senior No Cost Transportation.
- ❖ Net decrease of \$14.4 million for the Innovative Housing Trust Fund investment due to the completion of \$25.0 million in prior year one-time affordable housing project awards partially offset with a new infusion of \$10.6 million supported by the Evergreen component of the ARPA Framework funding as approved by the Board of Supervisors on February 27, 2024 (11).
- ❖ Decrease of \$9.9 million in appropriations for crisis services, Long Term Care Institutions (LTC) for Institutional Mental Disease (IMD) and Skilled Nursing Facility (SNF) services. The reduction in appropriations aligns with actual spending and does not result in any impact in any service delivery to the community.
- ❖ Net decrease of \$9.8 million projected across various CalWORKs supportive services programs to align with allocated State funding.
- ❖ Decrease of \$8.2 million in Public Health Services primarily for contracted services tied to the winding down of COVID related activities.
- ❖ Net decrease of \$5.8 million tied to prior year one-time ARPA costs for Career Pathways for Foster Youth, No Cost Senior Transportation, Food Distribution and Nutrition Incentive programs and LGBTQ Homeless Services offset by increases for RHAP, LRSP, and Inclement Weather.
- ❖ Decrease of \$4.7 million associated with adjusting one-time General Purpose Revenue for the Pilot Shallow Rental Subsidy Program, Regional Homeless Diversion expansion, and Community Care Coordination for Veterans (C3V) program.
- ❖ Decrease of \$3.8 million primarily due to prior year one-time Major Maintenance Improvement Projects (MMIP) across various facilities.
- ❖ Decrease of \$2.8 million in the CalFresh Employment and Training (CFET) programs to align to service needs.
- ❖ Decrease of \$1.6 million tied to service level alignments to available funding including a reduction of appropriation capacity for outreach and legal services with no impact to current services and a reduction of financial literacy services.
- ❖ Decrease of \$1.0 million to align with federal allocation of the Service to Older Refugees (SOR)/Afghan Support Services to Older Refugees (ASOR) programs.
- ❖ Other Charges—net increase of \$16.0 million.
 - ❖ Net increase of \$14.7 million in various benefit payments administered by Self-Sufficiency Services including CalWORKs, CalWORKs Child Care Program Stage One, General Relief, and Cash Assistance Program for Immigrants (CAPI) to align with increased costs primarily tied to State mandated grant increases and caseload trends.
 - ❖ Net increase of \$0.7 million in various benefit payments administered by Child and Family Well-Being to align with caseloads trends and increased grant amounts in Adoptions and Maintenance of Wards payments offset by a decrease in Foster Care.
 - ❖ Increase of \$0.5 million to help address imminent needs for clients receiving services through County mental health clinics.
 - ❖ Increase of \$0.1 million primarily tied to Gillespie Field Bond Turbo and Principal payments.
- ❖ Capital Assets Software—decrease of \$1.2 million primarily due to a reduction for prior year one-time Electronic Health Record costs and the development of expandable data management system to track tobacco retailer, fee payments, and compliance with the County's Tobacco Retail Licensing Ordinance.
- ❖ Capital Assets Equipment—decrease of \$2.0 million due to a reduction for prior year one-time costs associated with *Live Well San Diego* Live Well on Wheels and the Mobile Public Health Laboratory.
- ❖ Expenditure Transfer & Reimbursements—net decrease of \$9.7 million. Since this is a transfer of expenditures, it has a net effect of a \$9.7 million increase in appropriations.
 - ❖ Net decrease of \$9.6 million associated with centralized General Fund support for the following.



- ◆ Net decrease of \$7.9 million tied to prior year one-time projects for the Major Maintenance Capital Outlay Fund (MMCOF) and the Major Maintenance Improvement Plan (MMIP).
- ◆ Decrease of \$2.9 million associated with a shift in funding for Public Housing Physical Needs Assessment to General Fund fund balance.
- ◆ Decrease of \$2.2 million in one-time funding for the C3V program.
- ◆ Decrease of \$1.9 million associated with prior year one-time centralized General Fund support for negotiated labor agreements.
- ◆ Net increase of \$4.6 million to support the transition of the San Pasqual Academy to a continuum of care multipurpose campus.
- ◆ Increase of \$0.5 million to extend the ¡Más Fresco! Plus Produce Prescription Program.
- ◆ Increase of \$0.25 million to support Senior No Cost Transportation.
- ◆ Decrease of \$0.1 million associated with increased justice related costs funded through a Memorandum of Understanding (MOU) with the Public Safety Group.
- ◆ Operating Transfers Out—net increase \$13.0 million.
 - ◆ Increase of \$10.2 million driven by an additional annual draw of funds from the Tobacco Securitization fund to help offset the impacts of slowing Realignment revenue based on projected sales tax receipts. The additional funds will be used in Behavioral Health Services to support substance use disorder programs previously funded by realignment revenue including recovery residences and peer support services.
 - ◆ Increase of \$2.0 million primarily tied to increases in health benefit costs for IHSS providers to align with anticipated caseload growth.
 - ◆ Net increase of \$0.6 million for MMCOF.
 - ◆ Increase of \$0.2 million to align Gillespie Field Bond Principal and Interest payments to Fiscal Year 2024–25 Recognized Obligation Payment Schedule.
- ◆ Increase of \$114.9 in federal and State funding dedicated for behavioral health service expansions as well as increases tied to behavioral health payment reform under Medi-Cal Transformation.
- ◆ Net Increase of \$31.6 million in available one-time Realignment revenues to support increased Salaries & Benefits tied to negotiated labor agreements, increases for the IHSS MOE, increased costs in Behavioral Health Services, increased child welfare caseload costs, and other operating costs. This net increase reflects a base adjustment to the Realignment shortfall of \$85 million offset by one-time available funds of \$129.5 million applied as a budget mitigation bridge strategy and reduction for prior year one-time costs.
- ◆ Net increase of \$21.0 million primarily in State and federal social services revenues to align with current year social services allocations supporting staffing and other operating costs driven by increases in CalFresh administrative revenues, IHSS, and Adult Protective Services, offset by decreases in CalWORKs and Medi-Cal funding.
- ◆ Increase of \$13.1 million in Federal Emergency Management Agency (FEMA) Shelter and Services Program-Allocated (SSP-A) to fund the Migrant Transition Day Center.
- ◆ Increase of \$8.8 million in San Diego Riverbed and Plaza Bonita Encampment grant revenues to fund estimated staffing and Services & Supplies referenced above.
- ◆ Net increase of \$6.5 million in State and federal revenue funding in safety net programs to align with estimated benefit payments and caseload.
- ◆ Increase of \$4.3 million for new federal funding tied to AUSAA.
- ◆ Increase of \$2.4 million in State Prohousing Incentive Program (PIP) grant revenue to align with anticipated award.
- ◆ Increase of \$1.9 million for the ARPA Community-Based Child Abuse Prevention (CBCAP) funding.
- ◆ Increase of \$0.6 million in federal funding from the Department of Housing and Urban Development to fund the Grantville Safe Parking costs
- ◆ Increase of \$0.3 million tied to federal funding for temporary staffing tied to the Community Health Workers Resilient grant.
- ◆ Net decrease of \$17.0 million in State and federal social services revenues to align with funding allocations and the associated decrease in expenditures for CalWORKs employment and supportive service programs including Housing Support, Intensive Case Management, and Family Stabilization, and to align with anticipated expenditures in the CFET program.

Revenues

Net increase of \$256.9 million

- ◆ Taxes Other than Current Secured—no net change.
 - ◆ Increase of \$0.1 million in Redevelopment Property Tax Trust Fund tied to Gillespie Field Bond Payment.
 - ◆ Decrease of \$0.1 million tied to State Prop 10 tobacco tax in support of First Five Refugee Family Support Services that ended in Fiscal Year 2023–24.
- ◆ Fines, Forfeitures & Penalties—increase of \$0.1 million to align the Physicians Emergency Services (PES) expenditures and anticipated revenue.
- ◆ Intergovernmental Revenues—net increase of \$178.2 million.





- ❖ Net decrease of \$5.5 million primarily associated with Epidemiology & Laboratory Capacity Enhancing Detection Expansion grant primarily tied to winding down of COVID-19 related activities.
- ❖ Net decrease of \$4.7 to adjust funding for prior year one-time American Rescue Plan Act (ARPA) projects in CFWB, AIS, SSS, HCDS and HSEC offset by increases for programs intended to be ongoing in HSEC.
- ◆ Charges For Current Services—net decrease of \$2.6 million.
 - ❖ Net decrease of \$2.0 million primarily in Intergovernmental Transfer (IGT) funding tied to one-time projects.
 - ❖ Decrease of \$0.6 million primarily due to administrative fees collected from Medi-Cal Administrative Activities and Targeted Case Management (MAA/TCM) participants projected in Intergovernmental Revenue.
- ◆ Miscellaneous Revenue—net decrease of \$7.7 million.
 - ❖ Net decrease of \$14.4 million in Innovative Housing Trust Fund (IHTF) funds due to the completion of \$25.0 million in prior year one-time affordable housing project awards, partially offset with a new infusion of \$10.6 million supported by the Evergreen component of the ARPA Framework.
 - ❖ Increase of \$4.0 million primarily tied to Opioid Settlement Framework funds to advance strategies aimed at reducing opioid misuse.
 - ❖ Increase of \$2.6 million primarily tied to expansion of the SD-VISA program.
 - ❖ Net increase of \$0.1 million due to Pharmacy medication dispensing fee revenue.
- ◆ Other Financing Sources—net increase of \$10.4 million.
 - ❖ Increase of \$10.2 million in the Tobacco Securitization fund to help offset the impacts of slowing Realignment revenue based on projected sales tax receipts. The additional funds will be used in Behavioral Health Services to support substance use disorder programs previously funded by realignment revenue.
 - ❖ Net increase of \$0.2 million to fund increase in Gillespie Field Bond payments.
- ◆ Fund Balance Component Decreases—increase of \$25.0 million associated with increases to support the implementation of SB 43 and Behavioral Health Workforce, approved by the Board of Supervisors on February 27, 2024 (11).
- ◆ Use of Fund Balance—increase of \$21.5 million. A total of \$34.9 million is budgeted.
 - ❖ \$23.6 million associated with the Securitized Tobacco Settlement Special Revenue Fund under Administrative Support for health-related services.
 - ❖ \$11.3 million of unassigned General Fund fund balance is budgeted for the following:
 - ◆ \$4.4 million to fund Major Maintenance Capital Outlay Fund (MMCOF) and fund Major Maintenance Improvement Projects (MMIP).
 - ◆ \$2.9 million for work associated with the Public Housing Physical Needs Assessment.
 - ◆ \$2.3 million to bridge Medi-Cal Administrative funding.
 - ◆ \$1.7 million associated with the implementation of the new case management system to maintain software compliance and meet Housing and Urban Development federal guidelines.
- ◆ General Purpose Revenue Allocation—net increase of \$32.0 million.
 - ❖ Increase of \$17.5 million for the General Relief program.
 - ❖ Increase of \$14.5 million to support increased Salaries & Benefits tied to negotiated labor agreements.

Budget Changes and Operational Impact: 2024–25 to 2025–26

The net decrease in Fiscal Year 2025-26 is due to a decrease in Services and Supplies primarily tied to a reduction of \$63.5 million to reflect an anticipated overall enterprisewide gap in Fiscal Year 2025-26, and for projected completion of various projects supported with one-time funds. The budget gap of \$63.5 million is being driven by slowing revenue streams including Realignment revenue based on sales tax receipts and overall increasing costs and demand for services. The projected gap is being displayed in HHS given the impact of slowing Realignment revenue, but planning is going on Countywide to address the gap. If revenue projections hold, various mitigations including alignment of service levels will occur throughout the County enterprise to address in a way that minimizes community impacts to the greatest extent possible.

HEALTH AND HUMAN SERVICES AGENCY SUMMARY

Group Staffing by Department						
		Fiscal Year 2023-24 Adopted Budget			Fiscal Year 2024-25 Adopted Budget	Fiscal Year 2025-26 Approved Budget
Self-Sufficiency Services		2,845.00			2,846.00	2,846.00
Aging & Independence Services		651.00			654.00	654.00
Behavioral Health Services		1,332.50			1,332.50	1,332.50
Child and Family Well-Being		1,670.00			1,672.00	1,672.00
Public Health Services		764.00			775.00	775.00
Medical Care Services Department		215.00			216.00	216.00
Administrative Support		438.00			430.00	430.00
Housing & Community Development Services		156.00			158.00	158.00
Homeless Solutions and Equitable Communities		162.00			160.00	160.00
Total		8,233.50			8,243.50	8,243.50

Group Expenditures by Department						
	Fiscal Year 2022-23 Actuals	Fiscal Year 2023-24 Adopted Budget	Fiscal Year 2023-24 Amended Budget	Fiscal Year 2023-24 Actuals	Fiscal Year 2024-25 Adopted Budget	Fiscal Year 2025-26 Approved Budget
Regional Operations	\$ 55,792	\$ —	\$ —	\$ 329,396	\$ —	\$ —
Self-Sufficiency Services	722,756,316	786,018,439	802,823,877	790,276,146	812,153,773	828,733,753
Strategic Planning & Operational Support	195,821	—	—	211,584	—	—
Aging & Independence Services	221,943,596	281,656,156	283,386,555	267,180,676	304,806,525	314,701,298
Behavioral Health Services	854,569,658	1,021,065,711	1,087,620,470	1,003,421,875	1,156,628,861	1,125,323,571
Child and Family Well-Being	425,643,229	456,858,494	483,548,926	466,082,660	479,010,650	492,606,220
Public Health Services	205,053,121	228,243,782	307,906,606	198,518,678	236,791,482	241,259,206
Medical Care Services Department	49,916,585	50,397,921	59,297,419	50,171,318	55,000,096	53,339,998
Administrative Support	171,468,045	184,384,893	199,817,210	158,875,579	198,926,748	124,741,928
Housing & Community Development Services	110,040,433	99,461,517	249,571,381	50,259,742	90,946,535	69,284,107
Homeless Solutions and Equitable Communities	43,918,754	82,060,043	158,591,231	101,206,456	112,437,908	84,995,188
County Successor Agency	7,380,635	7,765,176	7,765,176	7,628,847	8,063,416	8,063,416
Total	\$ 2,812,941,985	\$ 3,197,912,132	\$ 3,640,328,851	\$ 3,094,162,957	\$ 3,454,765,994	\$ 3,343,048,685



Administrative Support

Mission Statement

To make people’s lives healthier, safer and self-sufficient by delivering essential services in San Diego County.

Department Description

Administrative Support contains multiple divisions that work together to ensure HHSA services are delivered in a professional, cost-effective, efficient, and cohesive manner while focusing on exceptional customer service. These divisions also liaise with their respective County departments to enhance communication, leverage best practices, and ensure compliance and ethical standards are met. The primary services provided by each division include:

- ◆ **Agency Executive Office**—guides the HHSA enterprise to meet the needs of individuals, families, and communities by setting a vision, aligning HHSA goals and initiatives with County priorities, facilitating collaboration with internal and external partners, and continually upholding excellence in all business operations.
- ◆ **Business Assurance and Compliance**—provides consultancy and training services to HHSA departments; promotes compliance with privacy and information security regulations and policies, adherence to high ethical standards, monitors outcomes and quality assurance of provided services, determines process improvements to gain procedural efficiencies; proactively identifies and addresses risk concerns; and investigates claims of fraud, waste, and abuse.
- ◆ **Agency Contract Support**—performs financial and contract administration review for compliance with federal, State, and local funding requirements; and identifies best practices to promote continuous improvement in procurement and contract administration to support fiscal stability, solvency, and organizational excellence.
- ◆ **Financial & Support Services Division**—provides efficient use of resources, financial planning, forecasting, and claiming for fiscal stability and facility management.
- ◆ **Human Resources**—Recruits and retains a skilled, adaptable and diverse HHSA workforce that delivers superior services.
- ◆ **Information Technology Services**—promotes and supports operational excellence through the effective use of technology aligned with the County’s Information Technology Strategy.



- ◆ **Office of Strategy and Innovation**—advances the *Live Well San Diego* vision and Agency operations through strategic planning, coordination of equity efforts, communication support, legislative and policy analysis, process evaluation, and innovation management.
- ◆ **Tobacco Settlement Funds**—supports Board Policy E-14, *Expenditure of Tobacco Settlement Revenue in San Diego County*, a comprehensive tobacco control strategy to build better health through prevention and health promotion activities that encourage a tobacco-free lifestyle.

To ensure HHSA departments can provide critical and essential services, Administrative Support has 430.00 staff years and a budget of \$198.9 million.

2023–24 Accomplishments

Equity

- Economic Opportunity: Dismantle barriers to expanding opportunities in traditionally underserved communities and businesses, especially communities of color and low income.
 - Supported the County’s Equity, Diversity, and Inclusion (EDI) efforts by ensuring 100% of HHSA procurements reflect principles of cultural responsiveness and create equitable products and services for diverse populations. This was achieved by ensuring the EDI criteria were included in the Procurement Planning Forms, where appropriate, allowing the ability to evaluate the offerors’ proposals to meet diverse customer needs.

Sustainability

- Climate: Actively combat climate change through innovative or proven policies, green jobs, sustainable facility construction or maintenance and hazard mitigation.

ADMINISTRATIVE SUPPORT

- Long-term: Supported remote and hybrid work environments such as desk sharing and work hub spaces. This has benefited the environment by saving nearly 12 million employee miles of driving and reducing over 3,400 tons of vehicle carbon emissions. Additionally, assessed HHSAs office space to identify opportunities for maximizing efficiency and potentially reducing the existing facility footprint.
- Staff in charge of purchasing received policy training on Environmentally Preferable Purchasing.



Empower

- Workforce: Invest in our workforce and operations by providing support services and excellent customer service to ensure continuity of operations remains at its best.
 - As part of the annual Contractor Satisfaction Survey, achieved an average rating of 3.63 (scale is one to four) for overall contractor satisfaction with the HHSAs contracting experience by strengthening customer partnerships and engagement.
 - Conducted eight trainings on financial and budgetary topics affecting program operations, such as funding streams and fiscal impacts on service delivery. These trainings help improve the financial competency of staff and management and provided staff with the knowledge to make better-informed decisions.
 - Promoted a culture of inclusion and belonging among County staff as they served the public with excellence. Based on the feedback from the 2022 biennial employee engagement survey, HHSAs departments conducted focus groups and collaborated with employees to create action plans that will enhance engagement in the department and maintain and strengthen an engaged and empowered workforce.
- Transparency and Accountability: Maintain program and fiscal integrity through reports, disclosures, and audits.
 - Conducted 33 comprehensive financial reviews of HHSAs contractors to ensure compliance with standards and financial controls. Each review tested financial material and contractor financial systems, activities, and processes to help ensure contractors complied with contractual obligations therefore ensuring the County maintains fiscal integrity.
 - Conducted 15 Quality Assurance (QA) Reviews of HHSAs contract administration and fiscal records to ensure adherence to contracting policies and procedures per funding source requirements. These reviews identify best practices and areas of improvement to maintain program and fiscal integrity.
- Innovation: Foster new ideas and the implementation of proven best practices to achieve organizational excellence.

- Trained 507 HHSAs contract administration and fiscal staff based on contracting policies and procedures under funding source requirements. The training fostered new ideas and the implementation of proven best practices to achieve organizational excellence.
- Provided 168,293 *Live Well San Diego* unique visitors (LiveWellSD.org) access to timely and relevant information to expand the reach of *Live Well San Diego*. Efforts included promoting access to the *Live Well San Diego* Open Performance portal and other community-level data to engage partners and stakeholders in identifying and addressing community needs proactively through available demographic, economic, behavioral, and health information.

2024–26 Objectives



Equity

- Economic Opportunity: Dismantle barriers to expanding opportunities in traditionally underserved communities and businesses, especially communities of color and low income.
 - Support the County's Equity, Diversity, and Inclusion (EDI) efforts by ensuring 100% of HHSAs procurements reflect principles of cultural responsiveness to create equitable products and services for diverse populations.



Sustainability

- Climate: Actively combat climate change through innovative or proven policies, green jobs, sustainable facility construction or maintenance and hazard mitigation.
 - Continue implementing remote and hybrid work environments to reduce emissions and office footprints through desk sharing and creating work hub spaces. Assess HHSAs office space to identify opportunities to maximize and/or reduce the existing facility footprint.



Empower

- Workforce: Invest in our workforce and operations by providing support services and excellent customer service to ensure continuity of operations remains at its best.
 - As part of the annual Contractor Satisfaction Survey, achieve an average rating of three or higher (scale is one to four) for overall Contractor satisfaction with the HHSAs contracting experience by strengthening customer partnerships and engagement.
 - Coordinate and attend eight trainings on financial and budgetary topics affecting program operations, such as funding streams and fiscal impacts on service delivery. These trainings help to improve the financial competency of staff and management and provide staff with the knowledge to make better-informed decisions.



- Support HHSAs departments in implementing their Workforce Action Plans based upon the 2022 Employee Engagement survey results and staff input from survey and focus groups. Assess 2024 Employee Engagement Survey results to identify areas of strengths and opportunities for improvement.
- Transparency and Accountability: Maintain program and fiscal integrity through reports, disclosures, and audits.
 - Conduct a minimum of 30 comprehensive financial reviews of HHSAs contractors to ensure they comply with standards and financial controls. Each review tests financial material and contractor financial systems, activities, and processes to help ensure contractors comply with contractual obligations and that the County maintains fiscal integrity.
 - Conduct 15 Quality Assurance (QA) reviews of HHSAs contract administration and fiscal records to ensure adherence to contracting policies and procedures per funding source requirements. These reviews identify best practices and areas of improvement to maintain program and fiscal integrity.
- Innovation: Foster new ideas and the implementation of proven best practices to achieve organizational excellence.

- Train a minimum of 500 HHSAs contract administration and fiscal staff based on contracting policies and procedures under funding source requirements. The training fosters new ideas and the implementation of proven best practices to achieve organizational excellence.
- Provide 155,000 *Live Well San Diego* unique visitors (LiveWellSD.org) access to timely and relevant information to expand the reach of *Live Well San Diego*. Efforts include promoting access to the *Live Well San Diego* Open Performance portal and other community-level data to engage partners and stakeholders in identifying and addressing community proactively needs through available demographic, economic, behavioral, and health information.

Related Links

For additional information on the programs offered by the Health and Human Services Agency, go to:

- ◆ <https://www.sandiegocounty.gov/content/sdc/hhsa.html>

For additional information about *Live Well San Diego*, go to:

- ◆ www.LiveWellSD.org


Performance Measures		2022-23 Actuals	2023-24 Adopted	2023-24 Actuals	2024-25 Adopted	2025-26 Approved
	Average rating for contractors' satisfaction with contracting experience	3.2	3	3.63	3	3
	HHSAs financial literacy events	8	8	8	8	8
	Comprehensive financially focused review for HHSAs contractors ¹	38	40	33	30	30
	Quality Assurance Reviews of contracting policies and procedures completed for HHSAs departments	17	15	15	15	15
	Staff Trained on Contract Administration	300	500	507	500	500
	Unique visitors to the <i>Live Well San Diego</i> website	155,000	155,000	168,293	155,000	155,000

Table Notes

¹ In Fiscal Year 2023–24, the number of comprehensive financial reviews was lower than expected due to vacant positions. In Fiscal Year 2024–25, the target was lowered due to revised audit criteria which provides a focus on high-risk contracts.

Budget Changes and Operational Impact: 2023–24 to 2024–25

Staffing

Net decrease of 8.00 staff years

- ◆ Decrease of 9.00 staff years due to transfers to Public Health Services, Medical Care Services, and Self-Sufficiency Services.

- ◆ 7.00 staff years to Public Health Services to facilitate the implementation and integration of an electronic health record system and operational needs.
- ◆ 1.00 staff year to Medical Care Services to lead the electronic health record (EHR) development and implementation.
- ◆ 1.00 staff year to Self-Sufficiency Services for operational needs.

- ◆ Increase of 1.00 staff year due to transfer from Behavioral Health Services to support operational needs with the reorganization of Business Assurance & Compliance.
- ◆ Additionally, staff were transferred among related programs within Administrative Support to manage operational needs.

Expenditures

Net increase of \$14.5 million

- ◆ Salaries & Benefits—increase of \$0.5 million primarily due to negotiated labor agreements, partially offset by the reduction of 8.00 staff years and salary adjustments to reflect normal staff turnover.
- ◆ Services & Supplies—net decrease of \$4.7 million.
 - ◆ Decrease of \$3.8 million primarily due to prior year one-time Major Maintenance Improvement Projects (MMIP) across various facilities.
 - ◆ Net decrease of \$0.9 million primarily to reflect a decrease in Public Liability Insurance, offset by an increase in property and cyber liability insurance costs, facility ISF costs, and IT costs.
- ◆ Expenditure Transfer & Reimbursements—net decrease of \$8.0 million associated with prior year one-time centralized General Fund support. Since this is a transfer of expenditure, it has a net effect of a \$8.0 million increase in appropriations.
 - ◆ Net Decrease of \$7.9 million to fund the Major Maintenance Capital Outlay Fund (MMCOF) and Major Maintenance Improvement Projects (MMIP).
 - ◆ Decrease of \$9.9 million for prior year one-time projects funded with General Fund fund balance.
 - ◆ Increase of \$2.0 million for one-time MMIP projects.
 - ◆ Decrease of \$0.1 million associated with prior year one-time costs to support Salaries & Benefits costs.
- ◆ Operating Transfers Out—net increase of \$10.7 million.
 - ◆ Increase of \$10.2 million driven by an additional annual draw of funds from the Tobacco Securitization fund to help offset the impacts of slowing Realignment revenue based on projected sales tax receipts. The additional funds will be used in Behavioral Health Services to support substance use disorder programs previously funded by Realignment revenue including recovery residences and peer support services.
 - ◆ Net increase of \$0.5 million for Major Maintenance Capital Outlay Fund (MMCOF).

Revenues

Net increase of \$14.5 million

- ◆ Intergovernmental Revenues—net increase of \$8.8 million.
 - ◆ Net increase of \$4.5 million in federal revenues primarily to support one-time IT projects.
 - ◆ Net increase of \$3.7 million in available one-time Realignment revenues to support IT projects.
 - ◆ Increase of \$0.6 million in social services administrative revenue to align with Salaries & Benefits and Services & Supplies as noted above.
- ◆ Use of Fund Balance—increase of \$14.6 million. A total of \$28.0 million is budgeted.
 - ◆ \$23.6 million to reflect the Securitized Tobacco Settlement Special Revenue Fund under Administrative Support for health-related services.
 - ◆ \$4.4 million for one-time only MMCOF projects.
- ◆ General Purpose Revenue Allocation—decrease of \$8.9 million reallocated to other departments within HHSAs as part of an overall budget shortfall mitigation strategy to budget available one-time Realignment revenue in areas with eligible costs and shift General Purpose Revenue among departments as needed.

Budget Changes and Operational Impact: 2024–25 to 2025–26

Net decrease of \$74.2 million is due to a decrease in Services and Supplies primarily tied to a reduction of \$63.5 million to reflect an anticipated overall enterprisewide gap in Fiscal Year 2025-26, and for projected completion of various projects supported with one-time funds. The budget gap of \$63.5 million is being driven by slowing revenue streams including Realignment revenue based on sales tax receipts and overall increasing costs and demand for services. The projected gap is being displayed in HHSAs given the impact of slowing Realignment revenue, but planning is going on Countywide to address the gap. If revenue projections hold, various mitigations including alignment of service levels will occur throughout the County enterprise to address in a way that minimizes community impacts to the greatest extent possible.





Staffing by Program						
		Fiscal Year 2023-24 Adopted Budget			Fiscal Year 2024-25 Adopted Budget	Fiscal Year 2025-26 Approved Budget
Agency Executive Office		31.00			29.00	29.00
Agency Contract Support		26.00			26.00	26.00
Financial Services Division		201.00			202.00	202.00
Human Resources		94.00			95.00	95.00
Management Support		40.00			30.00	30.00
Office of Strategy and Innovation		46.00			48.00	48.00
Total		438.00			430.00	430.00

Budget by Program						
	Fiscal Year 2022-23 Actuals	Fiscal Year 2023-24 Adopted Budget	Fiscal Year 2023-24 Amended Budget	Fiscal Year 2023-24 Actuals	Fiscal Year 2024-25 Adopted Budget	Fiscal Year 2025-26 Approved Budget
Agency Executive Office	\$ 31,573,910	\$ 30,035,816	\$ 35,403,198	\$ 25,243,145	\$ 31,529,200	\$ 18,966,316
Agency Contract Support	4,684,269	5,057,776	5,088,919	4,566,477	5,213,090	4,957,726
Financial Services Division	50,210,621	53,397,354	62,993,578	50,833,498	55,463,364	42,665,097
Human Resources	15,587,860	16,625,715	16,732,825	16,700,718	17,343,391	14,965,110
Management Support	41,453,064	52,372,633	52,346,811	34,648,432	52,084,409	8,174,523
Proposition 10	2,184,704	—	—	—	—	—
Regional Administration	617	—	1,555	—	—	—
Office of Military & Veterans Affairs	(4,038)	—	—	102	—	—
Office of Strategy and Innovation	10,504,263	11,582,961	11,896,769	11,637,386	11,778,670	9,498,532
Integrative Services	24,506	—	40,918	—	—	—
Tobacco Settlement Fund	15,248,268	15,312,638	15,312,638	15,245,822	25,514,624	25,514,624
Total	\$ 171,468,045	\$ 184,384,893	\$ 199,817,210	\$ 158,875,579	\$ 198,926,748	\$ 124,741,928



Budget by Categories of Expenditures						
	Fiscal Year 2022-23 Actuals	Fiscal Year 2023-24 Adopted Budget	Fiscal Year 2023-24 Amended Budget	Fiscal Year 2023-24 Actuals	Fiscal Year 2024-25 Adopted Budget	Fiscal Year 2025-26 Approved Budget
Salaries & Benefits	\$ 60,877,872	\$ 65,937,000	\$ 68,381,049	\$ 62,586,122	\$ 66,411,563	\$ 69,757,493
Services & Supplies	94,643,744	109,621,351	117,279,275	81,164,927	104,900,561	29,669,811
Other Charges	209,414	—	—	404,463	—	—
Expenditure Transfer & Reimbursements	(1,097,142)	(10,036,096)	(23,031,930)	(3,845,718)	(2,000,000)	—
Operating Transfers Out	16,834,157	18,862,638	37,188,816	18,565,785	29,614,624	25,314,624
Total	\$ 171,468,045	\$ 184,384,893	\$ 199,817,210	\$ 158,875,579	\$ 198,926,748	\$ 124,741,928

Budget by Categories of Revenues						
	Fiscal Year 2022-23 Actuals	Fiscal Year 2023-24 Adopted Budget	Fiscal Year 2023-24 Amended Budget	Fiscal Year 2023-24 Actuals	Fiscal Year 2024-25 Adopted Budget	Fiscal Year 2025-26 Approved Budget
Revenue From Use of Money & Property	\$ 6,375,600	\$ 1,900,000	\$ 1,900,000	\$ 8,804,145	\$ 1,900,000	\$ 1,900,000
Intergovernmental Revenues	134,103,734	125,808,438	125,808,438	125,349,049	134,610,626	64,825,806
Charges For Current Services	2,621,070	20,121,000	20,121,000	36,211	20,121,000	20,121,000
Miscellaneous Revenues	258,719	100,000	100,000	64,746	100,000	100,000
Fund Balance Component Decreases	2,370,714	2,370,714	2,370,714	2,370,714	2,370,714	2,370,714
Use of Fund Balance	8,112,983	13,412,638	28,844,955	1,578,611	28,014,624	23,614,624
General Purpose Revenue Allocation	17,625,227	20,672,103	20,672,103	20,672,103	11,809,784	11,809,784
Total	\$ 171,468,045	\$ 184,384,893	\$ 199,817,210	\$ 158,875,579	\$ 198,926,748	\$ 124,741,928



Aging & Independence Services

Mission Statement

To make people’s lives healthier, safer and self-sufficient by delivering essential services in San Diego County.

Department Description

Aging & Independence Services (AIS) is the federally-designated regional Area Agency on Aging (AAA) and the focal point on matters concerning older persons and persons with disabilities. AIS is an essential resource for over 709,600 San Diego County residents aged 60 and older, a population that is expected to reach an estimated 850,300 by 2030. AIS provides assistance, information, referral, and support to older adults, persons with disabilities, and their family members to help keep them safe in their homes through the following services. AIS services include, but are not limited to:

- ◆ **In-Home Supportive Services (IHSS)**—provides access to home-based and caregiver services.
- ◆ **Adult Protective Services (APS)**—investigates allegations of abuse and neglect of older and dependent adults and provide connections to resources that may assist them.
- ◆ **Senior Health and Social Services**—improves the nutritional and social health of older adults in need through approximately 1.5 million meals and health promotion and prevention programs such as assisted transportation, multi-purpose senior centers, and caregiver support.
- ◆ **Community Engagement**—collaborates with the community and a network of more than 7,000 stakeholders to increase engagement opportunities and connections to the community for older adults through home visits, educational events — both virtual and in-person, and 10 community committees that work on goals focused on health, fall prevention, caregiver support, housing, transportation, social participation, and dementia.
- ◆ **Public Administrator and Public Guardian (PA/PG)**—receives over 1,600 referrals to serve the most vulnerable older and dependent adults.
 - ◆ The Public Administrator is appointed by San Diego Probate Court as a personal representative to protect the estates of individuals who pass away without a will or an appropriate person to function as an administrator.
 - ◆ The Public Guardian acts as the appointed legal guardian of older and dependent adults whom the San Diego Superior Court has determined lack the capacity to care for themselves and/or manage their finances due to a major neurocognitive disorder.



