



County of San Diego

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June 13, 2024

Mental Health Services Oversight & Accountability Commission (MHSOAC)
Attn: MHSA Plan Review
1812 9th Street
Sacramento, CA 95811

Dear Assistant Deputy Director:

The County of San Diego, Health and Human Services Agency, Behavioral Health Services (BHS) submits the following Amendment to our Mental Health Services Act (MHSA) Three Year Program and Expenditure Plan for Fiscal Years 2023-24 through 2025-26. BHS is requesting approval for a one-time transfer of Mental Health Services Act (MHSA) Community Services and Supports (CSS) funds totaling \$10.0 million to the Capital Facilities and Technological Needs (CFTN) component, through an amendment to the current MHSA Three Year Plan.

The \$10.0 million of MHSA funding will be utilized for the development and construction of the East Region Crisis Stabilization Unit (CSU). The total estimated project cost is \$28 million. BHS will pursue other funding sources for the remaining costs associated with this project. If other funding is not received, a future request to shift additional MHSA funds to support this project may be requested through a future Board action.

As required by statute, a public review and comment period and subsequent public hearing are required amendments to the MHSA Plan.

- From March 5, 2024 through April 4, 2024, a draft amendment was sent to stakeholders and posted for public comment on the BHS website at [Mental Health Services Act \(MHSA\) \(sandiegocounty.gov\)](https://www.sandiegocounty.gov/mental-health-services-act).
- On April 4, 2024, a public hearing took place at the County’s Behavioral Health Advisory Board (BHAB) meeting in which they voted to approve the amendment to be submitted to the County Board of Supervisors.
- On June 4, 2024, the amendment was presented to the County Board of Supervisors in which they voted to approve the amendment.
- The transfer of funds will be reflected in FY 2023-24 within the current MHSA Three-Year Plan, as required by statute.

We are submitting the Amendment packet as required by statute. Please feel free to contact me with any questions.

Thank you,

LUKE BERGMANN, Ph.D., Director
Behavioral Health Services

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**Amendment to Mental Health Services Act
(MHSA) Three-Year Plan for Fiscal Years
2023-24 through 2025-26**

Request Community Services and Supports (CSS) Funds
Transfer to Capital Facilities and Technological Needs (CFTN)

Summary

The County of San Diego (County) Health and Human Services Agency (HHSA), Behavioral Health Services (BHS) is seeking approval for a one-time transfer of Community Services and Supports (CSS) funds in the amount of \$10.0 million to the Capital Facilities and Technological Needs (CFTN) component for the development and construction of the East Region Crisis Stabilization Unit (CSU). The total cost for the project is estimated at about \$28 million. BHS will pursue and potentially leverage other funding sources for the remaining costs associated with this project, which may include Opioid Settlement Funds, grant funds, and others, if available. If other funding is not received, a future request to shift additional MHSA funds to support this project may be requested. The amendment shifting \$10.0 million of funding from the CSS component to the CFTN component will be reflected in Fiscal Year (FY) 2023-24 budget within the MHSA Three-Year Program and Expenditure Plan for Fiscal Years 2023-24 through 2025-26. This request is being made to address the unmet need for behavioral health crisis services in the East Region.

Background

The MHSA was passed by California voters in November 2004 which imposes a one-percent income tax on personal annual income in excess of \$1.0 million. The vision of the MHSA is to build a system in which mental health services are more accessible and effective, utilization of out-of-home and institutional care is reduced, and stigma toward those with serious mental illness (SMI) or serious emotional disturbance (SED) is eliminated.

The MHSA provides critical resources to help our most vulnerable populations by supporting County mental health programs and monitors progress toward statewide goals for children, transition-age youth, adults, older adults, and families. MHSA funding supports programs to help with prevention and early intervention needs, along with infrastructure, technology, and training to effectively support the public mental health system.

In accordance with MHSA, each of these five components Community Services and Supports (CSS), Prevention and Early Intervention (PEI), Innovation (INN), Workforce Education and Training (WET) and Capital Facilities and Technological Needs (CFTN) are funded with a designated amount of MHSA funding. CSS provides intensive treatment and transition services for people who experience serious and persistent mental illness or severe emotional disturbances or who are at risk of SMI/SED. The California Code of Regulations § 3420.10 allows for the transfer of excess funds CSS account to Prudent Reserve, CFTN account and WET account. This ability to reallocate

funds is critical to the sustainability CFTN since it received only a one-time allocation at the time of approval.

Under the leadership of the San Diego County Board of Supervisors (Board), behavioral health care in San Diego County is in the midst of a transformation from a system disproportionately driven by crises, to one with an emphasis on prevention and continuous, coordinated care. To support the expansion of the behavioral health continuum of care, the Board continues to make strategic investments toward directly constructing or partnering with developers to expand behavioral health facilities. The scope of investment and development spans the complete continuum of behavioral health care services. The East Region CSU represents a key component of this system transformation, supporting the County's vision for a regional, community-focused behavioral health care model.