The Aging Roadmap is the Regional Plan updated annually that actively engages residents to guide County service delivery efforts and ensure services meet community needs. The Aging Roadmap was developed with extensive input from hundreds of older adults and their advocates through community feedback sessions and stakeholder interviews. It was launched on September 24, 2019, when the San Diego County Board of Supervisors (Board) directed County staff to implement the Aging Roadmap in partnership with community-based organizations, hospital partners, and County departments. The Aging Roadmap efforts includes community teams composed of residents, community-based organizations, businesses, and County staff working toward an age-friendly region. The Roadmap's priority areas include health and community support, housing, social participation, transportation, dementia, caregiver support, safety, preparedness, silver economy, and medical and social services system. These priority areas align and advance the HHSA strategic plan, also known as the Agency Promise, and the County's Strategic Plan.

To deliver these critical and essential services, AIS has 654.00 staff years, numerous volunteers, and a budget of \$304.8 million.

2023–24 Accomplishments

Equity

- **Health:** Reduce disparities and disproportionality and ensure access for all through a fully optimized health and social service delivery system and upstream strategies.
 - Completed 96% (19,300 of 20,108) of initial eligibility determinations for home-based caregiver services through IHSS within 45 days so individuals can remain safely in their homes, exceeding the State performance expectation of 80% completion in 90 days.

AGING & INDEPENDENCE SERVICES

- Ensured 99% (35,908 of 36,271) of IHSS reassessments for home-based caregiver services are completed every 12 months, so older adults and persons with disabilities continue receiving the appropriate level of care to remain safely in their own homes. This exceeds the State performance expectation of 80% completion every 12 months.
- Provided 1,840,970 meals to older adults to help address food insecurity and social isolation.
- Health: Focus on policy, systems, and environmental approaches that ensure equal opportunity for health and well-being through partnerships and innovation.
 - Ensured 97% (97 of 100) of Feeling Fit Club participants surveyed reported increased energy, feeling better overall, or are more able to conduct daily activities.



Sustainability

- Economy: Align the County's available resources with services to maintain fiscal stability and ensure long-term solvency.
 - Promoted opportunities to save electricity and be more energy efficient within Aging & Independence Services facilities. This includes reviewing office equipment to reduce underutilized printers and computers, focusing on ordering eco-conscious office supplies, and increasing energy-efficient options as opportunities for updates occur (i.e., laptops vs. computer towers).
- Climate: Actively combat climate change through innovative or proven policies, green jobs, sustainable facility construction or maintenance and hazard mitigation.
 - Continued to support remote and hybrid work environments to reduce vehicle emissions and department footprint. Department efforts will include using smart conference rooms and laptops with remote connectivity and increasing the use of drop-in workstations and desk and office sharing.
- Environment: Cultivate a natural environment for residents, visitors and future generations to enjoy.
 - Maintained the garden for kinship families to provide a sustainable opportunity for families to enjoy and interact with their natural environment and access fresh fruits and vegetables.
 - Supported environmental community change to enhance healthy living for older adults and reduce vehicle miles traveled by supporting walking groups, active transportation initiatives, safer intersections, and sidewalks conducive to wheelchairs and walkers.



Community

- Safety: Support safety for all communities, including protection from crime, availability of emergency medical services and fire response, community preparedness and regional readiness to respond to a disaster.

- Provided 78% (7,133 of 9,144) of older adult abuse and dependent adult abuse victims with supportive services such as housing and relocation services, referrals to in-home assistance, legal services, or ongoing case management.
- Quality of Life: Provide programs and services that enhance the community through increasing the well-being of our residents and our environments.
 - Visited 93% (78 of 84) of skilled nursing facilities (SNFs) quarterly by the Long-Term Care Ombudsman program per federal guidance to strengthen protections for vulnerable older adults and persons with disabilities.
 - Visited 73% (414 of 570) of Residential Care Facilities for the Elderly (RCFE) quarterly by the Long-Term Care Ombudsman program per federal guidance to strengthen protections for vulnerable older adults and persons with disabilities.



Empower

- Workforce: Invest in our workforce and operations by providing support services and excellent customer service to ensure continuity of operations remains at its best.
 - Answered in under five minutes 90% (69,322 of 76,707) of calls to the AIS Call Center, which performs centralized intake for various programs.
 - Promoted a culture of inclusion and belonging among AIS employees as they served the public with excellence. Based on the feedback from the 2022 biennial employee engagement survey, HHSA departments conducted focus groups and collaborated with employees to create action plans that will enhance engagement in the department and maintain and strengthen an engaged and empowered workforce.



Justice

- Safety: Ensure a fair and equitable justice system in the defense and prosecution of crimes, investigations of abuse and neglect, and support and services for victims.
 - Conducted 97% (10,075 of 10,372) of face-to-face APS contacts promptly to ensure assistance and resources that help adults meet their own needs.
 - Filed 100% (40 of 40) of PA/PG accountings concerning all estate assets and liabilities with the Probate Court within 90 days of established guidelines and provide information necessary for proper oversight of conservatorship and decedent affairs.

2024–26 Objectives



Equity





- Health: Reduce disparities and disproportionality and ensure access for all through a fully optimized health and social service delivery system and upstream strategies.
 - Complete 90% (17,820 of 19,800) of initial eligibility determinations for home-based caregiver services through IHSS within 45 days so individuals can remain safely in their own homes, exceeding the State performance expectation of 80% completion in 90 days.
 - Ensure 97% (35,890 of 37,000) of IHSS reassessments for home-based caregiver services are completed every 12 months, so older adults and persons with disabilities continue receiving the appropriate level of care to remain safely in their own homes. This exceeds the State performance expectation of 80% completion every 12 months.
 - Provide 1,500,000 meals to older adults to help address food insecurity and social isolation.
- Health: Focus on policy, systems, and environmental approaches that ensure equal opportunity for health and well-being through partnerships and innovation.
 - Ensure 90% (90 of 100) of Feeling Fit Club participants surveyed report that they have increased energy, feel better overall, or are more able to conduct activities of daily living. A survey will be given to at least 100 Feeling Fit Club participants.



Sustainability

- Economy: Align the County's available resources with services to maintain fiscal stability and ensure long-term solvency.
 - Promote opportunities to save electricity and be more energy efficient within Aging & Independence Services facilities. This includes reviewing office equipment to reduce underutilized printers and computers, focusing on ordering eco-conscious office supplies, and increasing energy-efficient options as opportunities for updates occur (i.e., laptops vs. computer towers).
- Climate: Actively combat climate change through innovative or proven policies, green jobs, sustainable facility construction or maintenance and hazard mitigation.
 - Continue to support remote and hybrid work environments to reduce vehicle emissions and department footprint. Department efforts will include using smart conference rooms and laptops with remote connectivity and increasing the use of drop-in workstations and desk and office sharing.
- Environment: Cultivate a natural environment for residents, visitors and future generations to enjoy.
 - Support environmental community change to enhance healthy living for older adults and reduce vehicle miles traveled by supporting walking groups, active transportation initiatives, safer intersections, and sidewalks conducive to wheelchairs and walkers.



Community

- Safety: Support safety for all communities, including protection from crime, availability of emergency medical services and fire response, community preparedness and regional readiness to respond to a disaster.
 - Provide 70% (8,610 of 12,300) of older adult abuse and dependent adult abuse victims with supportive services such as housing and relocation services, referrals to in-home assistance, legal services, or ongoing case management.
- Quality of Life: Provide programs and services that enhance the community through increasing the well-being of our residents and our environments.
 - Visit 100% (84) of skilled nursing facilities (SNFs), which provide medical care, quarterly by the Long-Term Care Ombudsman program per federal guidance to strengthen protections for vulnerable older adults and persons with disabilities.
 - Visit 90% (515 of 570) of Residential Care Facilities for the Elderly (RCFE), which do not provide medical care, quarterly by the Long-Term Care Ombudsman program per federal guidance to strengthen protections for vulnerable older adults and persons with disabilities.



Empower

- Workforce: Invest in our workforce and operations by providing support services and excellent customer service to ensure continuity of operations remains at its best.
 - Answer in under five minutes 80% (55,200 of 69,000) of calls to the AIS Call Center, which performs centralized intake for various programs.
 - Achieve organizational excellence by ensuring a workplace of belonging and inclusion for AIS employees as they deliver their services to the public. Improve employee engagement by implementing recommendations from staff focus groups to increase agreement with focus area, "My workload is reasonable." Action items include involving AIS employees in identifying and implementing workflow efficiencies and expanding cross-program training to increase effectiveness of referrals.



Justice

- Safety: Ensure a fair and equitable justice system in the defense and prosecution of crimes, investigations of abuse and neglect, and support and services for victims.
 - Conduct 97% (11,690 of 12,050) of face-to-face APS contacts promptly to ensure assistance and resources that help adults meet their own needs.

AGING & INDEPENDENCE SERVICES

- File 100% (30) of PA/PG Inventory and Appraisals concerning all estate assets and liabilities with the Probate Court within 90 or 120 days of established guidelines and provide information necessary for proper oversight of conservatorship and decedent affairs.

Related Links

For additional information on the programs offered by the Health and Human Services Agency, go to:

- <https://www.sandiegocounty.gov/content/sdc/hhsa.html>

For additional information about the Aging Roadmap, go to:

- www.livewellsd.org/AgingRoadmap

For additional information about *Live Well San Diego*, go to:

- <http://www.LiveWellSD.org>

For additional information on the programs offered by Aging & Independence Services:

- <https://www.sandiegocounty.gov/content/sdc/hhsa/programs/ais.html>

For additional information on Residential Care Facilities for the Elderly (RCFEs) and facility scores:

- <https://choosewellsandiego.org/>

For additional information on the Alzheimer’s Project:

- <http://www.sdalzheimersproject.org>





Performance Measures		2022–23 Actuals	2023–24 Adopted	2023–24 Actuals	2024–25 Adopted	2025–26 Approved
	Initial IHSS assessments certified timely (Within 45 Days)	93% of 18,290	90% of 19,000	96% of 20,108	90% of 19,800	90% of 19,800
	Annual IHSS assessments recertified timely	98% of 34,230	97% of 35,600	99% of 36,271	97% of 37,000	97% of 37,000
	Meals to older adults who are home-bound or in congregate care ¹	1,801,232	1,200,000	1,840,970	1,500,000	1,500,000
	Feeling Fit participants reporting better overall health ²	97% of 100	75% of 100	97% of 100	90% of 100	90% of 100
	Vulnerable Adults with Supportive Services ³	77% of 9,008	64% of 8,500	78% of 9,144	70% of 12,300	70% of 12,300
	Skilled Nursing Facilities visited quarterly	99% of 84	100% of 84	93% of 84	100% of 84	100% of 84
	Residential Care Facilities visited quarterly ⁴	86% of 568	90% of 577	73% of 570	90% of 570	90% of 570
	AIS Call Center calls answered under 5 minutes ⁵	86% of 73,196	80% of 60,000	90% of 76,707	80% of 69,000	80% of 69,000
	Face-to-face APS investigations conducted within 10 days of referral ⁶	99% of 9,302	97% of 8,755	97% of 10,372	97% of 12,050	97% of 12,050
	Timely PA/PG Accountings Filed with Probate Court within 90 days ⁷	95% of 43	100% of 50	100% of 40	N/A	N/A
	Timely PA/PG Inventory and Appraisals within 90 days of appointment for PG and within 120 days of authorization to act on behalf of decedent for PA ⁷	N/A	N/A	N/A	100% of 30	100% of 30

Table Notes

¹ In Fiscal Year 2023–24, additional funding allowed AIS to serve more meals to more participants, and is not expected to continue.

² In Fiscal Year 2023–24, the target was exceeded due to increased satisfaction in the variety of program offerings (hybrid, virtual, in-person), making it easier for participants to attend.

³ In January 2022, State regulations expanded program eligibility to include non-dependent adults aged 60–64, resulting in APS caseload growth in Fiscal Year 2022–23 and 2023–24.

⁴ In Fiscal Year 2023–24, this performance measure was not met due to a decrease in volunteers.

⁵ In Fiscal Year 2023–24, AIS Call Center volume was higher than anticipated, due to the increase in IHSS and APS clients.





⁶ In January 2022, State regulations expanded program eligibility to include non-dependent adults aged 60-64, resulting in APS caseload growth in Fiscal Years 2022–23 and 2023–24.

⁷ The number of final accountings filed is dependent upon client case closures or the death of the client, which was less than anticipated in Fiscal Year 2022–23 and 2023–24. In Fiscal Year 2024–25, the performance measure on “Timely PA/PG Accountings Filed with Probate Court within 90 days” will be replaced with “Timely PA/PG Inventory and Appraisal concerning all estate assets with the Probate Court within 90 days of appointment for PG and 120 days of authorization to act on behalf of the decedent for PA” to align with guidelines for PA/PG conservatorship and decedent affairs.

Budget Changes and Operational Impact: 2023–24 to 2024–25

Staffing

Net increase of 3.00 staff years

- ◆ Increase of 2.00 staff years in the San Diego Veteran Services at any Age (SD-VISA) program to expand program capacity to help veterans in need of long-term support to avoid institutionalization and continue to live in their communities by arranging consumer driven, self-directed services.
- ◆ Increase of 2.00 staff years to support modernizing the Mello-Granlund Older Californians Act (OCA) Supportive Services and Nutrition Services. Staff will support the expansion of the Linkages Program, Older Californians Nutrition Program, Caregiver Respite, No Cost Transportation, as well as planning and coordinating future opportunities to maximize this one-time funding available into 2029.
- ◆ Decrease of 1.00 staff year tied to the prior year’s transfer of the Public Conservator to Behavioral Health Services.
- ◆ Additionally, staff were transferred among related programs within Aging & Independence Services to manage operational needs.

Expenditures

Net increase of \$23.2 million

- ◆ Salaries & Benefits—increase of \$8.7 million due to negotiated labor agreements and the addition of 3 staff years, partially offset by salary adjustments to reflect normal staff turnover.
- ◆ Services & Supplies—net increase of \$12.6million.
 - ◆ Increase of \$11.4 million for the County’s In-Home Supportive Services (IHSS) Maintenance of Effort (MOE) tied to prior year negotiated wage increases and the annual statutory 4% increase in the County’s share of program costs.
 - ◆ Increase of \$2.2 million tied to the SD-VISA program to expand program capacity to help veterans in need of long-term support to avoid institutionalization and continue to live in their communities by arranging consumer driven, self-directed services.

- ◆ Increase of \$0.8 million to support efforts to promote food security and senior nutrition, , and support services and other aging programs associated with the efforts on the Modernization of the Older Californians Act (MOCA), Older Adults Recovery and Resilience, and Older American Act (OAA) allocation increase.
- ◆ Increase of \$0.5 million in information technology system upgrades and software to support County Technological Office requirements and the cloud based GetCare system designed to help AIS collect and report required data to the California Department of Aging.
- ◆ Increase of \$0.25 million for the extension of the Senior No Cost Transportation program.
- ◆ Decrease of \$2.3 million associated with adjusting one-time American Rescue Plan Act (ARPA) funding for the No Cost Senior Transportation and Senior Nutrition programs. Funds remaining and carried over for No Cost Senior Transportation from the prior year will be available to continue to spend in the budget year.
- ◆ Decrease of \$0.2 million associated with operational savings to align appropriations to spending trends and forecasted needs in various operating accounts.
- ◆ Expenditure Transfer & Reimbursements—net increase of \$0.1 million associated with an increase of \$0.25 million in centralized General Fund support for the Senior No Cost Transportation extension offset by decrease of \$0.1 million for prior year one-time costs for negotiated labor agreement. Since this is a transfer of expenditures, it has a net effect of a \$0.1 million decrease in appropriations.
- ◆ Operating Transfer Out—net increase of \$2.0 million primarily to align IHSS provider health benefit costs reflected in the Public Authority with anticipated caseload growth.

Revenues

Net increase of \$23.2 million

- ◆ Intergovernmental Revenues—net increase of \$20.9 million.
 - ◆ Net increase of \$11.4 million in available one-time Realignment revenues primarily to support the increase in the IHSS MOE.
 - ◆ Increase of \$9.9 million in federal and State social services revenues to align to anticipated administrative allocations and support increased operating costs for IHSS and Adult Protective Services.



AGING & INDEPENDENCE SERVICES

- ◆ Increase of \$1.9 million in federal OAA and State MOCA funding to continue to promote food security and senior nutrition, support services, and other aging services to older adults.
- ◆ Decrease of \$2.3 million to reflect the end of ARPA revenue for the No Cost Senior Transportation program and Senior Nutrition programs noted above.
- ◆ Miscellaneous Revenues—increase of \$2.4 million tied to SD-VISA revenue for program and staff years noted above.
- ◆ General Purpose Revenue Allocation—decrease of \$0.1 million reallocated to other departments within HHSA as part of an overall budget shortfall mitigation strategy to budget available one-time Realignment revenue in areas with eligible costs and shift GPR among departments as needed.

Budget Changes and Operational Impact: 2024–25 to 2025–26

No significant changes



Staffing by Program						
		Fiscal Year 2023-24 Adopted Budget			Fiscal Year 2024-25 Adopted Budget	Fiscal Year 2025-26 Approved Budget
In-Home Supportive Services		325.00			328.00	328.00
Senior Health and Social Services		45.00			43.00	43.00
Protective Services		199.00			200.00	200.00
Administrative and Other Services		43.00			45.00	45.00
Public Administrator/ Guardian/Conservator		39.00			38.00	38.00
Total		651.00			654.00	654.00

Budget by Program						
	Fiscal Year 2022-23 Actuals	Fiscal Year 2023-24 Adopted Budget	Fiscal Year 2023-24 Amended Budget	Fiscal Year 2023-24 Actuals	Fiscal Year 2024-25 Adopted Budget	Fiscal Year 2025-26 Approved Budget
In-Home Supportive Services	\$ 156,631,636	\$ 191,726,721	\$ 191,758,657	\$ 193,165,531	\$ 211,970,773	\$ 222,807,751
Senior Health and Social Services	23,393,928	34,406,898	35,332,755	25,974,020	34,547,107	33,897,689
Protective Services	27,715,995	36,359,576	37,142,142	31,797,296	37,511,968	38,937,657
Administrative and Other Services	6,661,226	12,785,246	12,774,556	9,236,968	14,379,443	12,363,814
Public Administrator/ Guardian/Conservator	7,540,811	6,377,715	6,378,445	7,006,862	6,397,234	6,694,387
Total	\$ 221,943,596	\$ 281,656,156	\$ 283,386,555	\$ 267,180,676	\$ 304,806,525	\$ 314,701,298

Budget by Categories of Expenditures						
	Fiscal Year 2022-23 Actuals	Fiscal Year 2023-24 Adopted Budget	Fiscal Year 2023-24 Amended Budget	Fiscal Year 2023-24 Actuals	Fiscal Year 2024-25 Adopted Budget	Fiscal Year 2025-26 Approved Budget
Salaries & Benefits	\$ 72,004,707	\$ 87,471,402	\$ 88,708,451	\$ 88,262,902	\$ 96,152,395	\$ 100,915,807
Services & Supplies	111,986,288	146,969,996	147,632,326	135,699,891	159,567,065	162,897,837
Other Charges	568,982	467,128	470,636	541,550	467,128	467,128
Expenditure Transfer & Reimbursements	(227,512)	(104,351)	(276,839)	(47,789)	(250,000)	—
Operating Transfers Out	37,611,132	46,851,981	46,851,981	42,724,122	48,869,937	50,420,526
Total	\$ 221,943,596	\$ 281,656,156	\$ 283,386,555	\$ 267,180,676	\$ 304,806,525	\$ 314,701,298



Budget by Categories of Revenues						
	Fiscal Year 2022-23 Actuals	Fiscal Year 2023-24 Adopted Budget	Fiscal Year 2023-24 Amended Budget	Fiscal Year 2023-24 Actuals	Fiscal Year 2024-25 Adopted Budget	Fiscal Year 2025-26 Approved Budget
Licenses Permits & Franchises	\$ 68,226	\$ 57,772	\$ 57,772	\$ 64,806	\$ 57,772	\$ 57,772
Fines, Forfeitures & Penalties	269,451	172,489	172,489	332,452	172,489	172,489
Revenue From Use of Money & Property	118,310	85,000	85,000	10,000	85,000	85,000
Intergovernmental Revenues	200,760,989	255,838,202	256,748,202	241,009,671	276,689,976	273,559,521
Charges For Current Services	768,243	730,000	730,000	951,839	730,000	730,000
Miscellaneous Revenues	1,867,424	1,963,150	1,963,150	2,257,281	4,401,398	4,406,913
Other Financing Sources	398,207	420,000	352,622	352,622	420,000	420,000
Use of Fund Balance	(4,245,999)	—	887,777	(187,539)	—	—
General Purpose Revenue Allocation	21,938,745	22,389,543	22,389,543	22,389,543	22,249,890	35,269,603
Total	\$ 221,943,596	\$ 281,656,156	\$ 283,386,555	\$ 267,180,676	\$ 304,806,525	\$ 314,701,298



Behavioral Health Services

Mission Statement

To make people’s lives healthier, safer and self-sufficient by delivering essential services in San Diego County.

Department Description

Behavioral Health Services (BHS) advances the HHS mission by providing essential mental health and substance use disorder services to Medi-Cal eligible individuals of all ages, including those experiencing justice involvement and/or homelessness.

In Fiscal Year 2023–24, BHS continued efforts to accelerate the transformation of the Behavioral Health Continuum of Care (COC) by enhancing, expanding, and innovating the array of behavioral health services available through collaboration with justice partners, hospitals, community health centers, community-based providers, and residents. This includes establishing regionally distributed services and infrastructure to ensure individuals have access to the appropriate level of behavioral health care that meets their unique needs long-term. It is guided by data, focused on equity, and designed to increase collaboration within and outside government. The broad aim of the Continuum of Care strategy applies to all ages in that integrated and preventative services are the key to improved outcomes over time and should be tailored in ways that reduce health disparities.

The Behavioral Health Continuum of Care served 105,000 San Diego County residents annually in four critical roles as follows:

- ◆ **As a contractor** working with community partners to provide mental health and substance use disorder services via a coordinated system of care that includes approximately 350 contracts and 300 individual fee-for-service providers.
- ◆ **As a direct service provider** through County-operated programs, including adult outpatient services, case management services, care coordination services, and adult and children’s forensics services, the Public Conservator, the Senate Bill (SB) 1338, *Community Assistance, Recovery & Empowerment (CARE) Act*, and the San Diego County Psychiatric Hospital (SDCPH) and Edgemoor Distinct Part Skilled Nursing Facility (DP-SNF), which provide 24/7 inpatient care to the community’s most vulnerable individuals.
- ◆ **As a health plan** serving individuals with serious mental illness and substance use conditions who are Medi-Cal eligible.
- ◆ **As a public health entity** that advances the region’s behavioral health at a population level.



BHS remains committed to accelerating critical bodies of work to achieve the vision of transforming the system from one driven by crisis to one rooted in chronic and continuous care and prevention achieved through the regional distribution and coordination of services, and integration with primary healthcare, to keep people connected, stable, and healthy. The following three interrelated strategic pillars support the BHS vision:

- ◆ Integrating a population health approach into the behavioral health system to ensure equitable access to services for all residents.
- ◆ Refining key metrics across behavioral health services, in alignment with nationally recognized best practices, to ensure data-driven clinical design, optimal oversight, and meaningful client outcomes.
- ◆ Advancing strategies and tactics to achieve the Triple Aim: 1) improve the health of populations, 2) enhance the experience and outcomes of individuals, and 3) reduce per capita costs of care.

BHS continues to prioritize access to high-quality client-centered services designed to prevent and divert individuals from more intensive levels of care and connect them with the ongoing community-based care and housing they need.

Services provided across the Behavioral Health Continuum of Care include, but are not limited to, those listed below with numbers reflecting the end of the Fiscal Year 2022–23:

- ◆ **Access and Crisis Line**—answers more than 86,000 calls annually, providing crisis intervention and referrals using licensed clinical staff, and began taking calls for the new 9-8-8 national crisis number.
- ◆ **Acute Inpatient Psychiatric Services**—provides 24/7 inpatient psychiatric care in a hospital setting and connection to step-down services through 60 inpatient beds at the San Diego County Psychiatric Hospital and 542 licensed inpatient beds

for adults and 16 dedicated beds for Medi-Cal and unfunded children and youth with additional beds through contracted providers.

- ◆ **Adult Residential Facilities (ARF)/Residential Care Facility for the Elderly (RCFE)**—provides care, supervision, and additional rehabilitative services and support through 242 beds in a home-like setting to individuals concurrently receiving community-based specialty mental health services and/or fee-for-service (FFS) psychiatry services to divert them from unnecessary use of higher-level resources dedicated for individuals.
- ◆ **Board and Care**—inclusive of licensed adult residential facilities and residential care facilities for the elderly that provide care, supervision, and additional rehabilitative services and support through 242 beds in a home-like setting to individuals concurrently receiving community-based specialty mental health services and/or fee-for-service (FFS) psychiatry services to divert them from unnecessary use of higher-level resources dedicated for individuals.
- ◆ **CARE Act Services**—The SB 1338, *Community Assistance, Recovery & Empowerment Act* services provide outreach and engagement, clinical evaluation, service coordination, and behavioral health treatment services, which may include treatment, housing, medication, and other social supports for individuals with serious mental illness who meet eligibility criteria and have a court-ordered CARE plan. Since services began in October 2023, BHS has received 131 petitions with 66 dismissed and 65 active cases through June 28, 2024.
- ◆ **Collaborative Courts**—provides nearly 500 individuals with court-directed substance use disorder and mental health treatment services as an alternative to incarceration.
- ◆ **Crisis Residential Services**—provides mental health services to over 2,000 adults experiencing a crisis and requiring treatment.
- ◆ **Crisis Stabilization Units (CSUs)**—provides short-term (less than 24 hours) services for more than 14,000 youth and adults experiencing a behavioral health crisis (this includes re-admissions). Five CSUs serve adults, with planning underway for an additional adult CSU in the East Region, and one CSU serving children and youth:
 - ◆ North Coastal Community-Based CSU in Vista.
 - ◆ North Coastal Live Well Health Center Community-Based CSU in Oceanside.
 - ◆ North Inland Hospital-Based CSU at the Palomar Hospital campus in Escondido.
 - ◆ South Region Hospital-Based CSU located at Bayview Behavioral Health Campus in Chula Vista.
 - ◆ San Diego County Psychiatric Hospital in Central San Diego.
 - ◆ Children’s Community-Based Emergency Screening Unit.
- ◆ **Edgemoor Distinct Part Skilled Nursing Facility**—provides 24-hour, long-term skilled nursing care for individuals with complex medical needs who require specialized interventions

from highly trained staff with a licensed maximum bed capacity of 192, of which 160 beds are currently available due to construction of the new acute inpatient unit. Edgemoor was named one of Newsweek’s Best Nursing Homes for 2024, ranking number three in California. Additionally, Edgemoor remains an overall five-star facility on the Centers for Medicare and Medicaid Services (CMS) Care Compare site for Nursing Homes. Edgemoor achieved five out of five stars in all four rating categories (Overall Quality, Health Inspection, Quality Measures, Staffing, and Registered Nurse Staffing).

- ◆ **Full-Service Partnership (FSP) Programs**—embraces a “whatever it takes” approach to provide services for 19,000 residents with a serious mental illness, including those who were homeless or at-risk of homelessness, through assertive community treatment and other intensive treatment services that include linkages to housing and employment services. For children and youth, Wraparound programs support nearly 350 individuals with complex behavioral health needs.
- ◆ **In-Home Outreach Team (IHOT) and Assisted Outpatient Treatment (AOT)**—offer services for people with mental illness who have been historically difficult to engage in treatment per Laura’s Law. IHOT/AOT receives more than 900 referrals annually, with more than 580 individuals accepted into the programs.
- ◆ **Mobile Crisis Response Teams (MCRTs)**—provides over 5,000 community-based crisis interventions to individuals of all ages to reduce law enforcement interventions when clinically appropriate.
- ◆ **Office of the Public Conservator**—investigates over 470 referrals for Lanterman-Petris Short (LPS) conservatorships to arrange placement and mental health treatment for adults who are gravely disabled due to a mental health condition and are incapable of accepting voluntary treatment, and whose family or others are not able and willing to meet these personal needs. The referrals are received from hospitals, jails, state hospitals, and the Court with approximately 1,400 individuals placed on Conservatorship.
- ◆ **Pathways to Well-Being**—connects approximately 1,500 youth involved in Child and Family Well-Being (CFWB), as well as youth receiving services in mental health treatment programs who have multi-system involvement (Probation, Education, Regional Centers, etc.) to services such as Intensive Care Coordination (ICC), Intensive Home-Based Services (IHBS), and the Child and Family Team (CFT).
- ◆ **Prevention and Early Intervention (PEI) Programs**—supports mental health awareness, stigma reduction and discrimination toward individuals with mental health conditions, suicide prevention, and prevention services that support access to care at the earliest point of need.





- ◆ **Psychiatric Emergency Response Teams (PERT)**—pairs a clinician with a law enforcement officer to respond to 911 calls, in which individuals are experiencing a behavioral health crisis, to facilitate connection to behavioral health care, which included 11,000 crisis intervention incidents.
- ◆ **Recovery Residences**—privately-owned homes or living situations that provide housing to over 2,400 unique individuals with an open admission to substance use outpatient services or recovery services.
- ◆ **Residential Treatment Facilities**—provides community-based specialty licensed mental health services to over 1,560 adults through 81 short-term crisis residential treatment beds and 22 transitional residential treatment beds as an alternative to acute psychiatric hospitalization and institutional care.
- ◆ **San Diego County Psychiatric Hospital (SDCPH)**—provides 24/7 crisis stabilization and acute inpatient services to adults experiencing a mental health crisis to support them in stabilizing and moving to a less restrictive level of care. SDCPH served over 5,000 adults through psychiatric evaluations and more than 1,500 persons through inpatient services, including psychiatric evaluations, crisis intervention, and/or acute treatment.
- ◆ **School-Based Mental Health Services**—collaborates with school districts to focus on providing mental health support to children and youth on school campuses through the following programs:
 - ◆ **SchoolLink**—offers outpatient mental health treatment in more than 400 designated schools throughout the county.
 - ◆ **Screening to Care**—offers screening and social-emotional support to middle school students to promote wellness. The program was launched in Fiscal Year 2022–23 with services offered in 39 schools county-wide.
 - ◆ **Incredible Years**—promotes wellness for elementary school students by utilizing the Incredible Years Evidence Based Model offered in 43 schools to over 12,740 students in classroom services with over 4,000 students receiving small group support.
- ◆ **Short-Term Residential Therapeutic Programs (STRTPs)**—offers a therapeutic environment for approximately 300 children and youth annually who are placed in a congregate care setting through a placing agency.
- ◆ **Stabilization, Treatment, Assessment, and Transition (STAT) Team**—supports nearly 700 youth in Juvenile Detention facilities through a team of clinical staff using various therapeutic programs and support at collaborative courts serving youth.
- ◆ **Subacute Care**—provides care for individuals who are stepping down from acute psychiatric care or for individuals whose acuity may have intensified and need a higher level of care through 417 beds in Mental Health Rehabilitation Centers and Skilled Nursing Facilities (SNFs)/Special Treatment Programs, with an additional 57 SNF beds that have County SNF patches, or augmented rates, for psychiatric acuity.
- ◆ **Substance Use Disorder (SUD) Outpatient Programs**
 - ◆ **Adult SUD Outpatient**—provides mental health services to over 5,800 adults experiencing a crisis and requiring treatment.
 - ◆ **Teen SUD Outpatient**—provides outpatient substance use disorder treatment services to over 640 youth ages 12-17 through regionally-based clinic locations and approximately 21 school-based facilities. Services include treatment, including Medication Assisted Treatment (MAT), early intervention, peer support, recovery services, and family engagement using a harm reduction approach, offered throughout the county in urban and rural communities and include school-based early intervention screening and education and crisis intervention services.
 - ◆ **Opioid Treatment Programs**—provides opioid MAT, detoxification, and/or maintenance treatment services, including medical evaluations and rehabilitative services to more than 3,800 persons addicted to opiates.
 - ◆ **Perinatal SUD Outpatient Programs**—offers outpatient SUD treatment and recovery services to more than 960 individuals, including gender-specific, trauma-informed specialized programming for pregnant and parenting women and adolescents and services for their young children.
 - ◆ **Acute Withdrawal Management**—services for medical and psychological care of 16,755 individuals who are experiencing withdrawal symptoms resulting from ceasing or reducing use of their drug of dependence.

Efforts to enhance service delivery across BHS include services and infrastructure development, opportunities for system transformation and cross departmental and community collaborations:

Services and Infrastructure Development

- ◆ BHS continues to make progress on implementing strategies outlined in the Behavioral Health Optimal Care Pathways (OCP) model, a data-informed algorithm that quantifies optimal utilization across three key services areas, including community-crisis diversion, subacute care, and community-based care, and makes recommendations to recalibrate and expand services. The OCP model focuses on removing barriers to care and diversion to the least restrictive environment, so individuals are connected to the care they need ensuring wellness over the long-term and resulting in a reduced per capita cost.
- ◆ To increase community-based care capacity, BHS was awarded Behavioral Health Bridge Housing Program grant funding of \$44.3 million to increase bridge housing capacity for individuals with serious behavioral health conditions who are experiencing homelessness to increase board and care ASP capacity within adult and senior residential care facilities. BHS also continues planning efforts to preserve existing



board and care capacity through \$15.8 million of Community Care Expansion Preservation grant funds awarded to the department.

- ◆ To further build community-based care capacity, planning continues on the development of the Central Region Community-Based Care Facility located on a vacant County-owned parcel of land in Hillcrest, which will be developed as an adult residential facility, residential care facility for the elderly, and recuperative care facility that offers 24/7 care and supervision to Medi-Cal eligible individuals.
- ◆ To establish new acute inpatient capacity, planning continues to establish a 12-bed acute inpatient unit within the existing footprint of the Edgemoor Distinct Part Skilled Nursing facility within the East Region. The new psychiatric inpatient unit will increase accessibility to behavioral health care for vulnerable individuals residing the East Region, which currently has limited behavioral health infrastructure, but will also serve residents countywide. BHS was awarded Behavioral Health Continuum Infrastructure grant funds totaling \$16.8 million for this capital project, which will require a \$4.4 million County match funded by Realignment.
- ◆ To enhance dedicated subacute care, planning is underway to redesign and reconfigure services operating at the San Diego County Psychiatric Hospital to better meet the needs of the clients being served. The new array of services will likely include subacute care in the more immediate term and potentially evolve to serve clients with complex conditions, in the future.
- ◆ Construction also continues on the 16-bed Psychiatric Health Facility (PHF) located on the Tri-City campus in Oceanside, in partnership with Tri-City Healthcare District. The 24-hour facility will provide short-term, client-centered inpatient care for adults with psychiatric needs. Construction is slated for completion in 2024, with services to commence soon after.
- ◆ Planning is also underway to develop and construct the East Region Crisis Stabilization Unit (CSU), which will provide individuals who are experiencing a behavioral health crisis with short-term stabilization services for up to 24 hours within a relaxing and calming environment. Services are designed to divert individuals from unnecessary emergency room visits or involvement with law enforcement and connect them to behavioral health care.
- ◆ To support access to behavioral health care for children, youth, and families, BHS has a broad strategy to strengthen and innovate services within three key domains—1) family; 2) schools; and 3) healthcare—that will be critical areas of focus to meet the growing needs of children and youth to build protective factors, promote resiliency, and well-being.
- ◆ For families, BHS will leverage new opportunities emerging through the State’s Medi-Cal funding reform efforts to offer family therapy and dyadic treatment consistent with the best evidence and in ways that are also culturally responsive.

- ◆ BHS collaborated with school districts to implement the Screening to Care program that provides behavioral health screening to middle school children countywide regardless of their insurance status. Based on their needs, the child is referred to the school community and classroom-based intervention, small group intervention, or treatment services offered in existing BHS SchoolLink programs.

Opportunities for System Transformation

- ◆ Beginning July 2023, BHS began implementation of Medi-Cal Transformation, a state initiative designed to improve the quality of life and health outcomes of Californians through delivery system, program, and behavioral health payment reform across Medi-Cal services. Behavioral health payment reform will transition all Medi-Cal service providers from a cost reimbursement model of payment to a fee for service structure that incentivizes outcomes and quality over volume and cost. Behavioral health payment reform is anticipated to simplify payment structures and burdensome administrative practices, while providing an opportunity to better sustain costs of behavioral health care and build network capacity and bolster the workforce.
- ◆ To continue building up the workforce, BHS will implement the Mental Health Services Act (MHSA) Public Behavioral Workforce Development and Retention program, approved by the Board of Supervisors in May 2023 and the Mental Health Services Oversight and Accountability Commission in June 2023. This MHSA Innovation program will implement workforce recruitment, development, and retention strategies, as outlined in the Addressing San Diego’s Behavioral Health Worker Shortage report published in August 2022, through the implementation of two components:
 - ◆ **Outcomes-Based Renewable Training and Tuition Fund**, providing 0% interest loans and upfront financing to students completing behavioral health clinical training and supervision programs; and
 - ◆ **Upskilling to Meet Professional Need**, providing training and apprenticeship programs to County and County-contracted public behavioral health workers to achieve licensure and/or certification.
- ◆ In March 2024, California voters approved Proposition 1, the Behavioral Health Services Program and Bond Measure, also referred to as the Behavioral Health Services Act (BHSA), to modernize the Mental Health Services Act (MHSA) originally passed by voters in 2004. The BHSA includes reforms outlined in Assembly Bill 531, *the Behavioral Health Infrastructure Bond Act of 2023*, and Senate Bill 326, *the Behavioral Health Services Act (BHSA)*, and signed by the Governor in October 2023. The BHSA will be implemented on July 1, 2026, shifting funding to support individuals with the most serious mental illness, emphasizing housing, and expand to include substance use services. It will also finance \$6.38 billion in bonds for new treatment beds and create permanent supportive





housing for individuals with serious behavioral health conditions who are experiencing homelessness or at risk of homelessness.

Cross-Departmental and Community Collaboration

- ◆ On October 2, 2023, the Community Assistance, Recovery and Empowerment (CARE) Act program began in partnership with the Superior Court, Public Defender, legal advocacy, community partners, and contracted service providers. The CARE Act program offers a new pathway to deliver mental health and substance use services to individuals who are diagnosed with schizophrenia or other psychotic disorders and are not engaged in treatment.
- ◆ On December 5, 2023, the Board approved a resolution to delay implementation of Senate Bill (SB) 43 to no later than January 1, 2025. SB 43 makes changes to the Lanterman-Petris-Short (LPS) Act—a California law governing involuntary detention, treatment, and conservatorship of people with behavioral health conditions. SB 43 significantly updates California’s civil detention and conservatorship laws by establishing new diagnostic criteria and by broadening the definition of “grave disability.” Planning for implementation of SB 43 continues, in collaboration with local hospitals, providers, partners, and other stakeholders.
- ◆ Planning for implementation of the strategies outlined in the County’s Comprehensive Substance Use Harm Reduction Strategy continued, including activities outlined in the Opioid Settlement Framework approved by the Board in October 2023, and developed in collaboration with Public Health Services and Public Safety. Harm Reduction is a set of strategies to reduce the negative consequences of drug use, that includes meeting people who use drugs “where they are” and addressing the conditions of use. The Community Harm Reduction Team’s effort was recognized as an outstanding Behavioral Health Program by the San Diego Business Journal at the 2023 Salute to Health Care Heroes Awards Ceremony. Several key highlights within Harm Reduction include:
 - ◆ Community informed public messaging to enhance awareness of the harms associated with opioid misuse, overdose prevention, and the availability of community resources.
 - ◆ Expanding access to naloxone countywide, including rural areas, and placing and managing naloxone vending machines with an estimated 75,000 naloxone kits being allocated to network partners.
 - ◆ Planning for implementation of the San Diego Relay, a 24/7 nonfatal overdose response service in select emergency departments (EDs) anticipated to launch in early in Fiscal Year 2024–25.
 - ◆ Planning for implementation of Drug Checking Services, a harm reduction service that informs individuals on the chemical composition of their drug samples and pairs peer

led interventions to support informed decision-making and access to linkage to care services anticipated to launch early in Fiscal Year 2024–25.

- ◆ Ongoing collaboration with the Public Safety Group, San Diego County Fire, and County Emergency Medical Services (EMS) continued to support various overdose prevention, surveillance, and response activities. Additionally, in partnership with Public Health Services, BHS is continuing to establish a cross-departmental County Overdose Surveillance and Response (OSAR) program to ensure the County monitors trends, identification of possible causes, investigates individual or cluster events, and community response.

To deliver these critical services, BHS has 1,332.50 staff years, including medical professionals, and a budget of \$1.2 billion that includes payments made to care providers.

2023–24 Accomplishments



Equity

- Health: Reduce disparities and disproportionality and ensure access for all through a fully optimized health and social service delivery system and upstream strategies.
 - Ensured 90% (1,170 of 1,300) of individuals admitted to the San Diego Psychiatric Hospital (SDCPH) were not readmitted within 30 days of discharge, demonstrating accountability and commitment to outstanding patient care.
 - Ensured 75% (1,950 of 2,600) of FSP/ACT program participants did not utilize emergency services while enrolled in the program. FSP/ACT services are the highest levels of outpatient care serving homeless individuals (or at risk of homelessness) with a “whatever it takes, 24/7” approach to treatment, including housing and employment services.
 - Ensured 80% (2,160 of 2,700) of individuals who completed crisis residential treatment were not readmitted to a crisis residential program or hospital within 30 days of discharge, supporting an individual’s successful integration into the community.
 - Tracked and analyzed connection to ongoing care for individuals discharged from a crisis stabilization unit with a referral to follow-up specialty mental health outpatient services to establish a baseline to align with national standards of follow-up care. Connection denotes completing at least one service encounter consistent with national Healthcare Effectiveness Data and Information Set (HEDIS) standards.
- Health: Focus on policy, systems, and environmental approaches that ensure equal opportunity for health and well-being through partnerships and innovation.



- Implemented a proactive and collaborative Clinical Design process to review 100% of identified contracts, ensuring the services are data-informed, culturally responsive, evidence-informed, cost-effective, reflective of community needs, and expected to deliver high-quality care to individuals being served before implementation or procurement.



Sustainability

- Climate: Actively combat climate change through innovative or proven policies, green jobs, sustainable facility construction or maintenance and hazard mitigation.
 - Supported and shared information to operationalize facility sustainability policies and procedures within County-owned and leased facilities, as directed by the Board of Supervisors, County leadership, and the Department of General Services.
 - Coordinated with contracted providers to implement sustainability policies and procedures, as directed by the Board of Supervisors, County leadership, and the Department of Purchasing and Contracting.
 - Supported remote working for employees within the department, when possible, to reduce the departmental footprint and vehicle emissions by reviewing and evaluating job roles and office space to determine opportunities for remote working while balancing client and community needs for in-person service delivery.
 - Mid-Term: Improved sustainability by encouraging contractors to evaluate the use of electric vehicles across contracted programs when procuring/leasing new vehicles.
 - Long-Term: Partnered with the Department of General Services to explore sustainable design and construction of new BHS capital projects.
- Resiliency: Ensure the capability to respond and recover to immediate needs for individuals, families, and the region.
 - Diverted 80% (3,200 of 4,000) of Mobile Crisis Response Team (MCRT) interactions with individuals experiencing a behavioral health crisis from more intensive care settings such as emergency departments and hospital admissions. This was achieved by providing crisis intervention services in the community and linking individuals with treatment services, when needed. MCRTs provide non-law enforcement, community-based crisis response designed to engage individuals in behavioral health services and reduce law enforcement interventions when clinically appropriate.



Community

- Engagement: Inspire civic engagement by providing information, programs, public forums or other avenues that increase access for individuals or communities to use their voice, their vote, and their experience to impact change.

- Provided a variety of trainings to 35,000 community members countywide. Trainings covered a range of mental health topics to enhance community recognition of suicide warning signs and mental health crises so they can refer those at risk to available resources. These trainings empower community members to help connect others to needed services and lessen the likelihood of adverse outcomes.

- Safety: Support safety for all communities, including protection from crime, availability of emergency medical services and fire response, community preparedness and regional readiness to respond to a disaster.
 - Diverted 50% (6,000 of 12,000) of individuals of all ages from psychiatric hospitalization through crisis intervention services provided by Psychiatric Emergency Response Teams (PERT) by connecting individuals to appropriate behavioral health services. The PERT model pairs a clinician with law enforcement to ensure an appropriate response to an individual experiencing a behavioral health crisis.



Empower

- Workforce: Invest in our workforce and operations by providing support services and excellent customer service to ensure continuity of operations remains at its best.
 - Answered within 60 seconds 95% (59,850 of 63,000) of calls to the Access and Crisis Line (ACL) providing timely access to individuals who sought for behavioral health services.
 - Edgemoor Distinct Part Skilled Nursing Facility maintained five of five stars on the Centers for Medicare and Medicaid Services (CMS) Rating System. The CMS Five-Star Quality Rating System is a tool to help consumers select and compare skilled nursing care centers using standards that push the difficulty of achieving top-tier performance. Maintaining five stars ensures Edgemoor remains in California's top ten percent of skilled nursing facilities.
 - Promoted a culture of inclusion and belonging among County staff as they served the public with excellence. Based on the feedback from the 2022 biennial employee engagement survey, BHS conducted focus groups and collaborated with employees to create action plans that will enhance engagement in the department and maintain and strengthen an engaged and empowered workforce.
- Transparency and Accountability: Maintain program and fiscal integrity through reports, disclosures, and audits.
 - Issued the Customer Experience survey to all BHS customers and achieved a minimum average satisfaction rating of four (one to five scale). Develop and implement an improvement plan in areas with a rating lower than four. Implemented activities to enhance employee knowledge and improve departmental information flow, including the development of new internal communication tools and





processes and an employee engagement-focused workgroup comprised of representatives across all units of the department.

- Innovation: Foster new ideas and the implementation of proven best practices to achieve organizational excellence.
 - Ensured 85% (7,055 of 8,300) of individuals seeking outpatient substance use disorder treatment were offered an appointment within the 10-day timeliness standard as measured by the Third Next Available Appointment (TNAA). TNAA is a nationally recognized industry standard that most closely reflects a program's true access time, as the first and second next available appointments might be due to client cancellation or another event that is not predictable or reliable.



Justice

- Safety: Focus efforts to reduce disparities and disproportionality across the justice system.
 - Ensured 50% (1,100 of 2,200) of justice-referred clients discharged from a substance use treatment program with a referral were connected to another level of care within 30 days to ensure ongoing support and treatment.
 - Completed 95% (428 of 450) of initial assessments for grave disability within ten business days by the Public Conservators Office.
 - Supported the Sheriff's Office in enhancing detention facility healthcare through implementing evidence-based, medication-assisted treatment for opioid use disorders and effective care coordination for patients entering detention facilities and returning to the community. The BHS Justice Involved Medication Assisted Treatment (MAT) Care Coordination team is comprised of licensed mental health clinicians who worked with the Vista Detention Facility to coordinate linkages between in-custody programs and community MAT services. The voluntary services include short-term pre- and post-release care coordination services and reentry MAT linkages to prevent relapse and reduce recidivism.
 - Implemented the SB 1338, *Community Assistance, Recovery & Empowerment (CARE) Act* program on October 1, 2023, in partnership with the Public Defender, County Counsel, the Superior Court, and other community partners that provided a diversion from higher or more restrictive levels of care for individuals who meet specific CARE Act criteria by creating a new pathway for behavioral health care, support, and linkage to available housing.

2024–26 Objectives



Equity

- Health: Reduce disparities and disproportionality and ensure access for all through a fully optimized health and social service delivery system and upstream strategies.
 - Ensure 90% (1,170 of 1,300) of individuals admitted to the San Diego Psychiatric Hospital (SDCPH) are not readmitted within 30 days of discharge, demonstrating accountability and commitment to outstanding patient care.
 - Ensure 75% (1,950 of 2,600) of FSP/ACT program participants do not utilize emergency services while enrolled in the program. FSP/ACT services are the highest levels of outpatient care serving homeless individuals (or at risk of homelessness) with a "whatever it takes, 24/7" approach to treatment, including housing and employment services.
 - Ensure 80% (2,160 of 2,700) of individuals who complete crisis residential treatment will not be readmitted to a crisis residential program or hospital within 30 days of discharge, supporting an individual's successful integration into the community.
 - Track and analyze connection to ongoing care for individuals discharged from a crisis stabilization unit with a referral to follow-up specialty mental health outpatient services to establish a baseline to align with national standards of follow-up care. Connection denotes completing at least one service encounter consistent with national Healthcare Effectiveness Data and Information Set (HEDIS) standards.
- Health: Focus on policy, systems, and environmental approaches that ensure equal opportunity for health and well-being through partnerships and innovation.
 - Implement a proactive and collaborative Clinical Design process to review 100% of identified contracts, ensuring services are data and evidence-informed, cost-effective, culturally responsive, reflective of community need and expected to deliver high quality care to individuals being served prior to implementation or procurement.



Sustainability

- Resiliency: Ensure the capability to respond and recover to immediate needs for individuals, families, and the region.
 - Divert 80% (3,360 of 4,200) of Mobile Crisis Response Team (MCRT) interactions with individuals experiencing a behavioral health crisis from more intensive care settings such as emergency departments and hospital admissions. This is achieved by providing crisis intervention services in the community and linking individuals with treatment services, when needed. MCRTs provide non-law enforcement, community-based crisis response designed to engage individuals in behavioral health services and reduce law enforcement interventions when clinically appropriate.



Community

- Engagement: Inspire civic engagement by providing information, programs, public forums or other avenues that increase access for individuals or communities to use their voice, their vote, and their experience to impact change.
 - Provide training to at least 35,000 community members countywide to enhance community recognition of suicide warning signs and mental health crises so they can refer those at risk to available resources. These trainings empower community members to help connect others to needed services and lessen the likelihood of adverse outcomes.
- Safety: Support safety for all communities, including protection from crime, availability of emergency medical services and fire response, community preparedness and regional readiness to respond to a disaster.
 - Divert 50% (6,000 of 12,000) of individuals of all ages from psychiatric hospitalization through crisis intervention services provided by Psychiatric Emergency Response Teams (PERT) by connecting individuals to appropriate behavioral health services. The PERT model pairs a clinician with law enforcement to ensure an appropriate response to an individual experiencing a behavioral health crisis.



Empower

- Workforce: Invest in our workforce and operations by providing support services and excellent customer service to ensure continuity of operations remains at its best.
 - Answer within 60 seconds 95% (68,400 of 72,000) of calls to the Access and Crisis Line (ACL) to provide timely access for individuals seeking behavioral health services.
 - Edgemoor Distinct Part Skilled Nursing Facility will maintain five of five stars on the Centers for Medicare and Medicaid Services (CMS) Rating System. The CMS Five-Star Quality Rating System is a tool to help consumers select and compare skilled nursing care centers using standards that push the difficulty of achieving top-tier performance. Maintaining five stars ensures Edgemoor remains in California's top ten percent of skilled nursing facilities.

- Achieve organizational excellence by ensuring a workplace of belonging and inclusion for all County employees as they deliver services to the public. This will be achieved by implementing the BHS Employee Engagement Action plan. Efforts include assessing the BHS Staff Advisory Board's focus and participants to provide recommendations for Employee Experience-focused committees, creating In-service videos to share best practices, and implementing a revised Employee Engagement and Reorganization Share-Point Pages and newsletter.
- Transparency and Accountability: Maintain program and fiscal integrity through reports, disclosures, and audits.
 - Issue the Customer Experience survey to all BHS customers and achieve a minimum average satisfaction rating of four (one to five scale). Develop and implement an improvement plan in areas with a rating lower than four.



Justice

- Safety: Focus efforts to reduce disparities and disproportionality across the justice system.
 - Ensure 50% (1,100 of 2,200) of justice-referred clients discharged from a substance use treatment program with a referral are connected to another level of care within 30 days to ensure ongoing support and treatment.
 - Complete 95% (428 of 450) of initial assessments for grave disability within ten business days by the Public Conservators Office.
 - Ensure 90% (180 of 200) of CARE petitions referred will submit an initial Investigation Report, as ordered by the court, within 14 court days.

Related Links

For additional information on the programs offered by the Health and Human Services Agency, go to:

- ◆ <https://www.sandiegocounty.gov/content/sdc/hhsa.html>

For additional information about *Live Well San Diego*, go to:

- ◆ <http://www.LiveWellSD.org>

For information about mental illness, how to recognize symptoms, use local resources, and access assistance, go to:

- ◆ www.Up2SD.org










Performance Measures		2022-23 Actuals	2023-24 Adopted	2023-24 Actuals	2024-25 Adopted	2025-26 Approved
	SDCPH patients not readmitted within 30 days ^{1,9}	90% of 1,519	90% of 1,800	90% of 1,300	90% of 1,300	90% of 1,300
	FSP/ACT participants who decreased use of emergency service ^{2,9}	70% of 3,298	75% of 2,600	75% of 2,600	75% of 2,600	75% of 2,600
	Individuals not readmitted to a crisis residential program and/or hospital within 30 days ^{3,9}	79% of 2,012	80% of 2,700	80% of 2,700	80% of 2,700	80% of 2,700
	Mobile Crisis Response Team Diversions from a higher level of care ^{4,9}	87% of 5,034	80% of 4,000	80% of 4,000	80% of 4,200	80% of 4,200
	Community members receiving suicide prevention training ^{5,9}	21,617	35,000	35,000	35,000	35,000
	PERT Interventions not resulting in hospitalization or incarceration ^{6,9}	66% of 9,104	50% of 12,000	50% of 12,000	50% of 12,000	50% of 12,000
	Access and Crisis Line answered within an average of 60 seconds ⁹	93% of 67,410	95% of 63,000	95% of 63,000	95% of 72,000	95% of 72,000
	Edgemoor CMS Rating System	5	5	5	5	5
	Individuals with an outpatient SUD appointment within 10 days per TNAA metric ^{7,9}	85% of 8,300	85% of 8,300	85% of 8,300	N/A	N/A
	Justice referred clients transferred to another level of care within 30 days of SUD discharge ⁹	50% of 2,200	50% of 2,200	50% of 2,200	50% of 2,200	50% of 2,200
	PC initial assessments completed within 10 days ⁹	97% of 450	95% of 450	95% of 450	95% of 450	95% of 450
	Operationalize CARE Act and establish performance measures ⁸	N/A	Yes/No	Yes	N/A	N/A
	Timely CARE Investigative Reports ⁸	N/A	N/A	N/A	90% of 200	90% of 200

Table Notes

- ¹ In Fiscal Year 2022–23 and Fiscal Year 2023–24, SDCPH patients not readmitted was lower due to an increase in daily inpatient census and length of stay.
- ² In Fiscal Year 2022–23, the baseline target was exceeded due to the ending of COVID-19 restrictions, which provided increased services to FSP/ACT participants.
- ³ In Fiscal Year 2022–23, individuals admitted into a crisis residential program was lower than expected due to flooding and fire at facilities, which limited beds and programs.
- ⁴ In Fiscal Year 2022–23, the number of individuals diverted from a higher level of crisis intervention exceeded initial projections due to enhanced outreach and public messaging, increased community awareness of the program, and the addition of new Mobile Crisis Response Teams during the year.
- ⁵ In Fiscal Year 2022–23, the number of participants for Suicide Prevention Training was lower than expected due to new contractor onboarding, which required new MOUs with all school districts.
- ⁶ In Fiscal Year 2022–23, the number of individuals diverted from a higher level of crisis intervention exceeded initial projections as a result of the clinician’s ability to successfully assess and connect people to behavioral health resources as appropriate.
- ⁷ In Fiscal Year 2024–25, this performance measure will be discontinued due to the transition of new statewide electronic health record.
- ⁸ In Fiscal Year 2023–24, this performance measure to operationalize the CARE act added to demonstrate implementation efforts. In Fiscal Year 2024–25, this performance measure was converted to Timely CARE Investigative Reports.
- ⁹ Updated data for these performance measures will be provided in the Fiscal Year 2025–27 Recommended Op Plan due to data reporting timelines.



Budget Changes and Operational Impact: 2023–24 to 2024–25

Staffing

No overall change in staff years

- ◆ Increase of 1.00 staff year tied to the prior year’s transfer of the Public Conservator from Aging & Independence Services.
- ◆ Decrease of 1.00 staff year due to transfer to Administrative Support.

Expenditures

Net increase of \$135.6 million

- ◆ Salaries & Benefits—net increase of \$16.3 million due to negotiated labor agreements.
- ◆ Services & Supplies—net increase of \$118.7 million.
 - ◆ Increase \$35.8 million tied to an intergovernmental transfer agreement (IGT) approved by the Board of Supervisors on October 24, 2023 (5) between the County and Revive Pathway, wholly owned by the Viejas Band of Kumeyaay Indians (Viejas), to provide a comprehensive array of community-based behavioral health services to vulnerable populations with complex mental health and substance use conditions.
 - ◆ Increase of \$25.0 million for public behavioral health workforce development with \$15.0 million funded through Mental Health Services act (MHSA) Innovation funds as approved by the Board of Supervisors on May 2, 2023 (5), and \$10.0 million funded from the Evergreen Component of the American Rescue Plan Act (ARPA) Framework as approved by the Board of Supervisors on February 27, 2024 (11).
 - ◆ Increase of \$18.6 million for Substance Use Disorder (SUD) Residential Services and Outpatient Treatment, with \$16.7 million directly the result of rate increases to SUD Residential Service contracts associated with payment reform as a part of Medi-Cal Transformation (formerly CalAIM).
 - ◆ Increase of \$15.0 million for the implementation of Involuntary Behavioral Health Treatment under Senate Bill 43 that will include items such as support of expanded services and supportive infrastructure in hospital and community-based settings primarily as a bridge to more sustainable funding, Public Conservator infrastructure, Crisis Stabilization Unit capacity, training and education capacity, and support substance use disorder (SUD) services capacity including a harm reduction model. Investments will be funded by the Evergreen Component of the American Rescue Plan Act (ARPA) Framework as approved by the Board of Supervisors on February 27, 2024 (11).
- ◆ Increase of \$10.6 million for Mental Health Inpatient services due to operating costs for the Tri-City Medical Center Psychiatric Health Facility anticipated to be operational on July 1, 2024, and for rate increase for acute inpatient psychiatric beds.
- ◆ Increase of \$10.0 million for Opioid Treatment Program (OTP) rate increases associated with payment reform to provide a full continuum of care from detox and residential rehab to outpatient treatment.
- ◆ Increase of \$4.4 million for the Augmented Services Program (ASP) to enhance and improve client functioning through augmentation of basic Board and Care (B&C) services by adding more capacity using Behavioral Health Bridge Housing funding and increasing rates for existing contracts.
- ◆ Increase of \$4.4 million for the Youth Suicide Prevention Program to perform activities related to the prevention of suicides and suicide attempts among youth 25 years of age and under.
- ◆ Increase of \$3.7 million for behavioral health support services, mental health treatment services and other support services.
- ◆ Increase of \$3.1 million for behavioral health supportive services to be provided at housing sites funded through the State’s Project Homekey program which expands permanent supportive housing options for persons experiencing or at risk of homelessness.
- ◆ Increase of \$2.6 million for children & youth outpatient services, including foster family agency stabilization and treatment, intensive outpatient program and partial hospitalization program.
- ◆ Increase of \$2.4 million for MHSA prevention programs.
- ◆ Increase of \$2.0 million for implementing SchoolLink software.
- ◆ Increase of \$1.6 million for subacute beds to support enhance care pathways across the Behavioral Health Continuum of Care.
- ◆ Increase of \$0.8 million for Opioid Settlement Framework efforts to include overdose prevention, primary prevention, emergency department relay, and emergency room drug checking program.
- ◆ Increase of \$0.2 million associated with the increase the food services in SDCPH.
- ◆ Decrease of \$9.9 million in appropriations for the Psychiatric Emergency Response Team (PERT), Long Term Care Institutions (LTC) for Institutional Mental Disease (IMD) and Skilled Nursing Facility (SNF) services. The reduction in appropriations aligns with actual spending and does not result in any impact in any service delivery to the community.
- ◆ Decrease of \$9.1 million for prior year one-time IT project costs.





- ◆ Decrease of \$2.5 million in early intervention program Screening to Care to align ARPA funds to projected spending.
- ◆ Other Charges—increase of \$0.5 million to help address imminent needs for clients receiving services through County mental health clinics for adult case management services in Mental Health treatment services due to program expansion.
- ◆ Expenditure Transfer & Reimbursements—decrease of \$0.1 million associated with increased justice related costs funded through a Memorandum of Understanding (MOU) with the Public Safety Group. Since this is a reimbursement, it has the effect of \$0.1 million increase in appropriations.

- ◆ Net increase of 8.1 million in other State aid primarily associated with one-time grant funding including the Behavioral Health Bridge Housing and Youth Suicide Prevention grants.
- ◆ Net decrease of \$13.3 million in Realignment revenue tied to a base adjustment to align with available receipts and adjustments for prior year costs, offset by available one-time Realignment revenues.
- ◆ Decrease of \$2.5 million in ARPA revenue to align to costs.
- ◆ Charges for Current Services—net increase of \$6.1 million primarily due to the transfer of Intergovernmental Transfer (IGT) funding from Medical Care Services.
- ◆ Miscellaneous Revenues—increase of \$1.4 million in Miscellaneous Revenues associated with increases to support the Opioid Settlement Framework.
- ◆ Other Financing Sources—increase of \$10.0 million in Tobacco Securitization fund to help offset the impacts of slowing Realignment revenue based on projected sales tax receipts. The additional funds will be used to support substance use disorder programs previously funded by Realignment revenue including recovery residences and peer support services.
- ◆ Fund Balance Component Decreases—increase of \$25.0 million associated with increases to support the SB 43 and Behavioral Health Workforce, approved by the Board of Supervisors on February 27, 2024.
- ◆ General Purpose Revenue Allocation—net decrease of \$1.5 million reallocated to other departments within HHSA as part of an overall budget shortfall mitigation strategy to budget available one-time realignment revenue in areas with eligible costs and shift GPR among departments as needed.

Revenues

Net increase of \$135.6 million

- ◆ Intergovernmental Revenue—increase of \$94.6 million.
 - ◆ Net increase of \$110.4 million in federal and State mental health services funding driven by increased mental health services and payment reform.
 - ◆ Increase of \$35.8 million in Drug Medi-Cal revenue associated with the IGT between the County and Revive Pathway approved on October 24, 2023.
 - ◆ Increase of \$26.0 million in Drug Medi-Cal revenue mainly due to Substance Use Disorder Residential and Opioid Treatment program rate increases.
 - ◆ Increase of \$24.7 million in Mental Health Services Act revenue to support the Behavioral Health Workforce, Prevention, School Link, ASP rate increase and other Mental Health programs mentioned above.
 - ◆ Increase of 15.8 million in Short Doyle Medi-Cal revenue to align with projected billable units of service including funding for services that will be provided at the new Tri-City Medical Center Psychiatric Health Facility, increased costs for children and youth outpatient services, and other eligible mental health services and operating costs.

Budget Changes and Operational Impact: 2024–25 to 2025–26

No significant changes other than projected completion of various projects supported with one-time funds.



Staffing by Program						
		Fiscal Year 2023-24 Adopted Budget			Fiscal Year 2024-25 Adopted Budget	Fiscal Year 2025-26 Approved Budget
Alcohol and Other Drug Services		34.00			32.00	32.00
Mental Health Services		321.50			322.50	322.50
Inpatient Health Services		618.00			618.00	618.00
Behavioral Health Svcs Administration		359.00			360.00	360.00
Total		1,332.50			1,332.50	1,332.50

Budget by Program						
	Fiscal Year 2022-23 Actuals	Fiscal Year 2023-24 Adopted Budget	Fiscal Year 2023-24 Amended Budget	Fiscal Year 2023-24 Actuals	Fiscal Year 2024-25 Adopted Budget	Fiscal Year 2025-26 Approved Budget
Alcohol and Other Drug Services	\$ 174,502,533	\$ 196,781,682	\$ 212,428,709	\$ 205,730,082	\$ 257,977,608	\$ 258,200,925
Mental Health Services	516,937,875	637,324,889	655,294,184	581,900,933	670,961,079	660,442,557
Inpatient Health Services	117,439,504	125,712,970	129,625,880	126,848,384	125,276,137	128,259,903
Behavioral Health Svcs Administration	45,689,746	61,246,170	90,271,697	88,942,477	102,414,037	78,420,186
Total	\$ 854,569,658	\$ 1,021,065,711	\$ 1,087,620,470	\$ 1,003,421,875	\$ 1,156,628,861	\$ 1,125,323,571

Budget by Categories of Expenditures						
	Fiscal Year 2022-23 Actuals	Fiscal Year 2023-24 Adopted Budget	Fiscal Year 2023-24 Amended Budget	Fiscal Year 2023-24 Actuals	Fiscal Year 2024-25 Adopted Budget	Fiscal Year 2025-26 Approved Budget
Salaries & Benefits	\$ 154,915,760	\$ 191,585,874	\$ 190,885,874	\$ 183,415,180	\$ 207,809,190	\$ 216,471,670
Services & Supplies	712,330,662	845,136,711	872,544,905	807,289,224	963,868,876	923,901,106
Other Charges	19,224	230,000	230,000	190,064	738,000	738,000
Capital Assets Equipment	113,582	186,500	575,500	14,612	186,500	186,500
Expenditure Transfer & Reimbursements	(13,102,005)	(16,073,374)	(16,073,374)	(14,656,454)	(15,973,705)	(15,973,705)
Fund Balance Component Increases	—	—	25,000,000	25,000,000	—	—
Operating Transfers Out	292,436	—	14,457,564	2,169,250	—	—
Total	\$ 854,569,658	\$ 1,021,065,711	\$ 1,087,620,470	\$ 1,003,421,875	\$ 1,156,628,861	\$ 1,125,323,571





Budget by Categories of Revenues						
	Fiscal Year 2022-23 Actuals	Fiscal Year 2023-24 Adopted Budget	Fiscal Year 2023-24 Amended Budget	Fiscal Year 2023-24 Actuals	Fiscal Year 2024-25 Adopted Budget	Fiscal Year 2025-26 Approved Budget
Revenue From Use of Money & Property	\$ 165,661	\$ —	\$ —	\$ 64,543	\$ —	\$ —
Intergovernmental Revenues	745,311,673	878,449,085	880,516,301	894,638,898	973,047,535	956,431,105
Charges For Current Services	64,356,297	67,600,680	67,600,680	57,532,923	73,688,934	66,941,642
Miscellaneous Revenues	3,095,813	31,482,785	40,639,597	3,266,409	32,913,926	32,661,618
Other Financing Sources	10,921,849	9,400,000	10,478,740	10,478,940	19,400,000	19,400,000
Fund Balance Component Decreases	—	—	—	—	25,000,000	—
Use of Fund Balance	(13,011,634)	—	54,251,991	3,307,002	—	22,876,172
General Purpose Revenue Allocation	43,729,998	34,133,161	34,133,161	34,133,161	32,578,466	27,013,034
Total	\$ 854,569,658	\$ 1,021,065,711	\$ 1,087,620,470	\$ 1,003,421,875	\$ 1,156,628,861	\$ 1,125,323,571



Child and Family Well-Being

Mission Statement

To make people’s lives healthier, safer and self-sufficient by delivering essential services in San Diego County.