CSUs are critical to the continuum of care, reducing utilization of hospital emergency departments and inpatient admissions, providing short-term psychiatric stabilization, and promoting connections to community-based and residential programs. CSUs provide ongoing assessments and immediate stabilization services, treatment, medication evaluation and management, linkages to other services, and hospitalization, if necessary, in a recovery-focused environment to individuals who are experiencing a behavioral health crisis. CSUs operate 24 hours per day, 365 days per year and provide comprehensive care through multidisciplinary teams that include psychiatrists, nurse practitioners, registered nurses, therapists, and social workers, who support referrals to community-based services and discharge planning. Currently, the County supports community-based and hospital-based CSUs where individuals can receive services for up to 24 hours.

CSUs serve as an alternative to hospitalization or to adults stepping down from acute inpatient care and may also include non-clinical models that are peer-led. CSUs may also divert individuals in crisis from unnecessary hospitalization and allows for timely law enforcement drop off to support law enforcement personnel in transitioning back to their work within the community. Treatment services, including psychiatry, nursing, clinical and peer services are provided in a community-based residential setting by a multidisciplinary team. Individuals are stabilized and connected to community supports and ongoing care.

Within the East Region of San Diego County, residents who are Medi-Cal eligible often experience a lack of access to behavioral health crisis care due the lack of available facilities. Individuals experiencing a behavioral health crisis in the East Region must travel far to access crisis stabilization and acute inpatient care. The East Region CSU will remove barriers to care by providing supporting access to residents in closer proximity to where they live.

The new CSU will be responsive to the unmet need for crisis services in the region, where some zip codes have experienced rates of mental health emergency calls in excess of 400 encounters per 10,000 population annually, filling a critical gap in the care continuum. The lack of local behavioral health crisis services disproportionately impacts San Diego County's Black and Hispanic clients with serious mental illness. Demographic data collected by County HHSA, Public Health Services and BHS indicate

that, while individuals self-identifying as Black and Hispanic represent only 5.9% and 27% of the East Region, they account for 14% and 30% of crisis and emergency service utilization among East County residents. Providing regional access to crisis stabilization services will allow Black and Hispanic residents within the East Region to access the care they need more quickly and within their own communities.

When an individual is experiencing a behavioral health crisis, time is critical to mitigating the risk of symptom escalation and the potential need for inpatient care. By providing regional access to crisis stabilization, this project will allow Black and Native American residents within the East Region to access the care they need more quickly and within their own communities. The ultimate goal is to reduce the need for inpatient care for these clients and be well-positioned to connect them to community resources that will improve outcomes and overall well-being.

Community Program Planning

The Community Program Planning (CPP) process provides stakeholders with the opportunity to identify priorities, provide feedback, and make recommendations on how MHPSA funds will be invested to best meet the needs of county residents. Throughout the year, BHS engages in open dialogue with the Behavioral Health Advisory Board, System of Care Councils, various stakeholders and stakeholder-led councils, organizations, and individuals in various settings to determine priorities, solicit feedback, and make recommendations for the utilization of MHPSA funds.

BHS has created infrastructure to conduct ongoing community engagement through a collaboration between BHS and University of California, San Diego to develop the Community Experience Partnership (CEP) as part of the MHPSA Community Planning Process. The purpose of the partnership is to engage stakeholders to review and provide input regarding the allocation of a surplus of MHPSA funds currently held under the Community Services and Supports (CSS) plan. BHS solicits feedback from the community inclusive of all stakeholders regarding proposed changes in this Amendment.

BHS and its community engagement partners have proactively engaged a vast array of stakeholders in East San Diego County. Initial engagement with stakeholders began with law enforcement, first responders, and city officials from East San Diego County who were engaged early in the development of this project and have been a key stakeholder group championing the East Region Crisis Stabilization Unit and Recovery Bridge Center (CSU/RBC). Engagement with city officials included individual discussions with City of El Cajon Councilmembers, the Mayor, the Deputy Mayor, the City Manager, and the Chief of Police. Elected City officials in neighboring communities to El Cajon have also been engaged through in-person presentations to rendering their support for this project.

Public engagement and community outreach efforts have been broad in scope aimed at an expansive reach of East Region residents, community leaders, community-based

organizations, service providers including those serving Tribal communities in East County. Information has been shared about this project with stakeholders through various approaches including a public virtual information session that provided an overview of the project and services, which was attended by community residents and City of El Cajon officials. This was followed by an in-person informational event at the project site during the same week, hosted by County staff, and allowed residents in closest proximity to the project site to engage County staff in a dialogue that addressed their questions, concerns, and provided accurate information about the services to be offered. Both events were advertised on the County's East Region CSU/RBC project website and through flyers distributed to households and businesses through canvassing efforts that spanned a three-block radius around the project site. When onsite, County staff were continuously responsive to residents who have approached the project site with inquiries.