Department Description

Child and Family Well-Being (CFWB) department integrates First 5 San Diego, Child Welfare Services, childcare system, and child and family serving programs under one umbrella to deliver both prevention and protection services. Within CFWB are two offices to provide the following services with a holistic approach to engaging the community.



- ◆ **Office of Child Safety**—includes services offered by the previous Child Welfare Services, such as identification, intervention, and treatment of child abuse and neglect.
- ◆ **A.B. and Jessie Polinsky Children’s Center**—provides 24-hour temporary emergency shelter care to an average of 64 children each month for children, birth to 17 years of age, who are separated from their families for their own safety or when parents cannot provide care.
- ◆ **Child Abuse and Neglect Hotline**—receives and responds to 38,754 reports from the community about the safety and wellbeing of children, 24 hours a day, seven days a week, representing 67,694 children.
- ◆ **Core Operations**—ensures the safety and well-being of children by assessing and investigating allegations of abuse or neglect, assisting families with developing plans to maintain children at home safely, and placing children in protective custody when they are unable to remain in their home safely. Social workers work closely with the courts and legal partners to support a Kin-First Culture to provide services to reunify families, ensuring the child’s well-being and safety are at the forefront.
- ◆ **Extended Foster Care (EFC)**—provides continued foster care benefits and services to an average of 243 youth at any point in time, who are 18 to 21 years of age to help support the youth’s transition toward adult independence.
- ◆ **Foster and Adoptive Resource Family Services (FARFS)**—provides support services to resource families (a relative, a close family friend, and foster families) and work with them for recruitment and retention.
- ◆ **Resource Family Approval (RFA)**—is a single unified, family-friendly, and child-centered process to temporarily care for and/or adopt a child/youth involved with foster care and/or probation.

- ◆ **San Pasqual Academy (SPA)**—provides a multi-purpose continuum of care to meet the diverse needs of youth. This includes comprehensive resources to a monthly average of 48 foster youth ages 12 to 19 with a stable and caring home, quality individualized education, and the skills needed for independent living. As a first-in-the-nation residential education campus, San Pasqual Academy provides strong linkages to permanent connections, transitional housing, and post-emancipation services. San Pasqual Academy is a unique placement option for County of San Diego dependents, 12 to 17 years old, and non-minor dependents (NMDs) up to 19 years of age.
- ◆ **Office of Child and Family Strengthening**—includes prevention and early intervention services provided by the First 5 San Diego programs, childcare initiatives, and prevention efforts supported by the federal Family First Prevention Services Act (FFPSA) of 2018.
- ◆ **First 5 San Diego**—promotes the health and well-being of young children and pregnant individuals during the most critical years of development, from prenatal to five years of age.
- ◆ **Child Care System**—increases and strengthens childcare provider capacity and provides equitable access to the region’s quality of early childhood education and care.
- ◆ **Prevention and Preservation Services**—links families to prevention services so that all children are safe, all families are nurtured to build protective factors, and systems create equitable pathways to wellness.

To ensure these critical services are provided, CFWB has 1,672.00 staff years and a budget of \$479.0 million, which includes assistance payments.

2023–24 Accomplishments



Equity

- Health: Reduce disparities and disproportionality and ensure access for all through a fully optimized health and social service delivery system and upstream strategies.
 - Placed 44% (671 of 1,509) of foster care children with a relative or close non-family member to reduce disparity, support stability, and minimize trauma to children by maintaining connections to familiar environments and strengthening families.
 - Provided 59% (15,635 of 26,331) of First 5 children with Home Visiting and Quality Early Learning Education programs comprehensive developmental screenings before they entered school to help detect concerns at an early age when interventions are most effective and less expensive. The number of children reported to have received a comprehensive developmental screening (ASQ-3) appears lower than the target due to administrative changes resulting in data limitations. The actual number of screenings conducted may be higher.



Sustainability

- Economy: Align the County’s available resources with services to maintain fiscal stability and ensure long-term solvency.
 - Communicated with employees regarding sustainability program updates, successes, and opportunities for improvement once a quarter through various two-way communication methods, including video content, leadership and executive meetings, digital newsletters, and the use of sustainability ambassadors.
 - Long Term: Completed the transition of all CFWB remaining documents to the Electronic Records Management System (ERMS), ensuring electronic use for reviewing, editing, scanning, and sending files and eliminating the need for paper files.
- Climate: Actively combat climate change through innovative or proven policies, green jobs, sustainable facility construction or maintenance and hazard mitigation.
 - Continued implementing remote and hybrid work environments to reduce vehicle emissions and departmental footprint by conducting an office space assessment to develop a robust, inclusive teleworking policy incorporating teleworking hubs, smart conference rooms, and laptops with remote connectivity and technical connectivity support.
 - Mid-Term: Supported efforts to increase sustainability within all CFWB contracts by promoting and encouraging CFWB contractors to provide fiscally, culturally, and environmentally sustainable services and resources for children and families.

- Resiliency: Ensure the capability to respond and recover to immediate needs for individuals, families, and the region.
 - Completed 70% (45,448 of 65,350) of calls to the Child Abuse Hotline and ensured timely assessments and response determination to meet families’ needs to strengthen and improve capacities to protect their children.



Community

- Engagement: Inspire civic engagement by providing information, programs, public forums or other avenues that increase access for individuals or communities to use their voice, their vote, and their experience to impact change.
 - Ensured 1,720 resource families were ready and available to receive placement of foster children to minimize trauma and support child safety, permanency, and well-being.
- Quality of Life: Provide programs and services that enhance the community through increasing the well-being of our residents and our environments.
 - Ensured 92% (265 of 287) of children who return home or enter legal guardianship do not reenter foster care within 12 months of going home through family strengthening and child abuse prevention efforts.
 - Ensured 30.5% (178 of 583) of children removed from the home due to safety concerns with parent(s), achieved permanency within 12 months to support family strengthening, and maintained the federal standard of 35.2%.
 - Maintained 4.7 moves (or less) per 1,000 days for all foster children in care. Fewer placements minimize the trauma children experience and may help lessen the negative impact on their school performance.
 - Provided 100% (6,289) of First 5 parents’ or caregivers’ educational services to increase their knowledge and capacity to help their children enter school as active learners through Healthy Development Services (HDS) Home Visiting and Quality Early Learning Education programs.
 - Ensured that 100% of eligible residents at San Pasqual Academy received Independent Living Skills services to expand economic opportunities.



Empower

- Workforce: Invest in our workforce and operations by providing support services and excellent customer service to ensure continuity of operations remains at its best.
 - Achieved organizational excellence by ensuring a workplace of belonging and inclusion for all County employees as they delivered the County’s services to the public. Using information provided in the 2022 biennial employee engagement survey, worked with employees and collaborated with the employee representative groups to develop





action plans that will further improve engagement in the department and continue to foster and develop an engaged and empowered workforce.

Justice

- Restorative: Contribute to a system of restorative justice that strives to repair harm to victims and to the community at large, as well as provide inclusive opportunities for justice-involved individuals to contribute to the region.
 - Screened 74% (591 of 802) of children ages 0 to 17 who were removed from their home and entered the foster care system under the supervision of the Juvenile Court for mental health needs following the California State standards to support enhanced mental health services delivery for children and youth in and out of home care. These efforts will ensure that children have access to trauma-informed mental health services. In Fiscal Year 2023-24, the number of children who were screened for mental health needs was not met due to challenges with data management and recruitment.

2024–26 Objectives

Equity

- Health: Reduce disparities and disproportionality and ensure access for all through a fully optimized health and social service delivery system and upstream strategies.
 - Place 35% (535 of 1,500) of foster care children with a relative or close non-family member to reduce disparity, support stability, and minimize trauma to children by maintaining connections to familiar environments and strengthening families, exceeding the statewide performance of 36%.
 - Provide 82% (14,000 of 17,000) of First 5 children in Home Visiting and Quality Early Learning Education programs comprehensive developmental screenings before they enter school to help detect concerns at an early age when interventions are most effective and less expensive.

Sustainability

- Economy: Align the County's available resources with services to maintain fiscal stability and ensure long-term solvency.
 - Communicate with employees quarterly regarding sustainability program updates, successes, and opportunities for improvement through various two-way communication methods, including video content, leadership and executive meetings, digital newsletters, and sustainability ambassadors.

- Long-Term: Complete the transition of all CFWB case files to the Electronic Records Management System (ERMS), ensuring electronic use for reviewing, editing, scanning, and sending files and eliminating the need for paper files.
- Climate: Actively combat climate change through innovative or proven policies, green jobs, sustainable facility construction or maintenance and hazard mitigation.
 - Continue implementing remote and hybrid work environments to reduce vehicle emissions and departmental footprint by conducting an office space assessment to develop a robust, inclusive teleworking policy incorporating teleworking hubs, smart conference rooms, and laptops with remote connectivity and technical connectivity support.
 - Mid-Term: Support efforts to increase sustainability within all CFWB contracts by promoting and encouraging CFWB contractors to provide fiscally, culturally, and environmentally sustainable services and resources for children and families.



Community

- Engagement: Inspire civic engagement by providing information, programs, public forums or other avenues that increase access for individuals or communities to use their voice, their vote, and their experience to impact change.
 - Ensure 1,820 (from 1,720) resource families are ready and available to receive placement of foster children to minimize trauma and support child safety, permanency, and well-being.
- Quality of Life: Provide programs and services that enhance the community through increasing the well-being of our residents and our environments.
 - Ensure 94% (353 of 375) of children who return home or enter legal guardianship do not reenter foster care within 12 months of going home through family strengthening and child abuse prevention efforts.
 - Maintain 4.48 moves (or less) per 1,000 days for all foster children in care, meeting the federal standard for the rate of placement moves. Fewer placements minimize the trauma children experience and may help lessen the negative impact on their school performance.
 - Provide 92% (6,000 of 6,500) of First 5 parents' or caregivers' educational services to increase their knowledge and capacity to help their children enter school as active learners through Healthy Development Services (HDS) Home Visiting and Quality Early Learning Education programs.



Empower

- Workforce: Invest in our workforce and operations by providing support services and excellent customer service to ensure continuity of operations remains at its best.

- Improve employee engagement by increasing opportunities for staff to safely provide input/feedback regarding CFWB and developing a concrete communication loopback regarding their feedback. This will be completed through a Survey Monkey to receive feedback from staff anonymously and developing a tracking system to ensure all Survey Monkey feedback has been followed-up. In addition, staff will be provided training to make productive suggestions and supervisors and managers to address suggestions constructively.

- Ensure 35.2% (299 of 850) of children who are removed from the home due to safety concerns with parent(s), achieve permanency within 12 months to support family strengthening, and maintain the federal standard of 35.2%.

 **Justice**

- Safety: Ensure a fair and equitable justice system in the defense and prosecution of crimes, investigations of abuse and neglect, and support and services for victims.

Related Links

For additional information on the programs offered by the Health and Human Services Agency, go to:

◆ www.SanDiegoCounty.gov/HHSA

For additional information about *Live Well San Diego*, go to:

◆ www.LiveWellSD.org

For information about becoming a resource family, go to:

◆ www.sdcares4kids.com





Performance Measures		2022-23 Actuals	2023-24 Adopted	2023-24 Actuals	2024-25 Adopted	2025-26 Approved
	Foster care child placed with relative or close non-family member ¹	54% of 1,489	50% of 1,500	44% of 1,509	35% of 1,500	35% of 1,500
	First 5 Developmental Screenings ²	N/A	82% of 17,000	59% of 26,331	82% of 17,000	82% of 17,000
	Completed calls to the Child Abuse Hotline ³	63% of 72,382	82% of 65,000	70% of 65,350	N/A	N/A
	Resource Families ready and available to receive placement of foster children	1,771	1,900	1,720	1,820	1,900
	Children who do not reenter foster care within 12 months of going home ⁴	91% of 251	94% of 375	92% of 227	94% of 375	94% of 375
	Placement moves per 1,000 days for all children in Foster Care ⁵	4.4	4.48	4.7	4.48	4.48
	Educational services to First 5 parents or caregivers	N/A	92% of 6,500	100% of 6,289	92% of 6,500	92% of 6,500
	Children removed from home who are screened for mental health needs ⁶	69% of 851	100% of 1,200	74% of 802	N/A	N/A
	Children achieving permanency within 12 months ⁷	29% of 893	35.2% of 1,080	30.5% of 583	35.2% of 850	35.2% of 850

Table Notes

¹ In Fiscal Year 2023-24, children placed with relative or close non-family member exceeded the recommended estimates of 35%. This is expected to continue.

² Effective Fiscal Year 2023–24, multiple child and family serving systems, including Child Welfare Services and First 5 San Diego were transferred to the Child and Family Well Being department, under one umbrella to deliver both prevention and protection service. The number of children reported to have received a comprehensive developmental screening (ASQ-3) appears lower than the target due to administrative changes resulting in data limitations. The actual number of screenings conducted may be higher.

³ This performance measure tracks completed calls to the Child Abuse Hotline. In Fiscal Year 2023-24, this target was not met due to staffing shortages and a high volume of calls. Despite this, the number of child abuse or neglect referrals was not affected as the hotline now offers the Mandated Reporter Application (MRA), allowing mandated reporters to submit reports online for non-emergency situations. In Fiscal Year 2024–25, this performance measure will be retired as the department moves towards an outcome-oriented approach.

⁴ In Fiscal Year 2023-24, children in foster care were lower than expected due to existing family strengthening efforts.





⁴ In Fiscal Year 2023-24, the number of children who were screened for mental health needs was not met due to challenges with data management, and recruitment. This performance measure will be retired in Fiscal Year 2024-25 as the department moves towards an outcome-oriented approach.

⁴ In Fiscal Year 2023-24, the target for children achieving permanency within 12 months was lower than expected due to staff turnover resulting in limited and inconsistent family finding efforts.

⁵ In Fiscal Year 2023-24, although CFWB had fewer youth in care than in previous years, there were a higher proportion of youth with complex needs requiring support. These youth more often need multiple placement changes, resulting in a slightly higher ratio of placement moves per 1,000 days than anticipated.

⁶ In Fiscal Year 2023-24, the number of children who were screened for mental health needs was not met due to challenges with data management and recruitment. This performance measure will be retired in Fiscal Year 2024-25 as the department moves towards an outcome-oriented approach.

⁷ In Fiscal Year 2023-24, the target for children achieving permanency within 12 months was lower than expected due to staff turnover resulting in limited and inconsistent family finding efforts. In Fiscal Year 2024-25, this was moved from the Community Initiative to the Justice Initiative to demonstrate efforts towards fair and equitable systems

Budget Changes and Operational Impact: 2023-24 to 2024-25

Staffing

Increase of 2.00 staff years

- ◆ Increase of 2.00 staff years due to a transfer from Homeless Solutions & Equitable Communities to support operational needs.
- ◆ Additionally, staff were transferred among related programs within Child and Family Well-Being to support operational needs.

Expenditures

Net increase of \$22.2 million

- ◆ Salaries & Benefits—increase of \$22.7 million due to negotiated labor agreements, the addition of 2.00 staff years referenced above, and a reduction in salary adjustments for projected savings for staffing vacancies due to implementation of targeted recruitment strategies.
- ◆ Services & Supplies—net increase of \$3.1 million.
 - ◆ Increase of \$2.3 million for the Transitional Housing Program Plus for housing navigator and other enhanced services and to support increases in housing rates.
 - ◆ Increase of \$2.1 million to align with increased facilities costs including rents and leases, security, and utilities.
 - ◆ Increase of \$1.9 million for the American Rescue Plan Act (ARPA) Community-Based Child Abuse Prevention (CBCAP), which funds direct prevention services and planning activities.
 - ◆ Increase of \$0.2 million in one-time costs for the development of a Community Response Guide to help communities collaboratively develop accurate, equitable child protection reporting practices tailored to their needs.

- ◆ Decrease of \$1.7 million associated with adjusting one-time ARPA funding for Career Pathways for Foster Youth. Funds carried over from the prior year will be available to continue to spend in the budget year.
- ◆ Decrease of \$1.7 million associated with operational savings tied to restructuring trainings and administrative support, transitioning desk phones to TEAMS phones, and aligning appropriations to spending trends.
- ◆ Other Charges—net increase of \$0.7 million.
 - ◆ Increase of \$1.3 million in Adoptions benefit payments to align with caseloads trends and increased grant amount.
 - ◆ Increase of \$1.2 million in Maintenance of Wards payments to align with an increase in urgent needs and complex care services for children and nonminor dependents in foster care.
 - ◆ Net decrease of \$1.8 million in Foster Care benefit payments to align with caseloads trends.
- ◆ Expenditure Transfer & Reimbursement—net increase of \$4.3 million associated with the centralized General Fund funding supported by resources in Countywide Finance Other. Since this is a transfer of expenditures, it has a net effect of a \$4.3 million decrease in appropriations.
 - ◆ Net increase of \$4.6 million to support the transition of the San Pasqual Academy to a continuum of care multipurpose campus.
 - ◆ Decrease of \$0.3 million associated with prior one-time negotiated labor agreements.

Revenues

Net increase of \$22.2 million

- ◆ Intergovernmental Revenue—net increase of \$4.8 million.
 - ◆ Net increase of \$9.0 million in available one-time Realignment revenues to support loss of Realignment tied to base adjustment to align with available receipts, increased Salaries & Benefits, and increased caseload growth and operating costs noted above.



CHILD AND FAMILY WELL-BEING

- ❖ Net increase of \$2.8 million in social services administrative revenue allocations supporting increases in operating costs.
- ❖ Increase of \$2.3 million in Transitional Housing Program Plus funding as noted above.
- ❖ Increase of \$1.9 million for the American Rescue Plan Act (ARPA) Community-Based Child Abuse Prevention (CBCAP) funding as noted above.
- ❖ Net decrease of \$8.3 million primarily tied to the winding down of one-time funding for the Child Welfare Services (CWS) Basic Service Funding Certainty Grant that supports the availability of resources such as social workers, counselors, support programs, and facilities dedicated to safeguarding and promoting the well-being of children and families within the community.
- ❖ Decrease of \$1.7 million primarily tied to prior year one-time American Rescue Plan Act (ARPA) funding for Career Pathways for Foster Youth.
- ❖ Net decrease of \$1.2 million in federal and State revenue to align with projected assistance payments.
- ❖ General Purpose Revenue Allocation—net increase of \$17.4 million to partially offset Salaries & Benefits noted above.

Budget Changes and Operational Impact: 2024–25 to 2025–26

No significant changes.





Staffing by Program						
		Fiscal Year 2023-24 Adopted Budget			Fiscal Year 2024-25 Adopted Budget	Fiscal Year 2025-26 Approved Budget
Child Safety		1,504.00			1,504.00	1,504.00
CFWB Eligibility		63.00			64.00	64.00
Child & Family Strengthening		14.00			19.00	19.00
Adoptions		89.00			85.00	85.00
Total		1,670.00			1,672.00	1,672.00

Budget by Program						
	Fiscal Year 2022-23 Actuals	Fiscal Year 2023-24 Adopted Budget	Fiscal Year 2023-24 Amended Budget	Fiscal Year 2023-24 Actuals	Fiscal Year 2024-25 Adopted Budget	Fiscal Year 2025-26 Approved Budget
Child Safety	\$ 261,553,670	\$ 278,297,763	\$ 307,452,932	\$ 287,579,970	\$ 298,416,460	\$ 310,977,199
CFWB Eligibility	5,738,671	6,604,659	6,604,659	5,604,607	6,539,556	6,926,952
CFWB Assistance Payments	147,056,645	157,976,272	155,491,817	158,024,837	158,665,546	158,665,546
Child & Family Strengthening	—	2,518,618	2,518,618	3,080,749	3,385,670	3,516,925
Adoptions	11,294,244	11,461,182	11,480,901	11,792,497	12,003,418	12,519,598
Total	\$ 425,643,229	\$ 456,858,494	\$ 483,548,926	\$ 466,082,660	\$ 479,010,650	\$ 492,606,220

Budget by Categories of Expenditures						
	Fiscal Year 2022-23 Actuals	Fiscal Year 2023-24 Adopted Budget	Fiscal Year 2023-24 Amended Budget	Fiscal Year 2023-24 Actuals	Fiscal Year 2024-25 Adopted Budget	Fiscal Year 2025-26 Approved Budget
Salaries & Benefits	\$ 178,403,641	\$ 198,595,519	\$ 202,979,974	\$ 203,555,821	\$ 221,267,319	\$ 231,104,931
Services & Supplies	96,443,505	101,523,604	125,597,140	100,650,614	104,575,120	97,756,924
Other Charges	150,796,084	163,081,654	161,314,095	161,853,198	163,770,928	163,770,928
Capital Assets Equipment	—	—	—	23,026	—	—
Expenditure Transfer & Reimbursements	—	(6,342,283)	(6,342,283)	—	(10,602,717)	(26,563)
Total	\$ 425,643,229	\$ 456,858,494	\$ 483,548,926	\$ 466,082,660	\$ 479,010,650	\$ 492,606,220

Budget by Categories of Revenues						
	Fiscal Year 2022-23 Actuals	Fiscal Year 2023-24 Adopted Budget	Fiscal Year 2023-24 Amended Budget	Fiscal Year 2023-24 Actuals	Fiscal Year 2024-25 Adopted Budget	Fiscal Year 2025-26 Approved Budget
Revenue From Use of Money & Property	\$ 342,745	\$ 681,211	\$ 681,211	\$ 376,198	\$ 681,211	\$ 681,211
Intergovernmental Revenues	411,100,536	430,650,445	452,110,445	436,090,808	435,381,853	408,163,958
Charges For Current Services	974,720	3,961,444	3,961,444	3,870,304	3,961,444	3,961,444
Miscellaneous Revenues	57,958	187,510	187,510	62,242	187,510	187,510
Use of Fund Balance	101,642	—	5,230,432	4,305,223	—	28,561,199
General Purpose Revenue Allocation	13,065,629	21,377,884	21,377,884	21,377,884	38,798,632	51,050,898
Total	\$ 425,643,229	\$ 456,858,494	\$ 483,548,926	\$ 466,082,660	\$ 479,010,650	\$ 492,606,220



County Successor Agency

Mission Statement

Expediently wind down the affairs of the former County Redevelopment Agency, maintaining compliance with all laws.

Department Description

The County of San Diego Redevelopment Agency included two project areas, the Upper San Diego River Improvement Project (USD RIP) Area and the Gillespie Field Project Area, which promoted private sector investment and development. The USD RIP Area is a redevelopment project covering approximately 532 acres located along both sides of the San Diego River and along Highway 67 in the unincorporated community of Lakeside. USD RIP goals included recreational and environmental protection and improvements. The Gillespie Field Redevelopment Project Area is approximately 746 acres located at Gillespie Field Airport in the City of El Cajon, adjacent to the unincorporated area.

Effective February 1, 2012, all redevelopment agencies in the State of California were dissolved by Assembly Bill (AB) X1 26, Community Redevelopment (RDA) Dissolution and subsequent court decision. AB 1484 was passed in June 2012 and made substantial changes to the dissolution process. Successor agencies and oversight boards were authorized to manage assets, repay debts, and fulfill other redevelopment agency obligations to expediently wind down former redevelopment agencies and return funding to affected taxing entities. Successor housing agencies were created and authorized to assume the transfer of housing assets and programs.

The County of San Diego was designated as a Successor Agency and Housing Successor. All assets, liabilities and obligations of the former Redevelopment Agency were transferred to the County of San Diego as Successor Agency on February 1, 2012. Appropriations for the Housing Successor are included in Housing & Community Development Services. All activities of the Successor Agency, including budgetary authority, are subject to approval by an Oversight Board.

Under Health & Safety Code (HSC) Section 34179, one consolidated seven-member successor agency oversight board became effective on July 1, 2018, to perform the functions of all other existing San Diego County area oversight boards. The County of San Diego acts as the administrator of the consolidated oversight board. HSC Section 34179 permits the County to recover startup and administrative costs from the Redevelopment Property Tax Trust Fund.



To ensure these required services are provided, the County Successor Agency has a budget of \$8.1 million.

2023–24 Accomplishments

Sustainability

- Economy: Align the County’s available resources with services to maintain fiscal stability and ensure long-term solvency
 - Continued to expediently wind down the affairs of the former County Redevelopment Agency, maintaining compliance with all laws and with the approval of the Countywide Redevelopment Successor Agency Oversight Board.
 - Conducted five Countywide Redevelopment Successor Agency Oversight Board meetings for approval of agenda items requested by 17 San Diego County-area successor agencies, then submitted required materials to the California State Department of Finance in a timely fashion.

2024–26 Objectives

Sustainability

- Economy: Align the County’s available resources with services to maintain fiscal stability and ensure long-term solvency
 - Continue to expediently wind down the affairs of the former County Redevelopment Agency, maintaining compliance with all laws and with the approval of the Countywide Redevelopment Successor Agency Oversight Board.
 - Conduct Countywide Redevelopment Successor Agency Oversight Board meetings for approval of agenda items requested by 17 San Diego County-area successor agencies, and submit required materials to the California State Department of Finance in a timely fashion.

Related Links

For additional information about the County Successor Agency, refer to the website at:

- ◆ www.sandiegocounty.gov/content/sdc/community/sandiego-county-oversight-board.html

For additional information about Gillespie Field, refer to:

- ◆ www.sandiegocounty.gov/content/sdc/dpw/airports/gillespie.html

Budget Changes and Operational Impact: 2023–24 to 2024–25

Staffing

No staffing included in the Adopted Budget

Expenditures

Net increase of \$0.3 million

- ◆ Services & Supplies—no significant changes.

- ◆ Other Charges—net increase of \$0.1 million reflects principal payments for the coming year, including projected “turbo” payment for accelerated bond redemption.
- ◆ Operating Transfers Out—increase of \$0.2 million for operating transfers required to properly account for principal and interest payments in separate funds.

Revenues

Net increase of \$0.3 million

- ◆ Taxes Other Than Current Secured—increase of \$0.1 million for payment of enforceable obligations approved by California Department of Finance.
- ◆ Other Financing Sources—net increase of \$0.2 million for operating transfers to account for principal and interest payments in separate funds.

Budget Changes and Operational Impact: 2024–25 to 2025–26

No significant changes.





Budget by Program						
	Fiscal Year 2022-23 Actuals	Fiscal Year 2023-24 Adopted Budget	Fiscal Year 2023-24 Amended Budget	Fiscal Year 2023-24 Actuals	Fiscal Year 2024-25 Adopted Budget	Fiscal Year 2025-26 Approved Budget
County Successor Agency	\$ 7,380,635	\$ 7,765,176	\$ 7,765,176	\$ 7,628,847	\$ 8,063,416	\$ 8,063,416
Total	\$ 7,380,635	\$ 7,765,176	\$ 7,765,176	\$ 7,628,847	\$ 8,063,416	\$ 8,063,416

Budget by Categories of Expenditures						
	Fiscal Year 2022-23 Actuals	Fiscal Year 2023-24 Adopted Budget	Fiscal Year 2023-24 Amended Budget	Fiscal Year 2023-24 Actuals	Fiscal Year 2024-25 Adopted Budget	Fiscal Year 2025-26 Approved Budget
Services & Supplies	\$ 5,366	\$ 20,000	\$ 20,000	\$ 3,591	\$ 20,000	\$ 20,000
Other Charges	2,288,242	2,312,230	2,312,230	2,295,842	2,386,790	2,386,790
Operating Transfers Out	5,087,028	5,432,946	5,432,946	5,329,414	5,656,626	5,656,626
Total	\$ 7,380,635	\$ 7,765,176	\$ 7,765,176	\$ 7,628,847	\$ 8,063,416	\$ 8,063,416

Budget by Categories of Revenues						
	Fiscal Year 2022-23 Actuals	Fiscal Year 2023-24 Adopted Budget	Fiscal Year 2023-24 Amended Budget	Fiscal Year 2023-24 Actuals	Fiscal Year 2024-25 Adopted Budget	Fiscal Year 2025-26 Approved Budget
Taxes Other Than Current Secured	\$ 2,267,864	\$ 2,332,230	\$ 2,332,230	\$ 2,375,407	\$ 2,406,790	\$ 2,406,790
Revenue From Use of Money & Property	59,983	—	—	97,331	—	—
Other Financing Sources	5,087,028	5,432,946	5,432,946	5,329,414	5,656,626	5,656,626
Use of Fund Balance	(34,240)	—	—	(173,305)	—	—
Total	\$ 7,380,635	\$ 7,765,176	\$ 7,765,176	\$ 7,628,847	\$ 8,063,416	\$ 8,063,416



Homeless Solutions and Equitable Communities

Mission Statement

To make people’s lives healthier, safer and self-sufficient by delivering essential services in San Diego County.

Department Description

The Department of Homeless Solutions and Equitable Communities (HSEC) advances the HHSA mission by providing resources and support to address the needs of people at risk of or experiencing homelessness, traditionally under-resourced and vulnerable groups, and immigrant and refugee communities. HSEC coordinates County efforts with external partners and promotes equity for all San Diegans. HSEC consists of three offices: the Office of Homeless Solutions, the Office of Equitable Communities, and the Office of Immigrant and Refugee Affairs. These Offices work together to ensure equitable access to vital resources across the County, such as health services, economic inclusion, poverty reduction, and community engagement. HSEC also leads homeless outreach in the unincorporated areas of the County and partners with all 18 jurisdictions to implement the County’s Framework for Ending Homelessness (Framework).



- ◆ **Office of Homeless Solutions (OHS)**—coordinates services, resources, and efforts in alignment with the Homelessness Solutions and Prevention Action Plan, which advances the Framework’s strategic vision to prevent at-risk individuals from becoming homeless and provide those experiencing homelessness access to more stable housing.
 - ◆ Collaborates with internal and external stakeholders on projects and agreements to expand compassionate emergency housing solutions and pathways to housing for people experiencing homelessness in the Unincorporated areas of the County.
 - ◆ Provides homeless outreach and case management services in partnership with cities, California Department of Transportation (Caltrans), and community providers by utilizing a tailored regional approach and completing 50,576 direct services outreach engagements countywide.
 - ◆ Manages existing programs supporting those at risk of or experiencing homelessness, including:
 - ◆ **Housing Our Youth**—connects transitional age youth with services, resources, and connects them to permanent housing.
 - ◆ **Domestic Violence Shelter-Based Programs**—provides 24-hour emergency shelter and services to survivors of domestic violence, and their children.

- ◆ **Coordinated Eviction Prevention System**—stabilizes housing for households at risk of eviction through tailored services.
- ◆ **Specialized Funding for Imminent Needs**—administers flexible funding support to remove barriers to permanent housing and housing stabilization for individuals and families.
- ◆ **Enhanced Affirming Services for People Identifying as LGBTQ+**—provides innovative and diverse housing and affirming supports and resources for people identifying as LGBTQ+.
- ◆ **Regional Homeless Assistance Program**—provides non-congregate emergency housing to unsheltered households in the Unincorporated areas of the County.
- ◆ **Safe Parking Program**—offers emergency safe sleeping options to people experiencing homelessness in their vehicles in Unincorporated areas of the County.
- ◆ Collaborates with other County departments to administer programs to vulnerable populations who are at risk of or experiencing homelessness, including:
 - ◆ **Community Care Coordination (C3)**—provides coordinated care to justice-involved individuals at risk of homelessness upon their release back into the community in partnership with the Public Safety Group.
 - ◆ **Housing Disability Advocacy Program**—provides individuals with disabilities with outreach, case management, time-limited housing subsidies, and benefits advocacy in partnership with Self-Sufficiency Services.
 - ◆ **Home Safe**—supports safety and housing stability for older adults and those with disabilities with case management, flexible funding, and housing support in partnership with Aging & Independence Services.
- ◆ Works with local jurisdictions and community organizations in various efforts to end and prevent homelessness, including:

- ◆ **Encampment Resolution Funding Program**—leverages funding to address specific encampments in partnership with Caltrans and the cities of Santee, National City, Chula Vista, and San Diego.
- ◆ **Capital Emergency Housing Solutions Grant Program**—expands emergency housing options across six (6) local jurisdictions by adding hundreds of shelter beds and parking spaces.
- ◆ **Leave No Veteran Homeless Initiative**—collaborates with community partners and the Veterans Administration on ensuring veteran homelessness is rare, brief, and nonrecurring—thereby achieving Functional Zero.
- ◆ **Office of Equitable Communities (OEqC)**—engages with each community to create positive change to strengthen equity, health, safety, economic inclusion, and access for all.
 - ◆ Strengthens existing relationships and builds new ones with community partners and community members to collectively address the needs of the regions.
 - ◆ Enhances and facilitates collaboration among community partners and members who comprise the Community Regional Leadership Teams to improve equity and access in the regions, and through these efforts, received the 2023 Communities of Excellence (COE) Silver Award, COE’s highest level of recognition, for the South Region’s Community Leadership Teams’ commitment to the pursuit of community performance excellence for the overall wellbeing of its residents.
 - ◆ Conducts over 60,000 direct encounters with residents countywide through collaborating with the community to address equity and access through community outreach efforts and assisting with health education and social services navigation with a focus on health and social equity, economic inclusion, and poverty reduction.
 - ◆ Leverages the County’s Community Health Workers throughout the region to serve as liaisons between health and social services and the community to facilitate access to services and improve the quality and cultural competence of service delivery.
 - ◆ Administers Community Action Partnership (CAP) programs to empower economically under-resourced communities to help residents thrive, including:
 - ◆ **Communities in Action**—supports individuals, families, and community well-being by providing stabilization services for crisis situations, navigation for income support, financial literacy, and more.
 - ◆ **Resident Leadership Academy**—provides education and development classes that empower community leaders to develop knowledge, tools, and strategies to make positive changes at the neighborhood level.
- ◆ **Connect 2 Careers**—provides job readiness training and paid externships for youth.
- ◆ **Earned Income Tax Credit Coordination Services**—offers tax filing assistance for low-income residents.
- ◆ **Keep Em’ Safe Program**—provides child passenger safety training and distribution of car seats.
- ◆ **Live Well Exchange and Work Readiness Exchange Program**—conducts targeted training for at-risk populations on conflict management and, collaborative communication.
- ◆ **Gang Prevention and Community Response Programs**—offer services to support youth at risk of gang involvement and address the negative impacts of gang activity on the vitality of low-income neighborhoods.
- ◆ **Office of Immigrant and Refugee Affairs (OIRA)**—fosters a welcoming community to all residents by serving as the regional expert and leader in immigrant and refugee affairs and as a hub for information, referrals, and resources.
 - ◆ Fosters existing relationships and forms strategic partnerships with stakeholders that are representative of the immigrant and refugee community to improve the coordination of programs and services.
 - ◆ Expands refugee support services through State grant funding by enhancing critical services, including:
 - ◆ **Emotional Wellness and Self-Care Education Program**—promotes emotional wellness and self-care education to prevent acute and chronic negative mental health outcomes.
 - ◆ **Landlord Education Program**—provides education to housing industry professionals to remove barriers to housing for immigrants and refugees.
 - ◆ **Older Refugees/Afghan Services to Older Adults**—links immigrants, refugees, and asylees, aged 60 or over, to social and health services.
 - ◆ **Refugee Employment Services**—Provides refugee employee services through the Work Readiness Exchange and the Vocational English-as-a-Second Language programs to help newly arriving families become self-sufficient.
 - ◆ Connects everyone, regardless of immigration status, to culturally and linguistically responsive programs and resources through the Immigrant and Refugee Welcome Center located at the South Regional Live Well Center in National City, which opened on March 1, 2023, and has made 2,823 encounters with individuals looking for support.
 - ◆ Established and operationalized a second Immigrant and Refugee Welcome Center at the North Inland Live Well Center in May 2024 and have assisted over 500 individuals since opening.





- ◆ Leverages one-time funding to provide support services such as childcare referrals and assistance, English language training, support with job search, and housing and utility assistance to individuals displaced due to the war in Ukraine.

To ensure HHS service regions and departments can provide critical and essential services, HSEC has 160.00 staff years and a budget of \$12.4 million.

2023–24 Accomplishments



Equity

- Health: Reduce disparities and disproportionality and ensure access for all through a fully optimized health and social service delivery system and upstream strategies.
 - Provided 62,264 residents outreach and education through various community engagement efforts on health and social services focused on creating positive change through equity, health, safety, economic inclusion, and access for all. This exceeds the initial target was exceeded by 56% (from 40,000 to 62,264).
 - Developed a strategy to resolve encampments in the San Diego Riverbed and the Plaza Bonita area in collaboration with the cities of San Diego, National City, Chula Vista, and Santee and the California Department of Transportation by leveraging \$22 million awarded by the State from the Encampment Resolution Funding program.
 - Implemented the Home Safe program in collaboration with Aging & Independence Services to assist older vulnerable individuals experiencing homelessness with access to more stable housing. Since the inception of the Home Safe program, over 145 participants have received assistance, the majority being homeless upon entry into the program.
 - Implemented the Pilot Shallow Rental Subsidy Program and identified 222 low-income rent-burdened seniors to receive a rental subsidy of \$500 per month for 18 months to support housing stability. The program will be expanded to 160 additional participants in 2024.
 - Launched the Rural Health Equity Initiative, providing service delivery expansion and outreach efforts by working with rural partners to host 28 events reaching 1,260 community members, including behavioral health-focused events, self-sufficiency resource events, collaboration with rural school districts to support student attendance, and resource sharing with tribal nations.
 - Facilitated access to services and improved the quality and cultural competence of HHS services by leveraging the Centers for Disease Control and Prevention Community Health Worker Building Capacities Grant to train 165 Community Health Workers to serve as liaisons between health and social services and the community.

- Economic Opportunity: Advance opportunities for economic growth and development to all individuals and the community.
 - Ensured 32.5% (286 of 880) of Refugee Employment Services (RES) participants were engaged in unsubsidized employment to support self-sufficiency, consistent with federal reporting requirements.
 - Successfully expanded existing immigrant and refugee programs by engaging community stakeholders in gathering feedback and ideas through listening sessions, workgroups, and ad-hoc meetings to develop focused priorities for the Office of Immigrant and Refugee Affairs Strategic Plan and annual report.
 - Supported over 80 job-seeking residents by hosting an Informational Hiring Fair to provide information on county jobs, the hiring process, and job readiness resources, followed by a County Job Fair at the Southeastern Live Well Center, attracting over 200 candidates, with 50 applicants receiving a same-day interview.
 - Provided four (4) 18-24 young adults from traditionally under-resourced families with paid internship opportunities at the newly opened Southeastern Live Well Center.
 - Implemented the Affordable Connectivity Program (ACP) in partnership with internet service providers to address the digital equity divide by hosting educational sessions and providing direct enrollment support to 205 community members.



Sustainability

- Economy: Align the County's available resources with services to maintain fiscal stability and ensure long-term solvency.
 - Provided over 2,823 individuals linkages to services and resources focused on economic inclusion and poverty reduction through the Immigrant and Refugee Welcome Center located at the South Region Live Well Center in National City in a culturally sensitive manner. This is a 370% increase from the initial target (from 600 to 2,823).
 - Provided 16,755 residents with direct and indirect stabilization services, including food, utilities, clothing, and financial literacy education through economic enhancement opportunities in low-income communities.
- Environment: Protect and promote our natural and agricultural resources, diverse habitats, and sensitive species.
 - Decreased overall paper consumption by implementing double-sided copying and printing of documents to ensure electronic use for reviewing, editing, scanning, and sending files, and to refrain from printing emails.
- Resiliency: Ensure the capability to respond and recover to immediate needs for individuals, families, and the region.
 - Ensured 72% (124 of 172) of households enrolled in the Coordinated Eviction Prevention System program avoided eviction and became stabilized in their housing.

- Supported 250 households on any given night in non-congregate emergency housing through the Regional Homeless Assistance Program, while they secured more permanent housing solutions, serving approximately 500 household members overall.
- Ensured 80% (286 of 358) of participants enrolled in the Housing Disability Advocacy Program (HDAP) were connected to temporary or permanent housing.



Community

- Engagement: Inspire civic engagement by providing information, programs, public forums, or other avenues that increase access for individuals or communities to use their voice, their vote, and their experience to impact change.
 - Ensured 86% (127 of 148) of Resident Leadership Academy participants graduated from the program by providing training and technical assistance to support community leaders in identifying and implementing community improvement projects that increase their neighborhoods’ health, safety, and well-being.
 - Informed nearly 3,600 individuals (exceeding the target by 44% from 2,500 to 3,597) providing regionally focused, cross-threaded information through community newsletters focused on engaging, strengthening, and invigorating communities, offering opportunities to grow, connect, and thrive.
 - Provided 2,031 grandparents and kinship caregivers access to valuable resources through the Grandparents Raising Grandchildren Initiative in partnership with eight (8) County departments and community organizations to conduct 31 countywide events, including three (3) educational and resource symposiums, an overnight camp retreat, six (6) Book Club meetups, and one (1) family enrichment day at the San Diego Zoo and Safari Parks.
 - Co-led Regional Community Leadership Teams (five (5) across the HHSA Regions) alongside community co-chairs and developed community enrichment plans to advance equity based on the unique priorities identified through monthly engagements with 275 community leaders and residents.
- Safety: Support safety for all communities, including protection from crime, availability of emergency medical services and fire response, community preparedness and regional readiness to respond to a disaster.
 - Ensured 97% (126 of 130) of veterans enrolled in the Community Care Coordination for Veterans program were immediately placed in a housing solution upon reentering the community from a County detention or reentry facility.
 - Coordinated countywide service delivery to ensure migrant and asylum seekers’ safety and protection in response to region-wide street releases of asylum seekers in Septem-

- ber 2023; HSEC mobilized outreach and assessment staff to help provide access to Wi-Fi and other essential items, facilitating onward movement to their destination.
- Quality of Life: Provide programs and services that enhance the community through increasing the well-being of our residents and our environments.
 - Ensured 65% (71 of 110) of participants up through the age of 24 who are experiencing or at risk of homelessness are temporarily or permanently housed through the Housing Our Youth program.
 - Completed over 50,000 engagements with individuals at risk of or experiencing homelessness (exceeding the target by 45% from 35,000 to 50,576) with outreach and case management to help them access services, and resources such as housing navigation to resolve their housing and other needs.
 - Successfully connected 7,395 individuals at risk of or experiencing homelessness to vital resources such as food, medical insurance, and cash benefits during countywide outreach events. These efforts focused on directly engaging with people in the field—on the streets and in encampments to expand the reach of public assistance, provide essential services, and improve the well-being of individuals, surpassing the initial target by 48% (originally set at 5,000 connections).
 - Ensured 49% (34 of 70) of participants enrolled in the Magnolia Safe Parking Program for at least 30 days successfully exited to a more stable housing option.
 - Provided over 235 households and 522 household members with financial support through the Specialized Funding for Imminent Need Program (SFIN), which helps pay for a wide range of critical direct and indirect expenses, such as security deposits, rental payments, auto-repairs, health-care expenses, and more to increase housing stability.
 - Hosted a grand opening ribbon-cutting event for the Southeastern Live Well Center in collaboration with the Department of General Services and County Communications, followed by a Community Open House for over 500 community members who received tours of this state-of-the-art welcoming facility committed to elevating the community’s voice, incorporating cultural community-chosen displays in the buildings’ design, offering dedicated workspaces for community organizations, and ensuring the delivery of culturally competent services to residents.
 - Awarded nearly \$500,000 in funding for the Local Immigrant, Integration, and Inclusion Grant from the California Governor’s Office of Business and Economic Development to establish and operationalize an Immigrant and Refugee Welcome Center at the North Inland Live Well Center as a hub for services, resources, and information for immigrants and refugees.





- Implemented a series of programs, including capacity building, innovative housing, and enhanced services that are affirming to people who identify with the LGBTQ+ community. Over 663 people have received training on better serving this population.
 - Launched the Building Partnership Program to increase emergency housing resources through public/private partnerships.
 - Housed over 877 veterans through the launch of the Leave No Veteran Homeless Initiative to work towards Functional Zero for veterans' homelessness, in partnership with the Regional Task Force on Homelessness, city jurisdictions, the Veterans Administration, and other community providers.
- Partnership: Facilitate meaningful conversations, shared programming, grant opportunities, or other opportunities to maximize resources through community partnerships to benefit the region.
 - Expanded emergency housing options across six (6) local jurisdictions through \$10 million from the Capital Grants Emergency Housing Solutions Grant Program, to fund nine (9) projects across the County to add 439 new shelter beds and 85 parking spaces.

- Refined baseline criteria and measures for direct outreach services through ongoing tracking of departmentwide metrics, dashboards, and regular reporting and evaluation for improvements.
- Led the HHSA Community Engagement Committee to enhance communication, share best practices, develop performance and reporting metrics, and identify opportunities for collaboration across eight (8) HHSA service departments.

2024–26 Objectives



Equity

- Health: Reduce disparities and disproportionality and ensure access for all through a fully optimized health and social service delivery system and upstream strategies.
 - Engage with over 60,000 residents countywide to provide outreach and education on health and social services through various community engagement efforts focused on creating positive change through equity, health, safety, economic inclusion, and access for all.
 - Connect 200 individuals previously residing in encampments along the unincorporated areas of the San Diego Riverbed and Plaza Bonita areas to temporary or permanent housing, and link them to resources and services, including case management, housing navigation, and housing subsidies through the California Encampment Resolution Funding Program.
 - Provide 382 low-income rent-burdened seniors with a rental subsidy of \$500 per month for 18 months through the Shallow Rental Subsidy Program to support their housing stability.
- Economic Opportunity: Advance opportunities for economic growth and development to all individuals and the community.
 - Ensure 55% (127 of 230) of Refugee Employment Services (RES) participants are engaged in unsubsidized employment to support self-sufficiency, consistent with federal reporting requirements.
 - Improve and expand existing immigrant and refugee programs by engaging community stakeholders in gathering feedback and ideas through 8 listening sessions, workgroups, and/or ad-hoc meetings per year to develop focused priorities for the Office of Immigrant and Refugee Affairs Strategic Plan and annual report.
 - Expand economic opportunities through two Informational Hiring Fairs and provide 120 attendees with information on county jobs, the hiring process, and job readiness resources.



Empower

- Workforce: Invest in our workforce and operations by providing support services and excellent customer service to ensure continuity of operations remains at its best.
 - Promoted a culture of respect and diversity among County staff as they served the public with excellence. Based on the 2022 biennial employee engagement survey feedback, the department enhanced engagement by creating an employee-led communication action committee to develop strategies and launched a series of meetings with leadership, including brown bag meetings and staff advisory committee meetings, to maintain and strengthen an engaged and empowered workforce.
 - Launched the HEART Customer Service Survey to HSEC's external customers in alignment with HHSA guidelines.
- Transparency and Accountability: Maintain program and fiscal integrity through reports, disclosures, and audits.
 - Maintained the inventory of the County of San Diego homeless and housing programs under the County's Framework for Ending Homelessness, which included monthly program updates and an annual inventory of expenditures, outputs, and outcomes.



Sustainability

- Economy: Align the County’s available resources with services to maintain fiscal stability and ensure long-term solvency.
 - Engage over 2,800 individuals by connecting them to services and resources through the Immigrant and Refugee Welcome Center located at the South Region Live Well Center in National City in a culturally sensitive manner focused on economic inclusion and poverty reduction.
 - Ensure 96% (1,814 of 1,890) of Communities in Action (CinA) Program goals are met. CinA is one of many Community Action Partnership (CAP) programs that expand economic enhancement opportunities by assessing people for connections to stabilization resources and services, particularly among those within historically under-resourced communities such as black, indigenous, and other people of color (BIPOC), low-income, unhoused, and immigrant and refugees.
- Resiliency: Ensure the capability to respond and recover to immediate needs for individuals, families, and the region.
 - Ensure 75% (75 of 100) households enrolled in the Coordinated Eviction Prevention System program avoid eviction and become stabilized in their housing.
 - Support 250 households on any given night with non-congregate emergency housing through the Regional Homeless Assistance Program while they secured more permanent housing solutions, serving over 500 household members overall.
 - Ensure 35% of households who receive non-congregate emergency housing through the Regional Homeless Assistance Program secure more permanent housing solutions.
 - Ensure 60% of participants enrolled in the Housing Disability Advocacy Program (HDAP) are connected to temporary or permanent housing.



Community

- Engagement: Inspire civic engagement by providing information, programs, public forums, or other avenues that increase access for individuals or communities to use their voice, their vote, and their experience to impact change.
 - Ensure 90% (90 of 100) of Resident Leadership Academy participants graduate the program by providing training and technical assistance to support community leaders in identifying and implementing community improvement projects that increase their neighborhoods’ health, safety, and well-being.

- Inform 3,850 individuals with regionally focused cross-threaded information through Community Newsletters that increase community engagement, promote awareness of County services, and provide a platform for community organizations to reach residents/customers directly.
- Provide 1,200 grandparents and kinship caregivers access to valuable resources through the Grandparents Raising Grandchildren Initiative by partnering with other County departments and various community organizations to conduct countywide events, including educational and resource symposiums, camp retreats, family enrichment days, and more.
- Co-lead Regional Community Leadership Teams (five (5) across the HHSA Regions) along with community co-chairs and develop community enrichment plans to advance equity based on the unique priorities identified through monthly engagements with over 270 community leaders and residents.
- Safety: Support safety for all communities, including protection from crime, availability of emergency medical services and fire response, community preparedness and regional readiness to respond to a disaster.
 - Ensure 90% (68 of 75) of veterans enrolled in the Community Care Coordination for Veterans program are immediately placed in a housing solution upon reentering the community from a County detention or reentry facility.
- Quality of Life: Provide programs and services that enhance the community through increasing the well-being of our residents and our environments.
 - Ensure 50% (39 of 78) of participants up through the age of 24 who are experiencing or at risk of homelessness are temporarily or permanently housed through the Housing Our Youth program.
 - Complete 50,000 outreach and case management engagements countywide with individuals experiencing or at risk of homelessness to connect them to resources, housing navigation and other services.
 - Increase the number of connections to public assistance programs such as access to food, medical insurance, and cash benefits by 40% (from 5,000 to 7,000) for people at risk or experiencing homelessness directly in the field (streets and encampments) during outreach events countywide.
 - Ensure 40% (70 of 176) of participants enrolled in the Safe Parking Programs for at least 30 days successfully exit to a more stable housing option.
 - Provide over 100 households at risk of or experiencing homelessness with financial support through the Specialized Funding for Imminent Need Program (SFIN), which helps pay for a wide range of critical direct and indirect expenses, such as security deposits, rental payments, auto-





repairs, healthcare expenses, and more, resulting in providing housing stability support to over 200 household members.

- Ensure 90% (378 of 420) of refugees aged 60 and older who are eligible for and enrolled in the Elder Multicultural and Support Services Program are provided with education and advocacy in navigating health and social services, peer mentoring support, and socialization activities, to provide early prevention and intervention of mental illness.
- Promote equity in the community by engaging 600 services and housing providers with LGBTQ+ capacity training, to build skills that empower them to provide supportive services that are inclusive and affirming for individuals who identify with the LGBTQ+ community.



Empower

- Workforce: Invest in our workforce and operations by providing support services and excellent customer service to ensure continuity of operations remains at its best.
 - Dedicate efforts to address a key focus area identified in the 2022 Biennial Employee Survey of “Departmental Leadership: Keeping Me Informed,” which aims to enhance two-way communication of information between leadership and line staff. The department will achieve this by leading an employee-led committee to identify key priorities and action items; enhancing communication between employees and leadership through brown bag and staff

advisory meetings, and leveraging a strengths-based approach when developing communication strategies that are person-centered and tailored to the individual needs of employees.

- Establish a baseline score for the HEART Customer Service Survey for HSEC’s external customers in alignment with HHSa guidelines.
- Transparency and Accountability: Maintain program and fiscal integrity through reports, disclosures, and audits.
 - Continue to maintain the Countywide inventory of homeless and housing programs under the County’s Framework for Ending Homelessness, which includes monthly program updates and an annual inventory of expenditures, outputs, and outcomes.

Related Links

For additional information on the programs offered by the Health and Human Services Agency, go to:




- ◆ <https://www.sandiegocounty.gov/content/sdc/hhsa.html>

For additional information about *Live Well San Diego*, go to:

- ◆ www.LiveWellSD.org

For additional information about the Department of Homeless Solutions and Equitable Communities, go to:

- ◆ <https://www.sandiegocounty.gov/content/sdc/hhsa/programs/hsec.html>

Performance Measures		2022-23 Actuals	2023-24 Adopted	2023-24 Actuals	2024-25 Adopted	2025-26 Approved
	Outreach and education provided to residents ¹	61,109	40,000	62,264	60,000	60,000
	Individuals connected to housing and resources ²	N/A	N/A	N/A	200	200
	Refugee Employment Services participants in unsubsidized employment ³	62% of 421	66% of 550	32.5% of 880	55% of 230	55% of 230
	Communities in Action program goals met ⁴	N/A	N/A	N/A	96% of 1,890	96% of 1,890
	Coordinated Eviction Prevention System Program households avoiding eviction and having stable housing ⁵	0% of 50	75% of 100	72% of 172	75% of 100	75% of 100
	Regional Homeless Assistance Program (RHAP) households placed in non-congregate shelters on any given night ⁶	N/A	350	250	250	100
	RHAP households securing permanent housing ⁷	N/A	N/A	N/A	35%	35%
	Housing Disability Advocacy Program participants housed ⁸	N/A	75%	80% of 358	60%	60%
	Resident Leadership Academy (RLA) Graduation Rate ⁹	91% of 119	90% of 100	86% of 148	90% of 100	90% of 100



Performance Measures		2022-23 Actuals	2023-24 Adopted	2023-24 Actuals	2024-25 Adopted	2025-26 Approved
	Unique subscribers receiving regional Community Newsletters ¹⁰	N/A	2,500	3,597	3,850	3,850
	Kinship families/caregivers receiving resources through the Grandparents Raising Grandchildren Initiative ¹¹	N/A	N/A	N/A	1,200	1,200
	Regional Community Leadership Team Meetings Engagement ¹¹	N/A	N/A	N/A	270	270
	Veterans immediately housed through Community Care Coordination ¹²	10% of 50	90% of 75	97% of 130	90% of 75	90% of 75
	Youth and Young Adults permanently housed through the Housing Our Youth Program ¹³	51% of 77	50%	65% of 110	50% of 78	50% of 78
	Outreach and engagements made to individuals at risk or experiencing homelessness ¹⁴	39,754	35,000	50,576	50,000	50,000
	Public assistance program applications submitted for people at risk of or experiencing homelessness during outreach ¹⁵	5,424	5,000	7,395	7,000	7,000
	Safe Parking Program Participants staying at least 30 days, exiting to a more stable housing option ¹⁶	N/A	40% of 65	49% of 70	40% of 176	40% of 176
	Households receiving financial support through the Specialized Funding Imminent Needs program ²	N/A	N/A	N/A	100	100
	Older Adult Refugees receiving supportive services ¹⁷	N/A	N/A	N/A	90% of 420	90% of 420

Table Notes

- ¹ This count includes duplicated individuals. In Fiscal Years 2022–23 and Fiscal Year 2023–24, the target goal was exceeded through successful engagement efforts with community partners and cross-threading efforts with other County Departments.
- ² In Fiscal Year 2024–25, this new measure demonstrates focused efforts to reduce homelessness.
- ³ In Fiscal Year 2023–24, program saw a greater than expected increase in total number of participants. However, target was not met due to challenges in obtaining Employment Authorization cards from U.S. Citizen Immigration Services. In Fiscal Year 2024–2025, lowered the target to reflect these challenges.
- ⁴ In Fiscal Year 2024–25, this is a new measure to demonstrate focused efforts to expand resources to under-resourced communities.
- ⁵ In Fiscal Year 2023–24 the number of participants was higher than expected due to a lower projection to reflect the program’s initial implementation, which began in late Fiscal Year 2022-23
- ⁶ In Fiscal Year 2024–25, the program was reduced to house 250 individuals as that is the capacity on any given night. In Fiscal Year 2025–26, the new projected target for this measure is lower due to the expected ramp-up of Compassionate Emergency Solutions and Pathways to Housing, which will proportionately reduce funding and utilization of the RHAP program.
- ⁷ In Fiscal Year 2024–25, this new measure demonstrates focused efforts to increase housing stability.
- ⁸ In Fiscal Year 2024–25, target was lowered to reflect the challenges to finding affordable housing in the County due to cost and availability.
- ⁹ In Fiscal Year 2023–24, program saw an unexpected increase in total number of participants due to increased engagement towards end of the fiscal year.
- ¹⁰ In Fiscal Year 2023–24, the target was exceeded through successful engagement efforts with community partners as well as cross-threading efforts with other County Departments.
- ¹¹ In Fiscal Year 2024–25, this new measure demonstrates focused efforts to inspire community engagement.
- ¹² In Fiscal Year 2023–24, saw an increase in the total number of participants due to the expanded scope of referrals from community partners.
- ¹³ In Fiscal Year 2023–24, the target for the number of participants housed was exceeded due to focused efforts towards permanently housing participants, such as expanded community outreach events and activities.
- ¹⁴ In Fiscal Year 2023–24, the target was exceeded due to the addition of new staff that expanded outreach and engagement efforts throughout the County, and increased partnerships with community stakeholders and local jurisdictions across all regions. Outreach





engagements are expected to increase due in part to grant funding obtained for additional staffing, resulting in increased outreach and more referrals. Engagements include duplicated individuals.

¹⁵ In Fiscal Year 2023–24, the target was exceeded due to grant funding that increased outreach efforts. Engagements include duplicated individuals.

¹⁶ In Fiscal Year 2023–24, expanded this new measure to demonstrate focused efforts to reduce homelessness. In Fiscal Year 2024–25, the target will include an additional safe parking site.

¹⁷ In Fiscal Year 2024–25, this new measure demonstrates focused efforts to support the immigrant and refugee community.

Budget Changes and Operational Impact: 2023–24 to 2024–25

Staffing

Decrease of 2.00 staff years

- ◆ Decrease of 2.00 staff years due to the transfer to Child and Family Well-Being to support operational needs.
- ◆ Additionally, staff were transferred among related programs within HSEC to manage operational needs.

Expenditures

Increase of \$30.4 million

- ◆ Salaries & Benefits—increase of \$7.3 million
 - ◆ Increase of \$6.9 million tied to negotiated labor agreements and temporary staffing associated with time-limited grants and project funding.
 - ◆ Increase of \$0.4 million to support the Migrant Transition Day Center based on Board of Supervisor’s direction on May 21, 2024 (27) to provide essential services that support onward travel for asylum seekers recently released from the Department of Homeland Security (DHS) custody.
- ◆ Services & Supplies—increase of \$20.9 million.
 - ◆ Increase of \$12.7 million for one-time costs for the Migrant Transition Day Center noted above.
 - ◆ Increase of \$7.8 million to address the immediate needs of those experiencing homelessness within the San Diego Riverbed and Plaza Bonita encampment areas.
 - ◆ Net increase of \$5.6 million for the Regional Homeless Assistance Program (RHAP) to align to a one-time budget of \$15.0 million for Fiscal Year 2024–25 funded through the American Rescue Plan Act (ARPA) Framework. Ongoing costs are expected to decrease in subsequent years as other sheltering solutions come online.
 - ◆ Net increase of \$4.3 million to align with new federal funding tied to the Additional Ukraine Supplemental Appropriations Act (AUSAA) to provide resettlement and housing assistance and other services to individuals displaced due to the war in Ukraine.
- ◆ Increase of \$2.8 million for Local Rental Subsidy Program to provide rental assistance for persons transitioning out of emergency shelter programs, funded through the ARPA Framework.
- ◆ Increase of \$0.6 million for one-time costs for the Grantville Safe Parking site based on Board of Supervisor’s direction on April 30, 2024 (32) supporting the Compassionate Emergency Solutions and Pathways to Housing (CESPH) to address the critical short-term needs of people experiencing or at risk of homelessness in the unincorporated area of San Diego County.
- ◆ Increase of \$0.5 million for the Inclement Weather program which provides temporary shelter services, funded through the ARPA Framework.
- ◆ Net increase of \$0.3 million for operating costs associated with two Safe Parking sites tied to Compassionate Emergency Solutions and Pathways to Housing efforts, funded through the ARPA Framework.
- ◆ Decrease of \$4.7 million associated with adjusting one-time General Purpose Revenue for the Pilot Shallow Rental Subsidy Program, Regional Homeless Diversion expansion, and Community Care Coordination for Veterans (C3V) program.
- ◆ Decrease of \$4.1 million associated with adjusting one-time ARPA funding for resources and support for vulnerable populations identifying as LGBTQ and experiencing or at risk of homelessness and the Coordinated Eviction Prevention Program. Funds carried over from the prior year will be available to continue to spend in the budget year.
- ◆ Decrease of \$1.6 million is tied to service level alignments to available funding including a reduction of appropriation capacity for outreach and legal services and a reduction of financial literacy services.
- ◆ Net decrease of \$1.4 million for the Housing and Disability Advocacy Program (HDAP) in alignment with the State allocation removing one-time expansion funds.
- ◆ Decrease of \$1.0 million for refugees primarily to align with federal allocation of the Service to Older Refugees (SOR)/Afghan Support Services to Older Refugees (ASOR) programs.
- ◆ Decrease of \$0.5 million in various ISF accounts tied to operating costs associated with facilities costs.

- ❖ Decrease of \$0.3 million for flexible housing pool funded through California Emergency Solutions and Housing Program (CESH) State grant.
- ❖ Decrease of \$0.1 million tied to the completion of the First Five Refugee Family Support program.
- ◆ Expenditure Transfer & Reimbursements—net decrease of \$2.2 million associated with the centralized General Fund funding supported by resources in Countywide Finance Other. Since this is a transfer of expenditures, it has a net effect of a \$2.2 million increase in the appropriations for the following:
 - ❖ Decrease of \$2.2 million in one-time funding for the C3V program.

Revenues

Increase of \$30.4 million

- ◆ Taxes Other than Current Secured—decrease of \$0.1 million tied to State Prop 10 tobacco tax in support of First Five Refugee Family Support Services that ended in Fiscal Year 2023–24.
- ◆ Intergovernmental Revenue—increase of \$31.3 million
 - ❖ Increase of \$13.1 million in Federal Emergency Management Agency (FEMA) Shelter and Services Program – Allocated (SSP-A) to fund the Migrant Transition Day Center noted above.
 - ❖ Increase of \$8.8 million in San Diego Riverbed and Plaza Bonita Encampment Resolution Funding grant revenues to fund estimated staffing and Services & Supplies referenced above.
 - ❖ Net increase of \$6.1 million to align ARPA Framework federal funding allocation, tied to costs noted above.
 - ❖ Net increase of \$4.3 million for new federal funding tied to AUSAA mentioned above.

- ❖ Increase of \$0.6 million in federal funding from the Department of Housing and Urban Development to fund the Grantville Safe Parking costs noted above.
- ❖ Increase of \$0.3 million tied to federal funding for temporary staffing tied to Community Health Workers Resilient grant.
- ❖ Increase of \$0.2 million tied to federal funding for temporary staffing tied to Community Services Block Grant revenue.
- ❖ Net decrease of \$1.4 million in State funding tied to HDAP program referenced above.
- ❖ Decrease of \$0.4 million in supplemental federal funding to align with the Refugee Support Services allocation.
- ❖ Decrease of \$0.3 million in California Emergency Solutions and Housing Program (CESH) State grant to fund the Flexible Housing Pool.
- ◆ General Purpose Revenue Allocation—decrease of \$0.8 million.
 - ❖ Decrease of \$2.0 million allocated in the prior year for a one-time expansion of the Pilot Shallow Rental Subsidy Program.
 - ❖ Decrease of \$0.5 million allocated in the prior year for a one-time augmentation to the Regional Homeless Diversion program.
 - ❖ Net increase of \$1.7 million associated with Salaries & Benefits.

Budget Changes and Operational Impact: 2024–25 to 2025–26

No significant changes other than projected completion of various projects supported with one-time funds.





Staffing by Program						
		Fiscal Year 2023-24 Adopted Budget			Fiscal Year 2024-25 Adopted Budget	Fiscal Year 2025-26 Approved Budget
Homeless Solutions and Equitable Communities Administration		16.00			16.00	16.00
Equitable Communities		54.00			52.00	52.00
Homeless Solutions		87.00			87.00	87.00
Immigrant and Refugee Affairs		5.00			5.00	5.00
Total		162.00			160.00	160.00

Budget by Program						
	Fiscal Year 2022-23 Actuals	Fiscal Year 2023-24 Adopted Budget	Fiscal Year 2023-24 Amended Budget	Fiscal Year 2023-24 Actuals	Fiscal Year 2024-25 Adopted Budget	Fiscal Year 2025-26 Approved Budget
Homeless Solutions and Equitable Communities Administration	\$ 3,446,024	\$ 3,609,591	\$ 11,652,058	\$ 3,767,008	\$ 3,814,669	\$ 3,949,732
Equitable Communities	14,087,009	15,534,165	16,041,689	15,501,018	17,019,373	17,395,816
Homeless Solutions	24,116,388	57,761,230	119,255,220	71,948,998	70,994,830	53,975,315
Immigrant and Refugee Affairs	2,289,819	5,155,057	11,642,264	9,989,432	20,609,036	9,674,325
Strategy and Innovation	(20,487)	—	—	—	—	—
Total	\$ 43,918,754	\$ 82,060,043	\$ 158,591,231	\$ 101,206,456	\$ 112,437,908	\$ 84,995,188

Budget by Categories of Expenditures						
	Fiscal Year 2022-23 Actuals	Fiscal Year 2023-24 Adopted Budget	Fiscal Year 2023-24 Amended Budget	Fiscal Year 2023-24 Actuals	Fiscal Year 2024-25 Adopted Budget	Fiscal Year 2025-26 Approved Budget
Salaries & Benefits	\$ 21,331,961	\$ 23,687,270	\$ 26,777,381	\$ 26,758,340	\$ 31,026,253	\$ 32,223,949
Services & Supplies	29,060,123	60,607,631	139,475,546	75,532,768	81,411,655	52,771,239
Other Charges	192,035	—	142	188,144	—	—
Expenditure Transfer & Reimbursements	(6,825,685)	(2,234,858)	(19,314,665)	(4,192,435)	—	—
Operating Transfers Out	160,319	—	11,652,827	2,919,640	—	—
Total	\$ 43,918,754	\$ 82,060,043	\$ 158,591,231	\$ 101,206,456	\$ 112,437,908	\$ 84,995,188



Budget by Categories of Revenues						
	Fiscal Year 2022-23 Actuals	Fiscal Year 2023-24 Adopted Budget	Fiscal Year 2023-24 Amended Budget	Fiscal Year 2023-24 Actuals	Fiscal Year 2024-25 Adopted Budget	Fiscal Year 2025-26 Approved Budget
Taxes Other Than Current Secured	\$ —	\$ 87,272	\$ —	\$ —	\$ —	\$ —
Licenses Permits & Franchises	462,788	654,000	666,505	686,967	654,000	654,000
Fines, Forfeitures & Penalties	42,250	38,232	38,232	38,334	38,232	38,232
Revenue From Use of Money & Property	2,742	—	—	—	—	—
Intergovernmental Revenues	31,730,056	61,934,563	108,028,933	76,631,943	93,192,595	65,749,875
Charges For Current Services	3,029,094	2,672,145	2,883,968	2,092,732	2,672,145	2,672,145
Miscellaneous Revenues	27	—	—	184	—	—
Other Financing Sources	250,000	250,000	250,000	250,000	250,000	250,000
Use of Fund Balance	(1,324,837)	—	30,299,762	5,082,465	—	—
General Purpose Revenue Allocation	9,726,635	16,423,831	16,423,831	16,423,831	15,630,936	15,630,936
Total	\$ 43,918,754	\$ 82,060,043	\$ 158,591,231	\$ 101,206,456	\$ 112,437,908	\$ 84,995,188



Housing & Community Development Services

Mission Statement

To make people’s lives healthier, safer and self-sufficient by delivering essential services in San Diego County.