Additionally, strategic mapping of East Region stakeholders, informed by community partners, led to email outreach to several stakeholder groups whereby information on the project was shared along with the offer to have BHS staff present on the project. Presentations have been provided both virtually and in-person at existing community stakeholder meetings. As of November 2023, outreach and engagement efforts have reached a total of 813 stakeholders in the East Region. There has been overwhelming support by community groups, service providers, law enforcement, and city officials which has been garnered through the robust engagement efforts by BHS and the community engagement contractor. Community outreach and engagement efforts will continue throughout the development of the project. For more information on this project and the other six CSUs that are currently operational, visit the [County of San Diego CSU webpage](https://www.sandiegocounty.gov/content/sdc/hhsa/programs/bhs/csu.html). (<https://www.sandiegocounty.gov/content/sdc/hhsa/programs/bhs/csu.html>)

Review And Public Comment Period

A draft of the amendment plan was posted for a 30-day public comment period on the BHS website from March 5 through April 4, 2024, for public review and comments. The amendment plan was sent to BHS stakeholders, including the San Diego Mental Health Coalition, Mental Health Contractors Association, and hospital partners for review and comment.

The County's Behavioral Health Advisory Board (BHAB) is comprised of consumers, family members, individuals in recovery, and community members with lived experience and knowledge of the behavioral health system who represent each of the five County Supervisorial districts. BHAB held a public hearing on April 4, 2024, at the conclusion of the 30-day public review and comment period. Stakeholder comments on the Amendment plan are included in the Appendices. This plan will be presented to the County Board of Supervisors on June 4, 2024, and for final adoption and approval. The final board letter is included in the appendix.

Appendix A
FY 2023-26 Three-Year Mental Health Services Act Expenditure Plan
Funding Summary

	Community Services and Supports	Prevention and Early Intervention	Innovation	Workforce Education and Training	Capital Facilities and Technological Needs	Prudent Reserve	Totals
A. Estimated FY 2023/24 Funding							
1. Estimated Unspent Funds from Prior Fiscal Years	\$ 21,906,833	\$ 36,257,631	\$ 37,481,256	\$ 652,384	\$ -	\$ 33,478,186	\$ 129,776,290
2. Estimated New FY 2023/24 Funding (1)	\$ 240,065,060	\$ 60,016,265	\$ 15,793,754	\$ -		\$ -	\$ 315,875,079
3. Transfers in FY 2023/24 (2)	\$ (16,900,000)	\$ -	\$ -	\$ 6,900,000	\$ 10,000,000	\$ -	\$ -
4. Access Local Prudent Reserve in FY 2023/24							\$ -
5. Estimated Available Funding for FY 2023/24	\$ 245,071,893	\$ 96,273,896	\$ 53,275,010	\$ 7,552,384	\$ 10,000,000	\$ 33,478,186	\$ 445,651,369
B. Estimated FY 2023/24 MHSA Expenditures	\$ 228,266,016	\$ 38,271,033	\$ 1,522,280	\$ 6,879,317	\$ 1,000,000		\$ 275,938,646
C. Estimated FY 2023/24 Unspent Fund Balance							
	\$ 16,805,876	\$ 58,002,863	\$ 51,752,730	\$ 673,067	\$ 9,000,000	\$ 33,478,186	\$ 169,712,723
1. Estimated Unspent Funds from Prior Fiscal Years							
2. Estimated New FY 2024/25 Funding (1)	\$ 161,164,907	\$ 40,291,227	\$ 10,602,954	\$ -	\$ -	\$ -	\$ 212,059,088
3. Transfers in FY 2024/25 (2)	\$ (7,000,000)	\$ -	\$ -	\$ 7,000,000	\$ -	\$ -	\$ -
4. Access Local Prudent Reserve in FY 2024/25							\$ -
5. Estimated Available Funding for FY 2024/25	\$ 170,970,783	\$ 98,294,090	\$ 62,355,685	\$ 7,673,067	\$ 9,000,000	\$ 33,478,186	\$ 381,771,811
D. Estimated FY 2024/25 MHSA Expenditures	\$ 239,628,451	\$ 39,461,818	\$ -	\$ 7,536,121	\$ 9,000,000		\$ 295,626,390
E. Estimated FY 2024/25 Unspent Fund Balance*	\$ (68,657,668)	\$ 58,832,272	\$ 62,355,685	\$ 136,946	\$ -	\$ 33,478,186	\$ 86,145,421

*Above figures reflect projected receipts and the proposed budget. Figures are not reflective of actual expenditures, which have historically resulted in savings due to maximized FFP drawdown. Additional FFP revenue is anticipated to become available through the implementation of Medi-Cal Transformation, which began 7/1/23. Though not reflected within FFP estimates above, it is likely that payment reform will generate additional revenue that is likely to offset use of MHSA CSS funding.