Department Description

Housing and Community Development Services (HCDS) provides housing stability for low-income and vulnerable populations throughout the region, help improve neighborhoods through community development opportunities and implements innovative housing initiatives. HCDS conducts significant community engagement and outreach in developing these programs and services. These services are funded by the U.S. Department of Housing and Urban Development, the State, and the County, and are carried out through the following programs:

Affordable Housing: Increase affordable housing opportunities (to 6,889 by 2025) for low-income and special needs residents to reduce homelessness and those at-risk of homelessness through the following programs:

- ◆ **No Place Like Home (NPLH)**—provides funding to affordable housing developers to support the creation of Permanent Supportive Housing for persons experiencing or at risk of experiencing or at risk of experiencing chronic homelessness with a serious mental illness.
- ◆ **County Innovative Housing Trust Fund (IHCF)**—increases affordable housing opportunities throughout San Diego County using local trust funds for the construction, acquisition, rehabilitation, and loan repayment of affordable multi-family rental housing.
- ◆ **HOME Investment Partnership (HOME)**—supports the creation and preservation of multi-family affordable housing, and provides down payment assistance to low-income first-time homebuyers.
- ◆ **County Owned Excess Properties**—increases affordable housing opportunities for low-income and special needs populations using existing County-owned excess property.
- ◆ **Permanent Local Housing Allocation (PLHA)**—provides funding for the acquisition, construction or rehabilitation of affordable multi-family housing targeting households earning at or below 60 percent of the area median income.
- ◆ **Project-Based Vouchers (PBV)**—supports permanent supportive housing development in the region by making Project-Based Housing Choice Vouchers available as ongoing operating subsidies.



Homeless Services: Prevent and end homelessness through accessible housing and supportive services.

- ◆ **Emergency Solutions Grant (ESG)**— provides rapid rehousing, emergency housing, street outreach, and homeless prevention to individuals and families experiencing or at-risk of experiencing homelessness.
- ◆ **Local Rental Subsidy Program (LRSP)**—provides up to two years of rental assistance and case management services, and allows stabilized hotel clients to transition into permanent housing.
- ◆ **Veteran Affairs Supportive Housing (VASH)**—supports homeless veterans by combining rental assistance through the Housing Choice Voucher (HCV), case management, and clinical services provided by the Department of Veterans Affairs (VA).

Community Development: Enhance community infrastructure and facilities to provide a suitable and sustainable living environment through the following programs:

- ◆ **Community Development Block Grant (CDBG)**—provides funding for affordable housing, community improvement, and public service projects such as improvements to community centers, development of parks and sidewalks, and food distribution programs.
- ◆ **Home Repair Program**—provides low-income homeowners grants and low-interest loans to make needed improvements that will enable them to remain in their homes.
- ◆ **Housing Opportunities for People With AIDS/HIV (HOPWA)**—supports low-income people living with HIV/AIDS and their families by providing affordable housing opportunities, housing assistance, and supportive services.

Housing Authority: HCDS also serves as the Housing Authority of the County of San Diego (HACSD), which provides monthly rental assistance for low-income families, emancipated youth, families participating in substance abuse treatment, and

chronically homeless veterans through the following programs: (For more information, please see the Housing Authority budget.)

- ◆ **Section 8 Housing Choice Voucher Program**—provides long-term rental assistance to nearly 11,000 households each month, allowing very low-income families, veterans, the elderly, and the disabled to obtain decent, safe, and affordable housing.
- ◆ **Tenant-Based Rental Assistance**—provide rental assistance for vulnerable populations that include persons experiencing homelessness in the county’s unincorporated areas, families participating in the Child Welfare Services reunification program, youth transitioning out of the foster care system, and persons with HIV/AIDS.
- ◆ **Public Housing**—provides 121 decent and safe rental housing units for eligible low-income families, the elderly, persons with disabilities, and 38 farmworker units.

To ensure these critical services are provided, Housing & Community Development Services has 158.00 staff years and a budget of \$90.9 million.

2023–24 Accomplishments

Equity

- Housing: Utilize policies, facilities, infrastructure, and finance to provide housing opportunities that meet the needs of the community.
 - Provided 828 veteran households rental assistance through the VASH program. VASH program provides eligible homeless veterans, to whom the U.S. Department of Veterans Affairs refers, access to safe, decent, and affordable housing through rental assistance.
 - Increased affordable housing opportunities across the region using the Innovative Housing Trust Fund. In Fiscal Year 2023–24, ten developments completed construction, nine developments were awarded \$50.6 million and started construction this year, with an additional 21 developments awarded \$94.1 million and are estimated to begin construction within the next five years. In addition to IHTF funds, State, federal, and other sources of funding were also leveraged
- Economic Opportunity: Dismantle barriers to expanding opportunities in traditionally underserved communities of color and low income.
 - Conducted 40 fair housing tests throughout the county by secret shoppers in rental units to proactively educate and engage landlords in fair housing practices, laws, and regulations, which prohibit housing discrimination based on race or color, national origin, religion, sex, familial status, disability, and other protected classes.

- Economic Opportunity: Advance opportunities for economic growth and development to all individuals and the community.
 - Supported the County’s Framework for Ending Homelessness by collaborating with other County departments, adding to the regional supply of dedicated affordable housing, increasing the production of deeply affordable units, and creating more diverse and accessible housing in resource-rich neighborhoods.
 - Maintained 90% (215 of 239) occupancy in units allocated at specific housing developments through the Project Based Voucher (PBV) program. PBVs are a component of the Housing Choice Voucher program, which provides permanent housing in the form of rental assistance to reduce homelessness among extremely low and low-income households.

Sustainability

- Economy: Create policies to reduce and eliminate poverty, prompting economic sustainability for all.
 - Increased affordable housing opportunities for low-income and vulnerable populations using existing County-owned excess property in collaboration with the Department of General Services.
- Climate: Actively combat climate change through innovative or proven policies, green jobs, sustainable facility construction or maintenance and hazard mitigation.
 - Explored opportunities to reduce paper communications to and from customers through paperless notifications and other transactions that could be handled through the online portal.
 - Ensured energy and water-efficient purchases at Public Housing sites when renovating out-of-date fixtures and appliances such as refrigerators, stoves, toilets, water heaters, and air conditioners.

Community

- Quality of Life: Provide programs and services that enhance the community through increasing the well-being of our residents and our environments.
 - Engaged 355 new landlords interested in renting to individuals experiencing homelessness, low-income residents, and other vulnerable populations. This goal is part of a multiyear effort to increase the number of landlords on the interest list in the County’s Housing Authority jurisdiction.

Empower

- Workforce: Invest in our workforce and operations by providing support services and excellent customer service to ensure continuity of operations remains at its best.





- Facilitated quarterly Diversity, Equity, and Inclusion (DEI) trainings and/or open discussion forums to empower the workforce, increase employee engagement, and promote diverse and equitable hiring practices.
- Achieved organizational excellence by ensuring a workplace of belonging and inclusion for all County employees as they deliver the County's services to the public. Using information provided in the 2022 biennial employee engagement survey, worked with employees and collaborated with the employee representative groups to develop action plans that will further improve engagement in the department and continue to foster and develop an engaged and empowered workforce.

the Housing Choice Voucher program, which provides permanent housing in the form of rental assistance to reduce homelessness among extremely low and low-income households.

2024–26 Objectives



Equity

- Housing: Utilize policies, facilities, infrastructure, and finance to provide housing opportunities that meet the needs of the community.
 - Provide 875 veteran households rental assistance through VASH program. The VASH program provides eligible homeless veterans, to whom the U.S. Department of Veterans Affairs refers, access to safe, decent, and affordable housing through rental assistance.
 - Increase affordable housing opportunities across the region using the Innovative Housing Trust Fund to construct, acquire, and rehabilitate affordable multifamily rental housing throughout San Diego County.
- Economic Opportunity: Dismantle barriers to expanding opportunities in traditionally underserved communities of color and low income.
 - Conduct 40 fair housing tests throughout the county by secret shoppers in rental units to proactively educate and engage landlords in fair housing practices, laws, and regulations, which prohibit housing discrimination based on race or color, national origin, religion, sex, familial status, disability, and other protected classes.
- Economic Opportunity: Advance opportunities for economic growth and development to all individuals and the community.
 - Support the County's Framework for Ending Homelessness by collaborating with other County departments, adding to the regional supply of dedicated affordable housing, increasing the production of deeply affordable units, and creating more diverse and accessible housing in resource-rich neighborhoods.
 - Maintain 90% (306 of 304) of occupancy in units allocated at specific housing developments through the Project Based Voucher (PBV) program. PBVs are a component of



Sustainability

- Economy: Create policies to reduce and eliminate poverty, prompting economic sustainability for all.
 - Explore and Identify existing County-owned excess property sites that may no longer be needed for business purposes, for affordable housing viability.
- Climate: Actively combat climate change through innovative or proven policies, green jobs, sustainable facility construction or maintenance and hazard mitigation.
 - Improve sustainability by implementing strategies to reduce paper communications to and from customers through paperless notifications and other transactions that could be handled through the online portal.
 - Ensure energy and water-efficient purchases at Public Housing sites when renovating out-of-date fixtures and appliances such as refrigerators, stoves, toilets, water heaters, and air conditioners.



Community

- Quality of Life: Provide programs and services that enhance the community through increasing the well-being of our residents and our environments.
 - Engage 250 new landlords interested in renting to individuals experiencing homelessness, low-income residents, and other vulnerable populations. This goal is part of a multi-year effort to increase the number of landlords on the interest list in the County's Housing Authority jurisdiction.



Empower

- Workforce: Invest in our workforce and operations by providing support services and excellent customer service to ensure continuity of operations remains at its best.
 - Facilitate quarterly DEI trainings and/or open discussion forums to empower the workforce, increase employee engagement, and promote diverse and equitable hiring practices.
 - Increase the score on the next County Employee Engagement Survey by 2 percent on the question regarding the flow of information from leadership to staff. This will be done by prioritizing recommendations based on a review of input from focus groups to identify strategies to address information sharing and developing an action plan to be adapted and implemented by HCDS.

Related Links

For additional information on the programs offered by the Health and Human Services Agency, go to:

- ◆ <https://www.sandiegocounty.gov/content/sdc/hhsa.html>

For additional information about *Live Well San Diego*, go to:

- ◆ <http://www.LiveWellSD.org>

For additional information about Housing and Community Development Services, refer to the website at:

- ◆ <http://www.SanDiegoCounty.gov/sdhcd>

Follow HCDS on Facebook at:

- ◆ www.facebook.com/sdhcd



Performance Measures		2022-23 Actuals	2023-24 Adopted	2023-24 Actuals	2024-25 Adopted	2025-26 Approved
	Random fair housing compliance site tests	40	40	40	40	40
	Maximize the IHTF to increase affordable housing ³	N/A	Yes/No	Yes	Yes/No	Yes/No
	PBV Unit Occupancy Rate ³	N/A	90% of 239	90% of 239	90% of 340	90% of 386
	VASH Veterans ¹	675	800	828	875	925
	Landlords interested in renting to individuals experiencing homelessness, low-income residents, and other vulnerable populations. ²	450	250	355	250	250

Table Notes

- ¹ In Fiscal year 2023–24, the number of VASH veterans increased due to enhanced regional coordination with local Veteran Affairs agencies, and is expected to continue.
- ² In Fiscal Year 2023-24, the target was exceeded due to increased outreach and enhanced incentives.
- ³ In Fiscal Year 2023–24, this is a new performance measure to demonstrate HCDS’s efforts toward increasing affordable housing opportunities.

**Budget Changes and Operational Impact:
2023–24 to 2024–25**

Staffing

Increase of 2.00 staff years

- ◆ Increase of 2.00 staff years to provide additional fiscal support to the Housing Choice Voucher (HCV) programs.

Expenditures

Net decrease of \$8.5 million

- ◆ Salaries & Benefits—increase of \$2.9 million due to negotiated labor agreements, additional temporary staffing support to help with the transition to a new case management system for the rental assistance unit which will add new functionality and increase productivity, and the addition of 2.00 staff years referenced above.
- ◆ Services & Supplies—net decrease of \$14.4 million.
 - ◆ Net decrease of \$14.4 million for the Innovative Housing Trust Fund investment due to the completion of \$25.0 million in prior year one-time affordable housing project awards, partially offset with a new infusion of \$10.6 million

supported by the Evergreen component of the American Rescue Plan Act (ARPA) Framework funding as approved by the Board of Supervisors on February 27, 2024 (11).

- ◆ Decrease of \$1.8 million for prior year costs funded with one-time ARPA funding. The majority of the amount is tied to housing stability and case management services for the local rental subsidy program which will continue under Homeless Solutions and Equitable Communities.
- ◆ Decrease of \$0.6 million to align the budget to projected spending across various operating accounts with no impact to services.
- ◆ Increase of \$2.4 million for the Prohousing Incentive Program (PIP) to increase the creation and preservation of multifamily rental housing in the unincorporated area.
- ◆ Expenditure Transfer & Reimbursements—net decrease of \$3.0 million associated with prior year centralized General Fund support for one-time negotiated labor agreement and Public Housing Physical Needs Assessment. Since this is a reimbursement, it has a net effect of a \$3.0 million increase in appropriations.
- ◆ Decrease of \$2.9 million associated with a shift in funding for Public Housing Physical Needs Assessment to General Fund fund balance.





- ❖ Decrease of \$0.1 million associated with prior year one-time cost for negotiated labor agreement.

Revenues

Net decrease of \$8.5 million

- ◆ Intergovernmental Revenues—net increase of \$1.3 million.
 - ❖ Increase of \$2.4 million in State PIP grant revenue to align with anticipated award.
 - ❖ Increase of \$0.7 million in Housing Authority administrative revenue to support the Housing Choice Voucher (HCV) program administration increases in Salaries & Benefits.
 - ❖ Decrease of \$1.8 million in County's ARPA Framework revenue associated with prior year one-time funding.
- ◆ Miscellaneous Revenues—net decrease of \$14.4 million.
 - ❖ Decrease of \$25.0 million in Innovative Housing Trust Fund (IHTF) funds tied to completion of prior year one-time affordable housing projects.

- ❖ Increase of \$10.6 million associated with the new Evergreen component investments of the ARPA Framework funding.

- ◆ Use of Fund Balance—increase of \$4.6 million
 - ❖ Increase of \$2.9 million for work associated with the Public Housing Physical Needs Assessment.
 - ❖ Increase of \$1.7 million associated with the implementation of the new case management system to maintain software compliance and meet Housing and Urban Development federal guidelines.

Budget Changes and Operational Impact: 2024–25 to 2025–26

No significant changes other than projected completion of various projects supported with one-time funds.

Staffing by Program						
		Fiscal Year 2023-24 Adopted Budget			Fiscal Year 2024-25 Adopted Budget	Fiscal Year 2025-26 Approved Budget
Housing & Community Development		156.00			158.00	158.00
Total		156.00			158.00	158.00

Budget by Program						
	Fiscal Year 2022-23 Actuals	Fiscal Year 2023-24 Adopted Budget	Fiscal Year 2023-24 Amended Budget	Fiscal Year 2023-24 Actuals	Fiscal Year 2024-25 Adopted Budget	Fiscal Year 2025-26 Approved Budget
Housing & Community Development	\$ 64,931,599	\$ 30,949,772	\$ 73,106,708	\$ 36,068,115	\$ 34,434,790	\$ 30,372,362
County Successor Agency - Housing	5,695	28,500	28,500	16,390	28,500	28,500
HCD - Multi-Year Projects	45,103,139	68,483,245	176,436,173	14,175,237	56,483,245	38,883,245
Total	\$ 110,040,433	\$ 99,461,517	\$ 249,571,381	\$ 50,259,742	\$ 90,946,535	\$ 69,284,107

Budget by Categories of Expenditures						
	Fiscal Year 2022-23 Actuals	Fiscal Year 2023-24 Adopted Budget	Fiscal Year 2023-24 Amended Budget	Fiscal Year 2023-24 Actuals	Fiscal Year 2024-25 Adopted Budget	Fiscal Year 2025-26 Approved Budget
Salaries & Benefits	\$ 20,820,284	\$ 20,840,995	\$ 20,840,995	\$ 19,777,661	\$ 23,697,112	\$ 22,534,684
Services & Supplies	66,126,901	77,002,166	220,839,563	19,241,618	62,595,148	42,095,148
Other Charges	31,879,747	4,758,800	9,164,702	9,165,456	4,758,800	4,758,800
Expenditure Transfer & Reimbursements	(8,963,720)	(3,140,444)	(7,418,627)	(256,314)	(104,525)	(104,525)
Operating Transfers Out	177,222	—	6,144,748	2,331,321	—	—
Total	\$ 110,040,433	\$ 99,461,517	\$ 249,571,381	\$ 50,259,742	\$ 90,946,535	\$ 69,284,107





Budget by Categories of Revenues						
	Fiscal Year 2022-23 Actuals	Fiscal Year 2023-24 Adopted Budget	Fiscal Year 2023-24 Amended Budget	Fiscal Year 2023-24 Actuals	Fiscal Year 2024-25 Adopted Budget	Fiscal Year 2025-26 Approved Budget
Revenue From Use of Money & Property	\$ 10,665	\$ 4,591	\$ 4,591	\$ 17,600	\$ 4,591	\$ 4,591
Intergovernmental Revenues	96,156,031	63,835,196	149,620,829	62,978,868	65,133,033	58,152,106
Charges For Current Services	5,695	3,000	3,000	16,458	3,000	3,000
Miscellaneous Revenues	13,977,560	27,006,183	62,024,561	22,471,751	12,606,183	2,006,183
Other Financing Sources	300,972	—	—	142,702	—	—
Use of Fund Balance	(8,552,503)	2,064	29,307,917	(43,978,119)	4,602,064	2,064
General Purpose Revenue Allocation	8,142,013	8,610,483	8,610,483	8,610,483	8,597,664	9,116,163
Total	\$ 110,040,433	\$ 99,461,517	\$ 249,571,381	\$ 50,259,742	\$ 90,946,535	\$ 69,284,107



Medical Care Services

Mission Statement

To make people’s lives healthier, safer and self-sufficient by delivering essential services in San Diego County.

Department Description

Medical Care Services (MCS) strives to ensure that San Diego County is home to America’s premier local wellness delivery system with an emphasis on quality, equity, sustainability, and transparency. MCS uses a collaborative approach to identify and work on shared goals and actions with other County of San Diego business groups and the community. For example, MCS works with:

- ◆ **Health plans, hospitals, health and social care providers, community organizations, consumers, advocates, and other County departments** to ensure coordinated and equitable access to quality health and social care for Medi-Cal members.
- ◆ **Public Safety Group and HHS’s Self-Sufficiency Services** to support the expansion of Medi-Cal enrollment of justice-involved individuals in local youth and adult detention and reentry facilities to ensure they will have access to medical and dental care, behavioral health care, and social care services.
- ◆ **Community partners** to ensure their clients who qualify for the Home Visiting program receive a timely referral to the program, connecting families with care and resources that promote healthy birth and childhood outcomes.
- ◆ **Healthcare professionals** to offer outreach, education, and referrals to County resources and programs, especially those serving our most vulnerable populations.

MCS is comprised of the following sections:

- ◆ **Clinical Leadership**—provides clinical expertise and consultation across County programs, initiatives, and partnerships. MCS clinical leadership includes the County’s Chief Medical Officer, Assistant Chief Medical Officer, Chief Pharmacy Officer, Chief Nursing Officer, Chief Pediatric Officer, Chief Geriatric Officer, Chief Dental Officer, and Justice-Involved Health Officer.
- ◆ **Nursing**—provides direct clinical services at Public Health Centers, such as administering immunizations, and delivering evidence-based primary prevention through home visiting programs to improve child health outcomes, reduce disparities, and increase the well-being of San Diego County residents. The Office of Nursing Excellence develops and implements evidence-based practice standards to ensure



quality nursing care through professional development opportunities, quality improvement, and quality assurance activities.

- ◆ **Pharmacy**—provides direct services for the San Diego County Psychiatric Hospital, Edgemoor Distinct Part Skilled Nursing Facility, County clinic services, and other programs. The MCS Pharmacy coordinates with County programs to implement best practices and ongoing staff development to ensure safety and access to medications in the County’s pharmacies.
- ◆ **Pediatric Health**—collaborates with County departments and community partners to identify strategies and support programs to serve all children across the region. The Chief Pediatric Officer engages with local pediatric providers and consults on numerous projects, such as reducing childhood fatalities in collaboration with the County’s Medical Examiner’s Office, identifying strategies with County Behavioral Health Services to meet the needs of youth and serves as the Chair of the County’s Future Generations Council to integrate, align, and co-create solutions focused on improving the well-being of future generations in San Diego County.
- ◆ **Older Adult Health**—collaborates with County departments and community partners to assess needs and identify strategies and support programs to allow all people to age how and where they choose. The Chief Geriatric Officer works closely with the County’s Aging & Independence Services to achieve the Age Well San Diego vision, which encompasses San Diego’s Age-Friendly and Dementia-Friendly Community Initiatives and strives for countywide Age-Friendly Clinical Health System transformation in which every older adult receives evidence-based care that does no harm and is explicitly geared towards what matters most to the older adult and their family.
- ◆ **Oral Health**—collaborates with other County departments and community partners to identify gaps in care and potential solutions to support the oral health of San Diego County’s residents throughout their lifespans. The Chief Dental Officer

engages with local dental professionals through professional organizations and the San Diego County Oral Health Coalition to achieve this common goal of improving oral health throughout the lifespan. Additionally, the Chief Dental Officer works closely with Public Health Services and the Local Oral Health Program to promote and implement policies and programs aimed at increasing access and linkage to care for school-age children and tobacco cessation education for adolescents and adults.

- ◆ **Justice-Involved Health**—coordinates with partners to address whole person health-related concerns of the justice-involved population and the systems in which they access care. Adverse health and social conditions are far more prevalent among the justice-involved population. Addressing systems of care, improving transitions of care, and ensuring access to quality clinical and social services are essential to successful reentry, contributing to our community's overall health and well-being.
- ◆ **San Diego Advancing and Innovating Medi-Cal (SDAIM)**—SDAIM refers to the County's local approach to implementation of the Department of Health Care Services Medi-Cal Transformation initiative, formerly known as California Advancing and Innovating Medi-Cal (CalAIM). SDAIM partners and collaborates with County departments, managed care plans, health and social care providers, community organizations, consumers, and advocates to support CalAIM implementation in San Diego County. SDAIM strives to cultivate a more resilient, healthier region that fosters coordinated and equitable access to health and social services for Medi-Cal beneficiaries through a cross-sector collaborative approach within the region. The four priorities of SDAIM are to: coordinate care, fortify the safety net, expand services, and innovate Medicaid.

To ensure HHS service regions and departments can provide critical and essential services, MCS has 216.00 staff years and a budget of \$55.0 million.

2023–24 Accomplishments



Equity

- Health: Reduce disparities and disproportionality and ensure access for all through a fully optimized health and social service delivery system and upstream strategies.
 - Ensured 85% (1,760 of 2,060) of patient encounters included pharmacy-based transition of care when admitted or discharged from the San Diego County Psychiatric Hospital or the Edgemoor Distinct Part Skilled Nursing Facility to improve patient outcomes. This was carried out by integrating a clinical pharmacy program to ensure pharmacists

evaluated current medications, new medications, and their compatibilities to ensure a smooth transition to and from hospital care.

- Advocated for passing the State of California Senate Bill 872, in partnership with the County Office of Economic Development and Government Affairs, to increase the accessibility of pharmacy services such as medication and counseling through community mobile pharmacy clinics. As a result of passing this bill, implemented the mobile pharmacy program, which created opportunities to reach more individuals throughout San Diego County where they are, reducing transportation and financial barriers to accessing medication and other pharmacy services.
- Health: Focus on policy, systems, and environmental approaches that ensure equal opportunity for health and well-being through partnerships and innovation.
 - Conducted Age-Friendly Walkthrough scans at 100% (9 of 9) MCS-supported sites to understand how clinical services are provided to older adults, focusing on processes to assess and act upon what matters most to each older adult, mobility, mentation, and medication considerations unique to older adults. These scans were an essential first step toward creating Age-Friendly policies and systems to support health equity and well-being in San Diego County's older adult population. This was completed by coordinating and planning with site managers to ensure all staff understands the need for and value of, the Age-Friendly Walkthrough scans as well as what findings may indicate about current policies, practices, operations, and/or facilities.



Sustainability

- Economy: Align the County's available resources with services to maintain fiscal stability and ensure long-term solvency.
 - Conducted a financial analysis of Medical Care Services' programs to identify opportunities to increase revenue through seeking reimbursement for direct client services. Efforts to complete the analysis are underway and will continue into the next fiscal year.
 - Collaborated with stakeholders to increase equitable access to pharmacy services in County Public Health Centers through a pilot project that used automated patient medication dispensing machine technology to eliminate transportation barriers by providing medications onsite; this resulted in increased access to medications and ensured sustainability through low operating costs. Efforts to implement the automated patient medication dispensing system are ongoing and will continue in the next fiscal year.
 - Expanded access to pharmacy services in at least one County Public Health Center through the automated patient medication dispensing machine pilot project.





Efforts to implement the automated patient medication dispensing system are ongoing and will continue in the next fiscal year.

- Used data and information collected during the pilot project, to develop a plan to expand the automated patient medication dispensing machine program to at least one additional County Public Health Center to ensure expanded access to pharmacy services. Efforts to implement the automated patient medication dispensing system are ongoing and will continue in the next fiscal year.
- Supported the implementation of SDAIM by seeking funding opportunities for enhanced data exchange with Medi-Cal managed care plans. Funding improved care coordination and better served Medi-Cal beneficiaries in San Diego County.
- Resiliency: Ensure the capability to respond and recover to immediate needs for individuals, families, and the region.
 - Received a 4.5 (on a scale of 0-5) overall satisfaction rating from the nurses who attended the Public Health Nurse Residency and Nursing Essentials of Nursing Onboarding programs. Ensuring high-quality training is essential for maintaining a highly skilled nursing workforce that staffs the County's Public Health Centers, responds to public health emergencies, provides in-home visitation services, and many other essential programs serving clients.

number of referrals to the program impacted being able to contact families within one business day. Review of caseloads and operations will create opportunities to reach more families sooner.

- As part of the Board of Supervisors Harm Reduction Strategy, ensured the implementation of the distribution of drug disposal bags to individuals prescribed opioids after a surgical or dental procedure. These efforts safely disposed of unused prescription drugs, making them unavailable for misuse.
- Implemented a new evidence-based home visiting model to reach more families by providing one-on-one support and education to families to promote positive parenting and improve child health and development. Eighty-eight Public Health Nurses received training in the model and 470 families received services and care under the new program.
- Communication: Offer interpreters for community meetings or translations of information to ensure residents have every opportunity to make informed decisions while listening to, participating in or using County services or programs.
 - Ensured community engagement opportunities have translation or interpretation services, eliminating barriers to resident engagement with County services and programs. Activities such as participation in the County Translation, Language, Culture Connection (TLCC) working group, utilizing the County's processes to translate flyers, working with County subject matter experts in Americans Disability Act and Accessibility processes, and proactively seeking vendor interpretation services for future community events and vendor translation services for outreach materials are all important for preparing for future community engagement opportunities. These efforts are ongoing and will continue next fiscal year.
- Partnership: Facilitate meaningful conversations, shared programming, grant opportunities, or other opportunities to maximize resources through community partnerships to benefit the region.
 - Formalized a partnership between HHS, public safety, healthcare, community partners, and consumer groups to collectively work on approaches to increase the utilization of CalAIM services by justice-involved individuals. CalAIM connects qualified individuals to physical, behavioral, and social care services to address social drivers of health, which ultimately will reduce disparities and disproportionality impacting justice-involved individuals.



Community

- Engagement: Inspire civic engagement by providing information, programs, public forums or other avenues that increase access for individuals or communities to use their voice, their vote, and their experience to impact change.
 - Coordinated 18 community forums to educate about and listen to feedback on the CalAIM initiative, now referred to as Medi-Cal Transformation. These forums were an opportunity for community partners and residents to speak directly with County staff on the challenges and opportunities around accessing CalAIM and impact the planning and implementation, with the ultimate goal of ensuring all qualified Medi-Cal enrollees may benefit from CalAIM to achieve positive health outcomes and well-being. This was exceeded due to stakeholder and partner requests.
- Quality of Life: Provide programs and services that enhance the community through increasing the well-being of our residents and our environments.
 - Ensured 81% (1,660 of 2,050) of referrals to the Home Visiting Program were contacted within one business day so they may receive timely access to primary prevention, reduce disparities, and improve health outcomes. Linking families with a nurse empowers them to feel prepared and supported to make positive, healthy choices and establish a solid foundation for years to come. Public Health Nurse staffing changes and an unanticipated increase in the num-



Empower

- Workforce: Invest in our workforce and operations by providing support services and excellent customer service to ensure continuity of operations remains at its best.

- Implemented four new resources to support the County’s healthcare workers by providing access to the most relevant and up-to-date information to ensure client safety, best practices, and professional development.
- Promoted a culture of inclusion and belonging among County staff as they served the public with excellence. Based on the feedback from the 2022 biennial employee engagement survey, Medical Care Services conducted focus groups and collaborated with employees to create action plans that will enhance engagement in the department and maintain and strengthen an engaged and empowered workforce.
- Issued the Customer Experience Survey and increased the number of customer service surveys received for Medical Care Services’ direct service programs by 300% and achieved an average of 4.6 out of 5, to ensure services are meeting client’s needs and of the highest quality.

Justice

- Safety: Focus efforts to reduce disparities and disproportionality across the justice system.
 - Addressed health disparities and ensured equitable access to care for the justice-involved population by pursuing funding to increase pre-release Medi-Cal enrollment in local jails and youth detention and reentry facilities. Grants from the California Department of Healthcare Services were awarded to enhance pre-release Medi-Cal enrollment and suspension processes, to implement behavioral health linkages which will ensure individuals returning to the community from jails and youth detention will be connected to behavioral health services, and to implement pre-release services for eligible Medi-Cal members. These activities support efforts to increase enrollment in Medi-Cal and expand the County’s capacity to provide specific benefits and services to address social drivers of health, promote health equity, and improve overall health and well-being for Medi-Cal members with complex care needs.

2024–26 Objectives

Equity

- Health: Reduce disparities and disproportionality and ensure access for all through a fully optimized health and social service delivery system and upstream strategies.
 - Ensure 95% (1,575 of 1,660) of patient encounters include pharmacy-based transition of care when admitted or discharged from the San Diego County Psychiatric Hospital or the Edgemoor Distinct Part Skilled Nursing Facility to improve patient outcomes. This will be carried out by integrating a clinical pharmacy program to ensure pharmacists

evaluate current medications, new medications, and their compatibilities to ensure a smooth transition to and from hospital care.

- Conduct a voluntary assessment of 5 County departments to determine readiness for providing services as part of the Medi-Cal Transformation (previously CalAIM) initiative. This assessment will identify critical gaps and needs to determine readiness to contract with Medi-Cal Managed Care Plans to provide Enhanced Care Management and/or Community Support.
- Conduct an assessment to evaluate the San Diego County community’s capacity for providing Enhanced Care Management and Community Support to eligible Medi-Cal beneficiaries. These components of the Medi-Cal Transformation initiative (previously CalAIM) provide additional resources and care to some of the county’s most vulnerable individuals. Working with community partners, this assessment will identify gaps and barriers to services, as well as deliver strategies to ensure adequate service capacity and delivery.

Sustainability

- Economy: Align the County’s available resources with services to maintain fiscal stability and ensure long-term solvency.
 - Conduct one financial analysis of Medical Care Services’ programs to identify opportunities to increase revenue through seeking reimbursement for direct client services.
 - Collaborate with stakeholders to increase equitable access to pharmacy services in County Public Health Centers through a pilot project that uses automated patient medication dispensing machine technology to eliminate transportation barriers by providing medications onsite, resulting in increased access to medications and ensuring sustainability through low operating costs.
 - Expand access to pharmacy services in at least one County Public Health Center through the automated patient medication dispensing machine pilot project.
 - Use data and information collected during the pilot project and develop a plan to expand the automated patient medication dispensing machine program to at least one additional County Public Health Center to ensure expanded access to pharmacy services.
- Resiliency: Ensure the capability to respond and recover to immediate needs for individuals, families, and the region.
 - Ensure nurses who attend the Public Health Nurse Residency and Nursing Essentials of Nursing Onboarding programs rated their overall satisfaction with the program as 4.65 or higher (on a scale of 0-5). Ensuring high-quality training is essential for maintaining a highly skilled nursing workforce that staffs the County’s Public Health Centers,





responds to public health emergencies, provides in-home visitation services, and many other essential programs serving clients.



Community

- Engagement: Inspire civic engagement by providing information, programs, public forums or other avenues that increase access for individuals or communities to use their voice, their vote, and their experience to impact change.
 - Coordinate five forums with the community to educate about and listen to feedback on the Medi-Cal Transformation initiative (previously CalAIM). These forums are an opportunity for community partners and residents to speak directly with County staff on the challenges and opportunities around accessing CalAIM and impact the planning and implementation, with the ultimate goal of ensuring all qualified Medi-Cal enrollees may benefit from Medi-Cal Transformation to achieve positive health outcomes and well-being.
 - Revitalize the Community Home Visiting Workgroups for the north, central, and south regions of San Diego County to ensure the community has the opportunity to share their experiences, express their needs, and contribute to the ongoing quality assurance of the program. The workgroups play a crucial role in strengthening the Nurse Home Visiting program and ensuring it remains responsive to the needs of the community it serves through community engagement, program improvement, advocacy, partnership development, and promoting cultural competence within the program.
- Quality of Life: Provide programs and services that enhance the community through increasing the well-being of our residents and our environments.
 - Ensure 90% (1,820 of 2,020) of referrals to the Home Visiting Program are contacted within one business day so they may receive timely access to primary prevention, reduce disparities and improve health outcomes. Linking families with a nurse empowers them to feel prepared and supported to make positive, healthy choices and establish a solid foundation for years to come.
- Communication: Create proactive communication that is accessible and transparent.
 - Develop a communication plan to inform, educate, and engage residents and community stakeholders about the Medi-Cal Transformation initiative (previously CalAIM), an effort focused on enhancing the quality, access, and equity

of health and social services of low-income San Diegans. These efforts recognize the diversity of the Medi-Cal population and strive to be responsive to their needs and preferences.

- Communication: Offer interpreters for community meetings or translations of information to ensure residents have every opportunity to make informed decisions while listening to, participating in or using County services or programs.
 - Ensure 100% (5) of community engagement opportunities have translation or interpretation services, eliminating barriers to resident engagement with County services and programs.



Empower

- Workforce: Invest in our workforce and operations by providing support services and excellent customer service to ensure continuity of operations remains at its best.
 - Promote a culture of inclusion and belonging among Medical Care Services staff by implementing the employee engagement action plan, including creating a departmentwide newsletter, adding additional opportunities for team building, and continuing to support professional development and resiliency.



Justice

- Safety: Focus efforts to reduce disparities and disproportionality across the justice system.
 - Work with existing HHSWA workgroups which includes representation from public safety, healthcare, community partners, and consumer groups to jointly develop strategies to increase the use of Medi-Cal Transformation services by justice-involved individuals.

Related Links

For additional information on the programs offered by the Health and Human Services Agency, go to:

- ◆ <https://www.sandiegocounty.gov/content/sdc/hhsa.html>

For additional information about *Live Well San Diego*, go to:

- ◆ www.LiveWellSD.org

For additional information about Medical Care Services, refer to the website at:

- ◆ <https://www.SanDiegoCounty.gov/content/sdc/hhsa/programs/mcsd.html>



Performance Measures		2022-23 Actuals	2023-24 Adopted	2023-24 Actuals	2024-25 Adopted	2025-26 Approved
	Hospital Patients Receiving Pharmacy-Based Transitional Care ^{1,2}	60% of 2,730	95% of 3,200	85% of 2,060	95% of 1,660	95% of 1,660
	Overall Satisfaction Rate with PHN Residency and Nursing Essentials Program ¹	4.7	4.65	4.5	4.65	4.65
	Referred Families to Nursing Home Visiting Contacted Timely (within 1 business day) ^{3,4}	N/A	90% of 1,440	81% of 2,050	90% of 2,020	90% of 2,020

Table Notes

- ¹ The total number of encounters fluctuates year to year and are dependent on the number of admissions, discharges, and patients' length of stay at the County of San Diego Psychiatric Hospital and Edgemoor Skilled Nursing Facility.
- ² In Fiscal Year 2023–24, Medical Care Services continued to implement and build capacity in Pharmacy-Based Transitional Care, as a result this performance measure was below target. Also, a new Clinical Pharmacist classification was created and adopted to perform this function.
- ³ The performance measure related to Home Visiting referrals reviewed timely was replaced with families contacted timely to provide a focus on healthcare accessibility.
- ⁴ In Fiscal Year 2023–24, although the total number of referrals to the Home Visiting Program increased due to enhanced community outreach and recruitment for the program and more families willing to accept services, the target was not met due to Public Health Nurse staffing changes and an unanticipated increase in the number of referrals to the program, which impacted being able to contact families within one business day.

Budget Changes and Operational Impact: 2023–24 to 2024–25

Staffing

Increase of 1.00 staff year due to a position transfer from Administrative Support to meet operational needs related to the development and implementation of an electronic health record (EHR).

Expenditures

Net increase of \$4.6 million

- ◆ Salaries & Benefits—net increase of \$4.6 million.
 - ◆ Increase of \$4.6 million due to negotiated labor agreements, a reduction in the amount of vacancy savings assumed, and the addition of 1.00 staff year.
- ◆ Services & Supplies—net decrease of \$0.2 million.
 - ◆ Net decrease of \$0.7 million in one-time costs primarily to align IT project needs and costs associated with IT system modifications, data management, and analytical solutions related to the implementation of San Diego Advancing and Innovating Medi-Cal (SDAIM). A total of \$2.2 million remains in the budget for related SDAIM implementation efforts.
 - ◆ Increase of \$0.3 million associated primarily with ongoing costs associated with the replacement of a retail pharmacy system.

- ◆ Net increase of \$0.2 million to align various operating accounts to anticipated spending levels and to support increased facilities costs.
- ◆ Expenditure Transfer & Reimbursement—decrease of \$0.2 million associated with prior year centralized General Fund support of one-time negotiated labor agreement. Since this is a transfer of expenditures, it has a net effect of \$0.2 million increase in expenditures. The central funding is supported by resources in Countywide Finance Other.

Revenues

Net increase of \$4.6 million

- ◆ Intergovernmental Revenues—net increase of \$10.0 million.
 - ◆ Net increase of \$10.0 million primarily due to available one-time Realignment to support loss of Realignment tied to base adjustment to align with available receipts, increases in Salaries & Benefits, and backfill Intergovernmental Transfer (IGT) funding transferred to Behavioral health Services.
- ◆ Charges for Current Services—net decrease of \$8.0 million in Intergovernmental Transfer (IGT) funding transferred to Behavioral Health Services as part of the efforts to bring in one-time Realignment bridge funding, necessitating shifting of IGT revenue between departments to align Realignment to eligible program areas.
- ◆ Miscellaneous Revenues—net increase of \$0.1 million due to Pharmacy medication dispensing fee revenue.





- ◆ General Purpose Revenue Allocation—net increase of \$2.5 million to partially offset Salaries & Benefits noted above.

**Budget Changes and Operational Impact:
2024–25 to 2025–26**

No significant changes.

Staffing by Program						
		Fiscal Year 2023-24 Adopted Budget			Fiscal Year 2024-25 Adopted Budget	Fiscal Year 2025-26 Approved Budget
Medical Care Services		24.00			25.00	25.00
Admin						
Nursing		153.00			153.00	153.00
Pharmacy		30.00			30.00	30.00
SDAIM		8.00			8.00	8.00
Total		215.00			216.00	216.00

Budget by Program						
	Fiscal Year 2022-23 Actuals	Fiscal Year 2023-24 Adopted Budget	Fiscal Year 2023-24 Amended Budget	Fiscal Year 2023-24 Actuals	Fiscal Year 2024-25 Adopted Budget	Fiscal Year 2025-26 Approved Budget
Medical Care Services	\$ 10,893,579	\$ 7,848,327	\$ 16,262,218	\$ 7,753,005	\$ 9,014,194	\$ 8,844,483
Admin						
Nursing	30,426,428	29,602,721	29,759,375	31,298,560	33,083,119	33,689,334
Pharmacy	6,708,201	7,945,617	8,223,308	8,285,731	8,433,415	8,462,226
SDAIM	1,888,377	5,001,256	5,052,518	2,834,022	4,469,368	2,343,955
Total	\$ 49,916,585	\$ 50,397,921	\$ 59,297,419	\$ 50,171,318	\$ 55,000,096	\$ 53,339,998

Budget by Categories of Expenditures						
	Fiscal Year 2022-23 Actuals	Fiscal Year 2023-24 Adopted Budget	Fiscal Year 2023-24 Amended Budget	Fiscal Year 2023-24 Actuals	Fiscal Year 2024-25 Adopted Budget	Fiscal Year 2025-26 Approved Budget
Salaries & Benefits	\$ 35,381,026	\$ 37,594,928	\$ 37,594,928	\$ 38,260,295	\$ 42,256,242	\$ 43,777,034
Services & Supplies	14,437,215	12,989,771	21,846,177	11,752,181	12,743,854	9,562,964
Other Charges	82,545	—	34,592	157,705	—	—
Capital Assets Equipment	15,798	—	8,500	1,137	—	—
Expenditure Transfer & Reimbursements	—	(186,778)	(186,778)	—	—	—
Total	\$ 49,916,585	\$ 50,397,921	\$ 59,297,419	\$ 50,171,318	\$ 55,000,096	\$ 53,339,998





Budget by Categories of Revenues						
	Fiscal Year 2022-23 Actuals	Fiscal Year 2023-24 Adopted Budget	Fiscal Year 2023-24 Amended Budget	Fiscal Year 2023-24 Actuals	Fiscal Year 2024-25 Adopted Budget	Fiscal Year 2025-26 Approved Budget
Licenses Permits & Franchises	\$ (12)	\$ —	\$ —	\$ —	\$ —	\$ —
Revenue From Use of Money & Property	15,672	—	—	—	—	—
Intergovernmental Revenues	28,333,123	33,456,602	41,504,358	30,515,615	43,489,584	29,819,478
Charges For Current Services	17,357,361	8,120,073	8,120,073	18,457,009	77,032	7,996,032
Miscellaneous Revenues	5,436	15,459	15,459	392,681	139,500	139,500
Other Financing Sources	476,000	476,000	476,000	476,000	476,000	476,000
Use of Fund Balance	(3,191,338)	—	851,742	(7,999,773)	—	—
General Purpose Revenue Allocation	6,920,342	8,329,787	8,329,787	8,329,787	10,817,980	14,908,988
Total	\$ 49,916,585	\$ 50,397,921	\$ 59,297,419	\$ 50,171,318	\$ 55,000,096	\$ 53,339,998



Public Health Services

Mission Statement

To make people’s lives healthier, safer and self-sufficient by delivering essential services in San Diego County.

Department Description

Public Health Services (PHS), a nationally accredited public health department since May 2016, provides services that span all 10 Essential Public Health Services, addressing the root causes of priority health issues to advance health, equity, and well-being among all San Diego County residents. PHS strives to prevent injuries, disease, and disabilities; promote wellness, healthy behaviors, and access to quality care; and protect against public health threats, infectious disease epidemics, foodborne outbreaks, climate change, environmental hazards, and disasters.

Fulfilling the wide range of public health services responsibilities for local governments (California Code of Regulations, Title 17, Section 1276) is achieved through a multi-disciplinary and collaborative approach involving other County of San Diego business groups; healthcare provider networks, schools, businesses, community and faith-based partners; and residents. For example, PHS works with:

- ◆ The Office of Sustainability and Environmental Justice in developing the County’s Climate Action Plan to Reduce Greenhouse gases, updating the Environmental Justice and Safety Elements of the General Plan, and developing the County’s Sustainability Plan.
- ◆ The Department of Environmental Health and Quality (DEHQ) to protect the public from foodborne illnesses, environmental hazards, and vector-borne diseases, such as West Nile virus infection.
- ◆ The DEHQ and the Department of Animal Services to monitor and investigate rabies.
- ◆ The Office of Emergency Services and San Diego County Fire to plan for, prepare, and respond to emergencies and natural disasters (e.g., Hazard Mitigation Planning, Partner Relay Program).
- ◆ The Office of Equitable Communities, Medical Care Services, and medical plans to facilitate a community needs and planning process.
- ◆ County Departments and healthcare and community partners to address the elimination of HIV, Hepatitis C Virus (HCV), Tuberculosis (TB), and opioid overdoses.



Although the County COVID-19 emergency ended on February 28, 2023, and the federal emergency ended on May 11, 2023, COVID-19 continues to circulate in the community, but not at the same level as seen during the height of the pandemic. Other respiratory viruses, such as influenza and respiratory syncytial virus (RSV), which both declined during the height of the pandemic, have resurged. To monitor the impact of the winter respiratory virus season on the community and the healthcare system, the County is taking an integrated approach to respiratory virus surveillance, producing a combined dashboard and weekly report that showcases hospitalizations, deaths, test positivity, outbreaks, and vaccinations of COVID-19, influenza, and RSV. Innovative surveillance methods, such as wastewater and genomic surveillance, have also been incorporated into these efforts as well as contributing to the surveillance for other diseases of interest, such as norovirus and Monkeypox (Mpx). In 2023, the County also saw a small resurgence of Mpx and Hepatitis A in the San Diego County region, with vaccination campaigns and other community activities continuing to mitigate these surges.

PHS is committed to excellence across all essential public health services, as described here:

- ◆ **Prevention Services:** Facilitated approximately 14,000 child health screenings through the Child Health and Disability Prevention Program Gateway; promptly linked 240 pregnant women without prenatal care to providers; and provided 1,000 refugees with basic health assessments, screenings, and referrals. Enabled vaccination education and outreach activities. Implemented chronic disease prevention by advancing innovative approaches to healthy communities through policy, systems, and environmental change.
- ◆ **Surveillance:** Received and registered approximately 130,000 new disease incidents of hepatitis A and C, measles, HIV, sexually transmitted infections, vector-borne infections, TB, pertussis, gastrointestinal, COVID-19, and other respiratory infections and diseases. Tested approximately 13,400 speci-

mens for diseases through the Public Health Laboratory. Maintained the Vital Records of all county residents, surpassing statewide timeliness expectations in processing more than 37,000 birth and 24,000 death certificates.

- ◆ **Infectious Disease Control:** Investigated and provided case management for about 240 active TB cases, identifying over 3,000 contacts to infectious TB cases to interrupt the spread of disease. Provided over 3,000 residents with sexually transmitted disease prevention and clinical services.
- ◆ **California Children Services:** Provided case management services to almost 18,300 children with chronic illness and/or disabilities and their families and delivered over 18,900 hours of physical and occupational therapeutic services.
- ◆ **Public Health Preparedness and Response:** Supported emergency preparedness for all types of disasters—natural and man-made; managed the Medical Operations Center of the County’s Incident Command System in response to regional and local medical and health responses. Collaborated with 363 community partners and organizations as part of the San Diego Healthcare Disaster Coalition to provide emergency preparedness and response information. In addition, 700 community partners and 300 organizations are registered in the Partner Relay Network to provide emergency preparedness and response information in multiple languages, especially for the non-English speaking populations.

PHS continues to enhance its foundational capabilities, consistent with the public health framework called Foundational Public Health Services, leveraging funding through the California Department of Public Health Future of Public Health grant and the federal Public Health Infrastructure grant, as indicated below:

- ◆ **Assessment and Surveillance:** The Department's disease surveillance and investigations capacity will be enhanced with a new state-of-the-art public health laboratory facility. The groundbreaking event for the new laboratory was held on October 20, 2023, and the opening is expected in spring 2025. This facility will continue to provide surveillance and testing for infectious disease like COVID-19, flu, RSV, as well as food and water safety, animal rabies, and dangerous pathogens like anthrax. Additional services, such as wastewater testing and whole genome sequencing, will also be offered. In response to the opioid crisis, the Overdose Surveillance and Response (OSAR) Program will continue to be expanded. The Board of Supervisors approved the updated Opioid Settlement Framework in October 2023, in which PHS, Behavioral Health Services, Medical Care Services, and community partners collaborate on a variety of strategies. These strategies include implementing and managing cross-sector surveillance, promoting prescription drug monitoring programs, training physicians to improve opioid prescribing, improved detection of overdose outbreaks and clusters, and public messaging and education.

- ◆ **Community Partnership Development:** The Department maintains partnerships with internal and external stakeholders to develop new community health improvement plans that capture priorities for action. This work is done by the five Community Leadership Teams in each of the six Health and Human Services Agency regions and involves close coordination with the Office of Equitable Communities and its community engagement staff. PHS provides and presents a wide range of data, helps facilitate discussion, and provides technical assistance in the development of the plans and monitoring of progress. In this way, the community is supported in identifying and taking action to address challenges facing their respective communities.
- ◆ **Equity:** The Department leads several collective impact efforts focused on equity that address major public health challenges. These efforts include Getting to Zero (HIV), Elimination Initiatives for Hepatitis C and Tuberculosis, and the Perinatal Equity Initiative. PHS is also amplifying its population health focus by identifying and tracking key health equity and additional population health goals, based on Healthy People 2030, endorsed by the U.S. Department of Health and Human Services (among other agencies), and gauging improvements through program activity and associated measures. Equity factors into the design and implementation of virtually all public health programs.
- ◆ **Organizational Competencies:** The Department maintains a strong public health infrastructure, achieving national public health accreditation status in May 2016 and reaccreditation status in August 2023, reflecting excellence across all 10 Essential Public Health Services. Contributing to this achievement is a strong data infrastructure, including surveillance systems to collect data on a wide range of diseases in real-time, creating a data warehouse for quicker data analysis, and designing interactive and user-friendly dashboards. The demands of the COVID-19 response revealed the imperative to build a diversified and competent public health workforce. A robust workforce plan is in place which includes goals such as recruiting diverse staff; retaining staff through efforts to improve job satisfaction and career growth; and sustaining staff through wellness activities and other support. Eligible PHS staff will have access to CDC-funded tuition reimbursement for certification in various public health disciplines to address priority skill gaps. For example, certifications may include contracts, finance, project management, and strategic planning.
- ◆ **Policy Development and Support:** To ensure public health policy recommendations are evidence-based, to build consistent and effective operational practices, and to provide staff with direction through clear policies and best practice guidance, PHS has placed emphasis on documenting program information, which includes program operations manuals, policy and procedures documents, and process maps. Also,



PHS is viewed as a leader across the State in its public health policy expertise and practices. Staff bring this expertise to legislative analysis for the Board of Supervisors to inform decisions on the challenges facing San Diego.

- ◆ **Accountability and Performance Management:** The Department has a robust performance management and quality improvement program. Recently, enhancements were made to expand visualization of data through dashboards to make it easier for the public to access and understand data. A formal process for quality improvement planning is being designed so that projects will be identified based on the most significant performance challenges.
- ◆ **Emergency Preparedness and Response:** PHS works to build capacity for response to emergencies, including developing and maintaining preparedness and response strategies and plans. In these efforts, PHS directs special attention to those communities that face socio-economic and other inequities because history has shown these communities experience additional challenges during emergencies. PHS coordinates a variety of coalitions and conducts numerous exercises through the year to help prepare the healthcare community to meet the needs of all residents during emergencies. PHS also facilitates countermeasures, such as mass vaccination exercises, and strengthens surge management, by building the capacity of staff, departments, volunteers, and providers.
- ◆ **Communications:** The Department has a proactive, coordinated communication strategy. This includes incorporating a health equity framework into all health promotion activities, expanding the use of social media, and developing messages to diverse populations for community stakeholders to help deliver accurate and timely health information to the public. Ongoing enhancements to webpages for content, readability, language, and cultural appropriateness is also a key component to this strategy. All of this is achieved through training of health promotion staff so that principles of evidence-based strategies are applied across PHS programs.

To ensure these critical services are provided, PHS has 775.00 staff years and a budget of \$236.8 million.

2023–24 Accomplishments



Equity

- Health: Reduce disparities and disproportionality and ensure access for all through a fully optimized health and social service delivery system and upstream strategies.
 - Ensured that 93% (1,284 of 1,379) of children in out-of-home placements received preventive health examinations to identify and correct medical issues per timeframes and targets established by the State.

- Ensured that 81% (1,008 of 1,237) of children in out-of-home placements received routine dental examinations per timeframe and target established by the State.
- Ensured 60% (719 of 1,197) of eligible refugees and those granted asylum, Cuban and Haitian entrants (parolees), those with Special Immigrant Visas, and victims of trafficking completed their health assessment within 90 days to identify health needs and facilitate access to the local healthcare system, as is the standard set by the California Refugee Program.
- Immunized 99.9% (44,155 of 44,178) of children under 18 served at Public Health Centers (PHCs) vaccination clinics to protect them from diseases like measles and whooping cough. PHCs serve children who were unable to get an appointment with their medical provider in time to get school-required vaccines; some of these children may lack a medical home.
- Ensured 92% (47 of 51) of infants served by the Black Infant Health (BIH) program have a normal birth weight (2,500 grams or more). BIH uses a group-based approach and client-centered one-on-one support to help participants develop life skills, strategies to reduce stress, and build social support.
- Health: Focus on policy, systems, and environmental approaches that ensure equal opportunity for health and well-being through partnerships and innovation.
 - Ensured 60% (157 of 260) of licensed tobacco retailers in the unincorporated area of San Diego County comply with youth access laws prohibiting sales to anyone under 21.



Sustainability

- Economy: Align the County's available resources with services to maintain fiscal stability and ensure long-term solvency.
 - Communicated with employees about sustainability program updates, successes, and opportunities for improvement a minimum of once a quarter, at senior staff meetings and the PHS newsletter, and other internal communications.
 - Short-Term: Maintained a 24% average reduction in vehicle miles traveled by supporting remote and hybrid work environments to reduce emissions and the office footprint as Public Health Services migrate to alternate and new facilities and maximize shared workspaces.
- Climate: Actively combat climate change through innovative or proven policies, green jobs, sustainable facility construction or maintenance and hazard mitigation.
 - Mid-Term: Developed in December 2023 and in the process of implementing a Board of Supervisor's Policy that supports Sustainable, Equitable, and Local food sourcing for the County of San Diego food service operations.

- Long-Term: Over a two-year period, provided technical support to 10 community-based organizations, local coalitions, cities, and other jurisdictions to increase their capacity for healthy and equitable planning, including growing natural landscaping where possible to reduce contributors to climate change. This Fiscal Year, technical assistance provided included working with the City of Chula Vista on the New Bayshore bikeway project, the San Diego Unified School District on Safe Routes to Schools, and the San Diego Childhood Obesity Initiative Community Council on learning sessions to build capacity on policy advocacy. These three instances of technical assistance added to the seven instances from the prior Fiscal Year, represent the achievement of the target of 10.
- Resiliency: Ensure the capability to respond and recover to immediate needs for individuals, families, and the region.
 - Short-Term: Ensured 55% (407 of 743) of all permanent staff completed mandatory training on the National Incident Management System (NIMS) and the Incident Command System (ICS) to enhance responsiveness to public health emergencies (number of online training sessions depends on individual’s level and role). Reaching the target was more challenging because the measure changed to include all staff (743) as opposed to staff hired before December 31, 2019 (300).

 Community

- Quality of Life: Provide programs and services that enhance the community through increasing the well-being of our residents and our environments.
 - Connected 94% (33 of 35) of clients with newly confirmed HIV diagnoses to primary care within 30 days to improve health outcomes and reduce transmission of HIV. This is a key goal of the Getting to Zero initiative, a ten-year County initiative to end the HIV epidemic.
 - Confirmed 93% (348 of 373) of individuals of childbearing potential who are diagnosed with any stage of syphilis were screened for pregnancy status.
 - Investigated 100% (171) of reported cases of select communicable diseases (hepatitis A and meningococcal) within 24 hours of receipt of the report so steps can be taken to prevent the spread of the disease.
 - Ensured 98% (207 of 212) of active TB cases were reported by the community to Public Health Services within one business day from the start of treatment to prevent further transmission.
 - Ensured 98% (232 of 237) of active tuberculosis cases were tested for HIV, per CDC guidelines, working towards meeting the national TB program 2025 goal of 99%.

 Empower

- Workforce: Invest in our workforce and operations by providing support services and excellent customer service to ensure continuity of operations remains at its best.
 - Promoted a culture of inclusion and belonging among County staff as they served the public with excellence. Based on the feedback from the 2022 biennial employee engagement survey, HHS departments conducted focus groups and collaborated with employees to create action plans that will enhance engagement in the department and maintain and strengthen an engaged and empowered workforce.
- Transparency and Accountability: Maintain program and fiscal integrity through reports, disclosures, and audits.
 - Maintained 100% compliance with ten different lab licenses and permits with federal and State accrediting requirements at the Public Health Services laboratory to protect community health and prevent the spread of disease.
 - Ensured 97% (3,150 of 3,240) of children with serious physical limitations, chronic health conditions, and diseases referred to California Children Services had their medical eligibility determined within the State required time frame of five business days to ensure that these children receive timely coverage and family-centered care coordination. The performance target exceeds the State goal of 95% and is based on an audit of a sample of cases.
 - Registered 94% (35,676 of 37,949) of birth certificates within ten days of birth to support accurate census data, representing best practice as the State recently adopted a more lenient 21-day timeline standard.
- Innovation: Foster new ideas and the implementation of proven best practices to achieve organizational excellence.
 - Conducted nine (9 of 10) quality improvement projects to advance operational excellence through continuous improvement and engage staff in identifying and resolving barriers to success.
 - Conducted four (4) training sessions on essential emergency response functions to ensure staff is prepared to respond to emergencies, which is also a federal and State priority due to the pandemic.

2024–26 Objectives

 Equity

- Health: Reduce disparities and disproportionality and ensure access for all through a fully optimized health and social service delivery system and upstream strategies.





- Ensure that 90% (1,260 of 1,400) of children in out-of-home placement receive preventive health examinations to identify and correct medical issues per timeframes and targets established by the State.
- Ensure that 90% (1,170 of 1,300 each month) of children in out-of-home placements receive routine dental examinations per timeframe and target established by the State.
- Ensure 90% (900 of 1,000) of refugees complete their health assessment within 90 days to identify health needs and facilitate access to the local healthcare system, as is the standard set by the California Refugee Program.
- Immunize 99% (24,750 of 25,000) of children under 18 served at Public Health Centers (PHCs) vaccination clinics to protect them from diseases like measles and whooping cough. PHCs serve children who were unable to get an appointment with their medical provider in time to get school-required vaccines; some of these children may lack a medical home.
- Ensure 88% (39 of 44) of infants served by the Black Infant Health (BIH) program have a normal birth weight (2,500 grams or more). BIH uses a group-based approach and client-centered one-on-one support to help participants develop life skills and strategies to reduce stress and build social support.
- Health: Focus on policy, systems, and environmental approaches that ensure equal opportunity for health and well-being through partnerships and innovation.
 - Ensure 85% (221 of 260) of licensed tobacco retailers in the unincorporated area of San Diego County comply with youth access laws prohibiting sales to anyone under 21.



Sustainability

- Climate: Actively combat climate change through innovative or proven policies, green jobs, sustainable facility construction or maintenance and hazard mitigation.
 - Continue to maintain a 24% average reduction in vehicle miles traveled by supporting remote and hybrid work environments to reduce emissions and the office footprint as Public Health Services migrates to alternate and new facilities and maximize shared workspaces.



Community

- Quality of Life: Provide programs and services that enhance the community through increasing the well-being of our residents and our environments.
 - Connect 94% (33 of 35) of clients with newly confirmed HIV diagnoses to primary care within 30 days to improve health outcomes and reduce transmission of HIV. This is a key goal of the Getting to Zero initiative, a ten-year County initiative to end the HIV epidemic.

- Confirm 98% (86 of 88) of individuals of childbearing potential who are diagnosed with any stage of syphilis have been screened for pregnancy status.
- Investigate 100% (190) of reported cases of select communicable diseases (hepatitis A and meningococcal) within 24 hours of receipt of the report so steps can be taken to prevent the spread of the disease.
- Ensure 98% (235 of 240) of active TB cases are reported by the community to Public Health Services within one business day from the start of treatment to prevent further transmission.
- Ensure 95% (228 of 240) of active tuberculosis cases are tested for HIV, per CDC guidelines, working towards meeting the national TB program 2025 goal of 99%.



Empower

- Workforce: Invest in our workforce and operations by providing support services and excellent customer service to ensure continuity of operations remains at its best.
 - Increase PHS employee engagement by conducting focus groups with PHS staff to identify the sources and impacts of workload challenges and to develop and implement an action plan based on feedback and suggestions.
- Transparency and Accountability: Maintain program and fiscal integrity through reports, disclosures, and audits.
 - Maintained 100% compliance with ten different lab licenses and permits with federal and State accrediting requirements at the Public Health Services laboratory to protect community health and prevent the spread of disease.
 - Ensure 97% (3,150 of 3,240) of children with serious physical limitations, chronic health conditions, and diseases referred to California Children Services have their medical eligibility determined within the State required time frame of five business days to ensure that these children receive timely coverage and family-centered care coordination. The performance target exceeds the State goal of 95% and is based on an audit of a sample of cases.
 - Register 95% (35,910 of 37,800) of birth certificates within ten days of birth to support accurate census data, representing best practice as the State recently adopted a more lenient 21-day timeline standard.
- Innovation: Foster new ideas and the implementation of proven best practices to achieve organizational excellence.
 - Conduct ten (10) quality improvement projects to advance operational excellence through continuous improvement and engage staff in identifying and resolving barriers to success.
 - Conduct four (4) training sessions on essential emergency response functions to ensure staff is prepared to respond to emergencies.

Related Links

For additional information on the programs offered by the Health and Human Services Agency, go to:

- ◆ <https://www.sandiegocounty.gov/content/sdc/hhsa.html>

For additional information about *Live Well San Diego*, go to:

- ◆ www.LiveWellSD.org

For additional information about Public Health Services, the PHS strategic plans, and information about each of its branches, go to:

- ◆ <https://www.sandiegocounty.gov/hhsa/programs/phs/>

For more information about the *Live Well San Diego* Community Health Improvement Assessment (CHA), Community Health Improvement Plans (CHIP), and Regional Results Summaries, go to:

- ◆ <https://www.livewellsd.org/i-want-to/get-involved/leadership-teams>
- ◆ <https://www.livewellsd.org/i-want-to/learn-more/worksite-wellness/live-well-work>

For more information about Healthy Works, a component of *Live Well San Diego*, go to:

- ◆ <https://www.livewellsd.org/i-want-to/find-resources/live-well-home>

For more information about public health accreditation, go to:




- ◆ <https://phaboard.org/>
- ◆ <https://www.sandiegocounty.gov/content/sdc/hhsa/programs/phs/public-health-reaccreditation.html>

For health statistics and dashboards that describe health behaviors, diseases, and injuries for specific populations, health trends and comparison to national targets, go to:

- ◆ https://www.sandiegocounty.gov/hhsa/programs/phs/community_health_statistics/

For additional information about the Top 10 *Live Well San Diego* Indicators and Data Portal, go to:

- ◆ <https://www.livewellsd.org/i-want-to/learn-more/data-indicators>

Performance Measures		2022-23 Actuals	2023-24 Adopted	2023-24 Actuals	2024-25 Adopted	2025-26 Approved
	Timely Preventive Health Examinations for Children in Out-Of-Home Placements ⁸	92% of 1,573	90% of 1,600	93% of 1,379	90% of 1,400	90% of 1,400
	Timely Dental Examinations for Children in Out-Of-Home Placements	82% of 1,362	90% of 1,400	81% of 1,237	90% of 1,300	90% of 1,300
	Refugees Completed the Health Assessment Process Within 90 Days ¹	81% of 1,380	90% of 1,000	60% of 1,197	90% of 1,000	90% of 1,000
	Children With Age-Appropriate Vaccines ²	99.7% of 21,272	99% of 21,000	99.9% of 44,178	99% of 25,000	99.9% of 25,000
	Infants Served by Black Infant Health Program with a Normal Birth Weight	90% of 49	88% of 40	92% of 51	88% of 44	88% of 44
	Tobacco Retailers in Compliance with Youth Access Laws ³	50% of 260	85% of 260	60% of 260	85% of 260	85% of 260
	Clients With Newly Confirmed HIV Diagnosis with a Medical Visit Within 30 Days	82% of 45	94% of 35	94% of 35	94% of 35	94% of 35
	Childbearing individuals diagnosed with syphilis screened for pregnancy status ⁴	N/A	100% of 110	93% of 373	98% of 88	98% of 88
	Selected Communicable Diseases Cases Contacted/ Investigations Initiated Within 24 Hours ⁵	99% of 198	100% of 170	100% of 171	100% of 190	100% of 190
	TB Cases Reported to PHS Within One Working Day from The Start of Treatment	94% of 240	98% of 240	98% of 212	98% of 240	98% of 240
	Active TB Cases Tested For HIV	97% of 240	95% of 240	98% of 237	95% of 240	95% of 240
	PHS Laboratory Compliance	100%	100%	100% of 10	100% of 10	100% of 10
	CCS Medical Eligibility Determined Within Five Days ⁷	97% of 4,600	97% of 4,600	97% of 3,240	97% of 3,240	97% of 3,240



Performance Measures		2022-23 Actuals	2023-24 Adopted	2023-24 Actuals	2024-25 Adopted	2025-26 Approved
	Birth Certificates Registered Within 10 Days Of Event	95% of 38,790	95% of 40,000	94% of 37,949	95% of 37,800	95% of 37,800
	Quality Improvement Projects ⁶	8	10	9 of 10	10	10

Table Notes

- ¹ In Fiscal Year 2023–24, this performance was below target and contributing factors included limited initial capacity due to extended contract negotiations and ongoing challenges in recruitment and retention of healthcare staff. Performance is also below target due to ongoing impact of the pandemic on refugee resettlement and health systems operations. However, for this reporting period (federal Fiscal Year 2022–23 because of lagged data), the California Refugee Program received a federal waiver lifting the requirement to complete the assessment in 90 days.
- ² The number of children vaccinated at Public Health Clinics increased in Fiscal Year 2023–24 compared to previous years in which fewer children sought routine vaccinations during the pandemic. There is variation in performance among Public Health Clinics and that is why performance is shown at 99.9% (and not rounded to 100%).
- ³ This new tobacco ordinance applies only in unincorporated areas. An assessment of tobacco sales to minors conducted in March 2022 showed that outreach and education are needed before beginning the enforcement phase. In Fiscal Year 2023–24, the number of tobacco retailers in compliance with youth access laws remains lower than the PHS goal due to the complexity of implementation, which includes the recruitment and training of code enforcement officers and developing a new process for issuing and collecting fines from retailers.
- ⁴ This is a new performance measure in Fiscal Year 2023–24 due to a 1,200% increase in congenital syphilis cases in California from 33 cases in 2012 to 446 cases in 2019. This is the highest number of reported cases since 1993. Congenital syphilis can cause deformities, severe anemia, an enlarged liver and spleen, jaundice, or brain and nerve problems such as blindness or deafness. Performance is below target (93% out of 100%) because when clinics (referring to clinics that are not County operated or under County contract) conduct testing for syphilis, these clinics are not always testing patients of child-bearing potential to determine pregnancy. This is critical to ensure immediate treatment for syphilis and prevent transmission to the fetus. The County communicates to external partners the importance of timely screening for both syphilis and pregnancy. Performance is also below target in part because there were more individuals than anticipated. Next year, the target will be adjusted downward from 100% to 98% to account for the fact that it is the non-County clinics that are falling slightly short of this performance standard.
- ⁵ The number of diseases requiring investigations fluctuates from year to year. Hepatitis A and meningococcal disease were selected because they pose a high enough risk to require an immediate response.
- ⁶ A total of nine out of ten QI projects were completed by June 2024. This falls slightly short of the target for ten QI projects to be completed. A few QI projects were unable to complete a Plan-Do-Study-Act cycle in which a solution or intervention is tested. The workload of QI project team members was a contributing factor.
- ⁷ In Fiscal Year 2023–24, CCS cases were fewer than anticipated due to the winding down of COVID-19 response and operations, and closing out of cases that were no longer active.
- ⁸ In Fiscal Year 2023–24, the estimated overall number of children in out-of-home placement has declined from 1,600 to 1,379 due in part to the Child and Family Well Being’s efforts to provide family strengthening and prevention services to keep families together.
- ⁹ Though short of 95% target, PHS performance is based on a ten-day turnaround, as opposed to the State, which has a 21-day standard.

Budget Changes and Operational Impact: 2023–24 to 2024–25

Staffing

Increase of 11.00 staff years

- ◆ Increase of 7.00 staff years due to transfers from Administrative Support of Information Technology staff to facilitate the implementation and integration of an electronic health record system and ongoing operational needs.

- ◆ Increase of 4.00 staff year to support the deployment of the *Live Well San Diego* Live Well on Wheels mobile clinic in bringing services to communities with limited access to resources.
- ◆ Additionally, staff were transferred among related programs within PHS to manage operational needs.



Expenditures

Net increase of \$8.5 million

- ◆ Salaries & Benefits—net increase of \$16.1 million primarily due to negotiated labor agreements and the increase of 11.00 staff years noted above.
- ◆ Services & Supplies—net decrease of \$5.0 million.
 - ◆ Decrease of \$8.1 million primarily associated with contracted services tied to the winding down of COVID related activities.
 - ◆ Net increase of \$1.8 million in operating costs primarily tied to facilities, laboratory supplies, and IT, offset by reductions in office expense.
 - ◆ Increase of \$1.3 million in contracted services for Opioid Settlement Framework efforts.
- ◆ Other Charges—increase of \$0.1 million tied to GASB 87 capitalization of lease requirements for Kearny Mesa and Seville Plaza leases.
- ◆ Capital Assets Software—decrease of \$1.2 million due to a reduction for prior year one-time costs associated with the Electronic Health Record and the development of an expandable data management system to track tobacco retailer, fee payments, and compliance with the County's Tobacco Retail Licensing Ordinance.
- ◆ Capital Assets Equipment—decrease of \$2.0 million primarily due to a reduction for prior year one-time costs associated with *Live Well San Diego* Live Well on Wheels and Mobile Public Health Laboratory vehicles.
- ◆ Expenditure Transfer & Reimbursements—decrease of \$0.5 million associated with prior year centralized General Fund support for one-time costs for negotiated labor agreements. Since this is a transfer of expenditures, it has a net effect of a \$0.5 million increase in appropriations. The central funding is supported by resources in Countywide Finance Other.

Revenues

Net increase of \$8.5 million

- ◆ Intergovernmental Revenues—net increase of \$2.4 million.
 - ◆ Increase of \$7.9 million in available one-time Realignment revenues to support loss of Realignment tied to base adjustment to align with available receipts and increased Salaries & Benefits.
 - ◆ Increase of \$0.6 million in administrative fees collected from Medi-Cal Administrative Activities and Targeted Case Management (MAA/TCM), due to a transfer of appropriations from Charges for Current Services as noted below.
 - ◆ Net decrease of \$6.1 million primarily associated with the Epidemiology and Laboratory Enhancing Detection Expansion grant tied to the winding down of COVID related activities.
- ◆ Charges for Current Services—net decrease of \$0.6 million primarily due to administrative fees collected from Medi-Cal Administrative Activities and Targeted Case Management (MAA/TCM) participants projected in Intergovernmental Revenues noted above.
- ◆ Miscellaneous Revenues—net increase of \$2.6 million primarily in Opioid Settlement Framework funds to advance strategies aimed at reducing opioid misuse.
- ◆ Other Financing Sources—increase of \$0.2 million in Operating Transfer for Tobacco Securitization.
- ◆ General Purpose Revenue Allocation—increase of \$3.9 million associated with Salaries & Benefits and operating cost increases noted above.

Budget Changes and Operational Impact: 2024–25 to 2025–26

No significant changes.



Staffing by Program						
		Fiscal Year 2023-24 Adopted Budget			Fiscal Year 2024-25 Adopted Budget	Fiscal Year 2025-26 Approved Budget
Administration and Other Services		63.00			76.00	76.00
Bioterrorism		25.00			25.00	25.00
Infectious Disease Control		154.25			154.25	154.25
Surveillance		225.00			219.00	219.00
Prevention Services		148.00			152.00	152.00
California Childrens Services		148.75			148.75	148.75
Total		764.00			775.00	775.00

Budget by Program							
		Fiscal Year 2022-23 Actuals	Fiscal Year 2023-24 Adopted Budget	Fiscal Year 2023-24 Amended Budget	Fiscal Year 2023-24 Actuals	Fiscal Year 2024-25 Adopted Budget	Fiscal Year 2025-26 Approved Budget
Administration and Other Services	\$	18,489,121	\$ 11,928,312	\$ 22,634,143	\$ 21,330,632	\$ 22,634,810	\$ 23,342,673
Bioterrorism		6,910,749	7,468,501	7,612,252	7,032,666	8,386,124	8,589,138
Infectious Disease Control		42,964,871	46,415,302	49,992,398	47,980,279	47,798,495	48,908,201
Surveillance		71,572,377	85,118,878	144,284,318	50,367,451	79,634,656	81,026,410
Prevention Services		40,437,476	48,806,992	54,825,135	43,611,209	47,539,072	48,650,457
California Childrens Services		24,631,178	28,505,797	28,558,359	28,190,018	30,798,325	30,742,327
Regional Public Health Services		55,407	—	—	2,940	—	—
Medical Care Services Division		(8,058)	—	—	3,484	—	—
Total	\$	205,053,121	\$ 228,243,782	\$ 307,906,606	\$ 198,518,678	\$ 236,791,482	\$ 241,259,206



Budget by Categories of Expenditures						
	Fiscal Year 2022-23 Actuals	Fiscal Year 2023-24 Adopted Budget	Fiscal Year 2023-24 Amended Budget	Fiscal Year 2023-24 Actuals	Fiscal Year 2024-25 Adopted Budget	Fiscal Year 2025-26 Approved Budget
Salaries & Benefits	\$ 110,582,128	\$ 116,732,940	\$ 123,708,825	\$ 123,295,127	\$ 132,886,957	\$ 138,508,209
Services & Supplies	89,019,636	92,405,703	162,567,770	70,659,312	87,397,565	86,244,037
Other Charges	2,564,179	2,748,228	2,973,228	3,804,647	2,817,228	2,817,228
Capital Assets Software	—	1,199,000	1,199,000	—	—	—
Capital Assets Equipment	1,015,368	15,714,732	17,861,549	834,831	13,689,732	13,689,732
Expenditure Transfer & Reimbursements	(71,453)	(556,821)	(556,821)	(80,330)	—	—
Operating Transfers Out	1,943,264	—	153,055	5,089	—	—
Total	\$ 205,053,121	\$ 228,243,782	\$ 307,906,606	\$ 198,518,678	\$ 236,791,482	\$ 241,259,206

Budget by Categories of Revenues						
	Fiscal Year 2022-23 Actuals	Fiscal Year 2023-24 Adopted Budget	Fiscal Year 2023-24 Amended Budget	Fiscal Year 2023-24 Actuals	Fiscal Year 2024-25 Adopted Budget	Fiscal Year 2025-26 Approved Budget
Licenses Permits & Franchises	\$ 91,848	\$ 80,000	\$ 80,000	\$ 86,623	\$ 80,000	\$ 80,000
Revenue From Use of Money & Property	2,681,724	—	—	—	—	—
Intergovernmental Revenues	105,609,434	202,564,451	261,711,634	188,541,542	204,986,348	211,148,658
Charges For Current Services	4,877,336	3,703,410	3,147,810	3,128,508	3,063,410	3,013,410
Miscellaneous Revenues	471,442	1,359,061	1,359,061	1,898,039	4,019,907	4,125,321
Other Financing Sources	2,907,017	3,566,638	3,269,673	3,269,673	3,768,624	3,768,624
Use of Fund Balance	73,206,542	—	21,368,206	(15,375,930)	—	2,562,629
General Purpose Revenue Allocation	15,207,779	16,970,222	16,970,222	16,970,222	20,873,193	16,560,564
Total	\$ 205,053,121	\$ 228,243,782	\$ 307,906,606	\$ 198,518,678	\$ 236,791,482	\$ 241,259,206



Self-Sufficiency Services

Mission Statement

To make people’s lives healthier, safer and self-sufficient by delivering essential services in San Diego County.

Department Description

Self-Sufficiency Services (SSS) provides eligibility determination and case management services for State, federal and local public assistance to over one million residents to help low-income families and their children meet basic needs. Staff provides services throughout the county at eleven Family Resource Centers (FRC), two Community Resource Centers (CRC), and via phone or online at the Access Customer Service Call Center.

Self-Sufficiency Services ensures compliance with State and federal requirements by providing accurate and accessible data, program guidance, and enrollment information for frontline staff. SSS solicits engagement from the community through different venues such as outreach events and advisory boards.

SSS public assistance includes, but is not limited to:

- ◆ **Medi-Cal**—assists families in meeting their healthcare needs.
- ◆ **CalFresh**—helps eligible families buy food and improve their nutrition.
- ◆ **CalWORKs**—provides low-income families cash assistance to begin the path toward self-sufficiency.
- ◆ **Welfare to Work**—provides subsidized employment, financial support, and housing support to eligible families and pregnant or parenting teens.
- ◆ **County Medical Services**—provides medical care to uninsured indigent adult residents.
- ◆ **General Assistance or General Relief**—provides relief and support to indigent adults not supported by their own means, other public funds, or assistance programs.
- ◆ **Office of Military & Veterans Affairs**—supports the nation’s third-largest veteran population by connecting veterans and their families to benefits, counseling, and referral services.

To deliver these essential services, SSS has 2,846.00 staff years and a budget of \$812.2 million, which includes assistance aid payments for residents.



2023–24 Accomplishments

Equity

- **Health:** Reduce disparities and disproportionality and ensure access for all through a fully optimized health and social service delivery system and upstream strategies.
 - Increased to 96,818 the number of older adults that received CalFresh benefits through strategic partnerships with community-based organizations to reduce the number of food-insecure older adults.
- **Economic Opportunity:** Advance opportunities for economic growth and development to all individuals and the community.
 - Processed 97% (29,620 of 30,558) of CalWORKs applications timely, within 45 days, to help eligible families become more self-sufficient. This is a key metric required by the State and is a first step in assisting families towards self-sufficiency. Performance in Fiscal Year 2023-24 exceeded the State requirement of 90%.
 - Ensured 69,329 office, online, or phone interviews were conducted with veterans and their dependents with benefits counseling, information, and referral services.
 - Processed 14,549 compensation, pension claims, and college fee waivers to increase veterans and their dependents’ access to needed benefits.

Sustainability

- **Economy:** Align the County’s available resources with services to maintain fiscal stability and ensure long-term solvency.
 - Increased messaging to employees about sustainability program updates, successes, and opportunities for improvement through the bimonthly Eligibility Newsletter and various staff meetings to ensure two-way communication with staff.

- Economy: Create policies to reduce and eliminate poverty, promoting economic sustainability for all.
 - Long-Term: Sought ideas and recommendations to support legislative policies and collaborate with the Social Services Advisory Board (SSAB) and external stakeholders to enhance services that allow residents to transition to self-sufficiency. SSS worked with the SSAB to put several support letters together for State legislation that would help enhance services and program requirements for residents to better help them move toward self-sufficiency. SSS also collaborated with the SSAB to add additional BenefitsCal features available to customers who utilize the online customer facing application and case management portal to better enhance the department’s service delivery model.
 - Long-Term: Improved access to Self-Sufficiency Programs in collaboration with SSAB by implementing the thirty recommendations from the County’s assessment.
- Climate: Actively combat climate change through innovative or proven policies, green jobs, sustainable facility construction or maintenance, and hazard mitigation.
 - Short-Term: Continued to implement and support remote work environments, such as telework and virtual meetings, to reduce travel, emissions, and office footprints by reviewing office space to identify opportunities for shared locations and consolidation of office space.
 - Short-Term: Engaged in more community outreach, including using the Live Well Mobile Office and promoting online services to County residents, reducing the need for individuals to travel to County locations, reducing emissions, and increasing equitable access to services.
 - Mid-Term: In collaboration with the Department of General Services, designed new construction and major renovations following green policies wherever possible. Upcoming renovations and construction include the Live Well Center at Chula Vista and the new Ramona Community Resource Center. Renovations at Ramona CRC is scheduled to be completed in October 2024. The County is going for LEED gold certification at this new location, which includes reduced waste during the construction phase as well as building use and maintenance once the project is complete. Additionally, the plan is to have the building operate on zero net energy. The Chula Vista Live Well Center is scheduled to be completed in late 2024 and include ADA compliant enhancements on the property and within the building.
- Resiliency: Ensure the capability to respond and recover to the immediate needs for individuals, families, and the region.
 - Short-Term: Provided multiple ways to offer essential services, including electronic, telephonic, in person, and via outreach, to ensure equitable access to services. Worked

with community partners by creating flyers and sharing virtual announcements to increase public awareness of these efforts and upcoming outreach events.

- Processed 88% (115,305 of 131,247) of Medi-Cal applications timely, within 45 days, a key metric required by the State, and assisted families in meeting their health insurance needs.
- Processed 93% (225,254 of 242,072) of CalFresh applications timely, within 30 days, to help eligible families and individuals buy food and improve their nutrition. Performance in Fiscal Year 2023-24 exceeded the State requirement of 90%.

 Empower

- Workforce: Invest in our workforce and operations by providing support services and excellent customer service to ensure continuity of operations remains at its best.
 - Ensured 278,539 status reports and renewals were submitted electronically through BenefitsCal by enhancing customer service and promoting alternative pathways for individuals and families to access information about self-sufficiency programs and their ability to provide information electronically.
 - Issued the Customer Experience survey to all SSS customers and achieved a minimum average satisfaction rating of four (one to five scale). Developed and implemented an improvement plan in areas where the rating is lower than four.
 - Promoted a culture of respect and diversity among County staff as they served the public with excellence. Based on the feedback from the 2022 biennial employee engagement survey, engaged with employees and partnered with the employee representative groups to create action plans that will enhance engagement in the department and maintain and strengthen an engaged and empowered workforce.

2024–26 Objectives

 Equity

- Health: Reduce disparities and disproportionality and ensure access for all through a fully optimized health and social service delivery system and upstream strategies.
 - Maintain at 90,000 the number of older adults that receive CalFresh benefits through strategic partnerships with community-based organizations to reduce the number of food-insecure older adults.
- Economic Opportunity: Advance opportunities for economic growth and development to all individuals and the community.





- Process 90% (29,700 of 33,000) of CalWORKs applications timely, within 45 days, to help eligible families become more self-sufficient. This is a key metric required by the State and is a first step in assisting families towards self-sufficiency. State requirement is 90%.
- Provide 35,000 veteran benefits counseling interviews to veterans and their dependents to understand their needs and provide information on available assistance and referrals.



Sustainability

- Economy: Create policies to reduce and eliminate poverty, promoting economic sustainability for all.
 - Long-Term: Seek ideas and recommendations to support legislative policies and collaborate with the Social Services Advisory Board (SSAB) and external stakeholders to enhance services that allow residents to transition to self-sufficiency.
- Climate: Actively combat climate change through innovative or proven policies, green jobs, sustainable facility construction or maintenance, and hazard mitigation.
 - Short-Term: Continue to implement and support remote work environments, such as telework and virtual meetings, to reduce travel, emissions, and office footprints by reviewing office space to identify opportunities for shared locations and consolidation of office space.
 - Short-Term: Engage in more community outreach, including using the Live Well Mobile Office and promoting online services to County residents, reducing the need for individuals to travel to County locations, reducing emissions, and increasing equitable access to services.
 - Mid-Term: In collaboration with the Department of General Services, design new construction and major renovations following green policies wherever possible. Upcoming renovations and construction include the Live Well Center at Chula Vista and the new Ramona Community Resource Center.
- Resiliency: Ensure the capability to respond and recover to the immediate needs for individuals, families, and the region.
 - Short-Term: Provided multiple ways to offer essential services, including electronic, telephonic, in person, and via outreach, to ensure equitable access to services. Work

with community partners by creating flyers and sharing virtual announcements to increase public awareness of these efforts and upcoming outreach events.

- Process 90% (144,000 of 160,000) of Medi-Cal applications timely, within 45 days, a key metric required by the State and assist families in meeting their health insurance needs. State requirement is 90%.
- Process 90% (210,600 of 234,000) of CalFresh applications timely, within 30 days, to help eligible families and individuals buy food and improve their nutrition. State requirement is 90%.



Empower

- Workforce: Invest in our workforce and operations by providing support services and excellent customer service to ensure continuity of operations remains at its best.
 - Ensure 290,000 status reports and renewals are submitted electronically through BenefitsCal by enhancing customer service and promoting alternative pathways for individuals and families to access information about self-sufficiency programs and their ability to provide information electronically.
 - Issue the Customer Experience survey to all SSS customers and achieve a minimum average satisfaction rating of four (one to five scale). Develop and implement an improvement plan in areas where the rating is lower than four.
 - Promote an environment in which employees feel safe to challenge the way things are done, by addressing this concept at monthly unit meetings for all sites, discussing at all-staff meetings for all sites, and discussing data collected from the employee engagement survey at all site manager meetings as well as departmental monthly management meetings.

Related Links

For additional information on the programs offered by the Health and Human Services Agency, go to:

- ◆ <https://www.sandiegocounty.gov/content/sdc/hhsa.html>

For information about *Live Well San Diego*, go to:

- ◆ www.LiveWellSD.org




Performance Measures		2022-23 Actuals	2023-24 Adopted	2023-24 Actuals	2024-25 Adopted	2025-26 Approved
	Older Adults on CalFresh ¹	87,826	90,000	96,818	90,000	90,000
	Timely processing of CalWORKs applications ²	96% of 25,661	96% of 28,000	97% of 30,558	90% of 33,000	90% of 33,000
	Veterans and dependents interviews for benefits counseling and referral services ³	37,467	35,000	69,329	35,000	35,000
	Veterans compensation and benefits claims processed ⁴	10,931	10,100	14,549	N/A	N/A
	Timely processing of Medi-Cal applications ⁵	92% of 121,569	91% of 169,000	88% of 131,247	90% of 160,000	90% of 160,000
	Timely processing of CalFresh applications ⁶	96% of 244,184	92% of 190,000	93% of 242,072	90% of 234,000	90% of 234,000
	Status reports submitted through Benefits Cal ⁷	112,911	80,000	278,539	290,000	290,000

Table Notes

- ¹ In Fiscal Year 2023–24, the projected number of older adults on CalFresh was exceeded due to an aggressive CalFresh and Medi-Cal outreach campaign in partnership with Community-Based Organizations to increase awareness of CalFresh benefits. Campaign efforts to help spread CalFresh awareness included personalizing information for older adults and expanding the use of the Live Well Mobile Office in outreach and enrollment events across several communities and sites, including those serving veterans and older adults.
- ² In Fiscal Year 2023–24, CalWORKs applications increased due to economic conditions, which may impact the number of families seeking assistance. In Fiscal Year 2024–25, this target is being adjusted to align with State target due to budget constraints.
- ³ Effective July 1, 2022, the Office of Military and Veterans Affairs (OMVA) transferred to Self-Sufficiency Services (SSS) to enhance the alignment of the integrated functions of SSS and OMVA. In Fiscal Year 2023–24, the projected number of veterans and dependents interviews for benefits counseling and referral services was exceeded due to higher than anticipated demand.
- ⁴ Effective July 1, 2022, the Office of Military and Veterans Affairs (OMVA) transferred to Self-Sufficiency Services (SSS) to enhance the alignment of the integrated functions of SSS and OMVA. In Fiscal Year 2023-24, the projected number of compensation, pension claims, and college fee waivers processed exceeded the anticipated demand. In Fiscal Year 2024–25, this performance measure is being retired due to a shift in priorities.
- ⁵ In Fiscal Year 2023–24 due to the restarting of the annual renewal process, many recipients converted to Covered California or other insurance coverage. This contributed to the modest decline in applications received so far. However, on January 1, 2024, a new population of 26-49, regardless of citizenship status, will now be eligible, and is anticipated to result in a growth of applications received. Target is being adjusted to align with State target in Fiscal Year 2024–25 due to budget constraints.
- ⁶ In Fiscal Year 2023–24, the CalFresh caseload continued to experience record numbers of applications in net program enrollment, month after month for the past year, due to the economic downturn, higher unemployment rate, cost of living, and inflation. Target is being adjusted to align with State target in Fiscal Years 2024–26 due to budget constraints.
- ⁷ The anticipated number of status reports submitted through BenefitsCal was exceeded during Fiscal Year 2023–24 due to the conversion effective July 3, 2023, to a new statewide data system and web portal for customers that is much more user friendly, and users are taking advantage of the improvement and simplicity of the technology.

**Budget Changes and Operational Impact:
2023–24 to 2024–25**

Staffing

Increase of 1.00 staff year

- ◆ Increase of 1.00 staff year due to a transfer from Administra-

tive Support for operational needs.

- ◆ Additionally, staff were transferred among related programs within Self-Sufficiency Services to support operational needs.





Expenditures

Net increase of \$26.1 million

- ◆ Salaries & Benefits—increase of \$19.1 million for negotiated labor agreements and an elimination of adjustments for projected vacancies tied to a robust hiring strategy and recruitment efforts resulting in a zero net vacancy rate.
- ◆ Services & Supplies—net decrease of \$7.6 million.
 - ◆ Net decrease of \$9.8 million projected across various CalWORKs supportive services programs. In aligning to current year funding, there would be a projected total of \$9.8 million less available for programming supporting the CalWORKs Housing Support Program (HSP), Employment Services, Intensive Case Management, and Family Stabilization services. During the past few fiscal years, the CalWORKs HSP, Employment Services and Intensive Case Management Programs were able to greatly expand services and support to our customers due to a significant increase in funding. Services would be scaled back to align with the current reduction in funding and available resources. Amounts proposed do not reflect any additional adjustments that may be necessary depending on the outcome of the State budget proposals.
 - ◆ Decrease of \$3.5 million in prior year one-time costs primarily associated with the County's update of the Electronic Document Processing Platform (EDDP).
 - ◆ Decrease of \$2.8 million in the CalFresh Employment and Training (CFET) programs. Despite outreach efforts regarding available CalFresh Employment and Training services, the need for services has declined. This adjustment aligns the available resources to the service needs.
 - ◆ Decrease of \$2.5 million associated with adjusting one-time American Rescue Plan Act (ARPA) funding for the expansion of food distribution and nutrition incentive programs. Funds carried over from the prior year will be available to continue to spend in the budget year.
 - ◆ Decrease of \$1.1 million associated with operational savings tied to restructuring administrative support and aligning appropriations to projected need.
 - ◆ Increase of \$9.6 million to allocate current and increased facilities costs including rents and leases, security, and utilities.
 - ◆ Increase of \$1.2 million in the California Statewide Automated Welfare System (CalSAWS) County Share of Costs. The County of San Diego pays a portion of CalSAWS System and Administration costs to support the mandated statewide eligibility system.
 - ◆ Increase of \$0.8 million in costs associated with the DocuLynx staff to provide specialized imaging services to support Self Sufficiency Services Document Processing Center and the increase of correspondence received from customers.
- ◆ Increase of \$0.5 million to extend the ¡Más Fresco! Plus Produce Prescription Program.
- ◆ Other Charges—net increase of \$14.7 million.
 - ◆ Increase of \$11.4 million in General Relief (GR) benefit payments to align with increased cost and caseload trends.
 - ◆ Increase of \$6.6 million in Child Care Program Stage One (CC1) benefit payments to align with caseload trends and increased childcare provider costs.
 - ◆ Increase of \$0.8 million in Cash Assistance Program for Immigrants (CAPI) benefit payments to align with increased cost and caseload trends.
 - ◆ Increase of \$0.3 million in Diaper Assistance to align with caseload trends.
 - ◆ Decrease of \$3.2 million in CalWORKs Family Stabilization benefit payments to align with associated revenue.
 - ◆ Decrease of \$1.2 million primarily in CalWORKs Welfare to Work benefit payments to align with service needs.
- ◆ Expenditures Transfer & Reimbursements—net increase of \$0.1 million associated with \$0.5 million increase of one-time centralized General Fund support for the ¡Más Fresco! Plus Produce Prescription Program noted above, offset by a decrease of \$0.4 million prior-year one-time support for negotiated labor agreements. Since this is a transfer of expenditure, it has a net effect of a \$0.1 million decrease in appropriations.

Revenues

Net increase of \$26.1 million

- ◆ Fines, Forfeitures & Penalties—increase of \$0.1 million to align with the Physicians Emergency Services (PES) expenditures and anticipated revenue.
- ◆ Intergovernmental Revenues—net increase of \$4.2 million.
 - ◆ Net increase of \$13.6 million social services State and federal revenues to align with current year social services allocations supporting staffing and other operating costs driven by increases in CalFresh administrative revenues offset by decreases in CalWORKs and Medi-Cal funding.
 - ◆ Increase of \$6.6 million in State and federal revenues to align with estimated CalWORKs CC1 benefit payments.
 - ◆ Increase of \$2.4 million in available one-time Realignment revenues to support increase in Salaries & Benefits.
 - ◆ Increase of \$0.8 million in State revenue for CAPI.
 - ◆ Increase of \$0.3 million in federal revenue for Diaper Assistance.
 - ◆ Net decrease of \$17.0 million in social services State and federal revenues to align with funding allocations and the associated decrease in expenditures for CalWORKs employment and supportive service programs including Housing Support, Intensive Case Management, and Family Stabilization, and to align with anticipated expenditures in the CFET program referenced above.

SELF-SUFFICIENCY SERVICES

- ◆ Decrease of \$2.5 million in prior year one-time American Rescue Plan Act (ARPA) funding for food distribution and nutrition incentive programs.
- ◆ Use of Fund Balance—increase of \$2.3 million to bridge Medi-Cal Administrative funding.
- ◆ General Purpose Revenue Allocation—increase of \$19.5 million.
 - ◆ Increase of \$17.5 million to offset increase in General Relief.

- ◆ Increase of \$2.0 million to partially offset Salaries & Benefits and Services & Supplies increases noted above.

Budget Changes and Operational Impact: 2024–25 to 2025–26

Net increase of \$16.6 million in Salaries & Benefits primarily due to required retirement contributions and negotiated labor agreements.





Staffing by Program						
		Fiscal Year 2023-24 Adopted Budget			Fiscal Year 2024-25 Adopted Budget	Fiscal Year 2025-26 Approved Budget
Self-Sufficiency Administration		310.00			314.00	314.00
Regional Self-Sufficiency		2,513.00			2,508.00	2,508.00
Office of Military & Veterans Affairs		22.00			24.00	24.00
Total		2,845.00			2,846.00	2,846.00

Budget by Program						
	Fiscal Year 2022-23 Actuals	Fiscal Year 2023-24 Adopted Budget	Fiscal Year 2023-24 Amended Budget	Fiscal Year 2023-24 Actuals	Fiscal Year 2024-25 Adopted Budget	Fiscal Year 2025-26 Approved Budget
Health Care Policy Administration	\$ 2,276,956	\$ 5,583,457	\$ 4,869,061	\$ 4,943,804	\$ 5,372,457	\$ 5,372,457
Eligibility Operations Administration	139,594	—	—	2,356	—	—
Self-Sufficiency Administration	60,668,553	65,151,816	65,151,816	64,133,352	66,021,004	68,325,246
Assistance Payments	377,023,632	417,927,755	420,031,333	399,221,914	417,201,551	417,201,551
Regional Self-Sufficiency	278,838,390	292,544,753	307,961,009	317,672,802	318,752,478	332,847,375
Office of Military & Veterans Affairs	3,809,191	4,810,658	4,810,658	4,301,919	4,806,283	4,987,124
Total	\$ 722,756,316	\$ 786,018,439	\$ 802,823,877	\$ 790,276,146	\$ 812,153,773	\$ 828,733,753

Budget by Categories of Expenditures						
	Fiscal Year 2022-23 Actuals	Fiscal Year 2023-24 Adopted Budget	Fiscal Year 2023-24 Amended Budget	Fiscal Year 2023-24 Actuals	Fiscal Year 2024-25 Adopted Budget	Fiscal Year 2025-26 Approved Budget
Salaries & Benefits	\$ 277,480,253	\$ 300,473,524	\$ 307,031,556	\$ 308,677,129	\$ 319,587,860	\$ 336,167,840
Services & Supplies	167,961,566	162,047,772	165,391,494	163,231,312	154,433,141	153,933,141
Other Charges	277,155,490	323,927,062	323,927,062	312,556,926	338,632,772	338,632,772
Capital Assets Software	7,022	—	—	—	—	—
Capital Assets Equipment	29,238	—	274,479	315,300	—	—
Expenditure Transfer & Reimbursements	—	(429,919)	(429,919)	—	(500,000)	—
Operating Transfers Out	122,746	—	6,629,205	5,495,480	—	—
Total	\$ 722,756,316	\$ 786,018,439	\$ 802,823,877	\$ 790,276,146	\$ 812,153,773	\$ 828,733,753



Budget by Categories of Revenues						
	Fiscal Year 2022-23 Actuals	Fiscal Year 2023-24 Adopted Budget	Fiscal Year 2023-24 Amended Budget	Fiscal Year 2023-24 Actuals	Fiscal Year 2024-25 Adopted Budget	Fiscal Year 2025-26 Approved Budget
Fines, Forfeitures & Penalties	\$ 3,270,341	\$ 3,000,000	\$ 3,000,000	\$ 3,232,738	\$ 3,050,000	\$ 3,050,000
Revenue From Use of Money & Property	1,291,433	248,605	248,605	642,846	248,605	248,605
Intergovernmental Revenues	659,874,017	723,583,238	736,781,270	727,163,109	727,834,474	751,277,515
Charges For Current Services	(64,846)	170,000	170,000	129,783	170,000	170,000
Miscellaneous Revenues	1,478,839	1,792,677	1,792,677	1,826,908	1,792,677	1,792,677
Other Financing Sources	170,971	1,000,000	285,604	285,604	1,000,000	1,000,000
Use of Fund Balance	10,679,662	—	4,321,803	771,238	2,290,000	—
General Purpose Revenue Allocation	46,055,899	56,223,919	56,223,919	56,223,919	75,768,017	71,194,956
Total	\$ 722,756,316	\$ 786,018,439	\$ 802,823,877	\$ 790,276,146	\$ 812,153,773	\$ 828,733,753