H. Estimated Local Prudent Reserve Balance	Total	Prudent Reserve Detail	
		CSS	PEI
1. Estimated Local Prudent Reserve Balance on June 30, 2023	\$ 33,478,186	26,712,351	\$ 6,765,835
2. Contributions to the Local Prudent Reserve in FY 2023/24	0	0	0
3. Distributions from the Local Prudent Reserve in FY 2023/24	0	0	0
4. Estimated Local Prudent Reserve Balance on June 30, 2024	\$ 33,478,186	26,712,351	\$ 6,765,835
5. Contributions to the Local Prudent Reserve in FY 2024/25	0	0	0
6. Distributions from the Local Prudent Reserve in FY 2024/25	0	0	0
7. Estimated Local Prudent Reserve Balance on June 30, 2025	\$ 33,478,186	\$ 26,712,351	\$ 6,765,835

Assumptions
<ul style="list-style-type: none"> A reassessment of the Prudent Reserve is required every five years under Senate Bill (SB) 192, Chapter 328 of the Statutes of 2018, and the Department of Health Care Services (DHCS). The last update occurred in FY 2019/20; therefore, the next adjustment is in FY 2024/25.
Highlights
<ul style="list-style-type: none"> San Diego County has reverted \$0 dollars since the inception of the MHSA, illustrating the County's efficient management of revenue streams.

(1) Balances projected utilize State consultant revenue estimates as of January 2024.

(2) Pursuant to Welfare and Institutions Code Section 5892(b), Counties may use a portion of their CSS funds for WET, CFTN, and the Local Prudent Reserve. The total amount of CSS funding used for this purpose shall not exceed 20% of the total average amount of funds allocated to that County for the previous five years.

Appendix A
FY 2023-24 Through FY 2025-26 Three-Year Mental Health Services Act Expenditure Plan
Community Services and Supports (CSS) Component Worksheet

County: San Diego

Fiscal Year 2023/24					
A	B	C	D	E	F
Estimated Total Mental Health Expenditures	Estimated CSS Funding	Estimated Medi-Cal FFP	Estimated 1991 Realignment	Estimated Behavioral Health Subaccount	Estimated Other Funding

FSP Programs

CY-FSP Full Service Partnerships for Children & Youth					
Children's Full Service Partnership (FSP)	\$ 3,232,630	\$ 2,454,455	\$ 493,455		\$ 284,720
Children's School Based Full Service Partnership (FSP)	\$ 47,220,949	\$ 11,079,730	\$ 31,804,686		\$ 4,336,532
Family Therapy	\$ 1,086,895	\$ 1,086,895			
Incredible Years	\$ 932,131	\$ 280,541	\$ 651,590		
Therapeutic Behavioral Services (TBS)	\$ 4,907,812	\$ 3,995,660	\$ 912,152		
Wraparound Services (WRAP) - Child Welfare Services (CWS)	\$ 7,025,223	\$ 2,321,563	\$ 2,811,214		\$ 1,892,446
TAOA-FSP Full Service Partnerships for Children & Youth					
Adult Residential Treatment	\$ 997,779	\$ 997,779			
Assisted Outpatient Treatment (AOT)	\$ 1,441,696	\$ 886,896	\$ 554,800		
Behavioral Health Court	\$ 2,899,406	\$ 1,808,733	\$ 590,673		\$ 500,000
CARE Court Services	\$ 2,017,600	\$ 2,017,600			
County of San Diego - Institutional Case Management (ICM)	\$ 692,787	\$ 483,965	\$ 12,822		\$ 196,000
County of San Diego - Peer Support Services	\$ 255,512	\$ 255,512			
County of San Diego - Probation	\$ 605,280	\$ 244,604			\$ 360,676
County of San Diego - Strengths Based Case Management (SBCM)	\$ 788,949	\$ 788,949			
Crisis Residential Services - North Inland	\$ 1,770,267	\$ 1,152,971			\$ 617,296
Full Service Partnership (FSP) / Assertive Community Treatment (ACT)	\$ 63,363,126	\$ 35,503,781	\$ 22,755,664		\$ 5,103,681
Full Service Partnership (FSP) / Assertive Community Treatment (ACT) - Housing	\$ 16,776,627	\$ 15,763,550	\$ 570,359		\$ 442,717
Full Service Partnership (FSP) / Assertive Community Treatment (ACT) - Step Down from Acute	\$ 2,030,706	\$ 1,417,711	\$ 612,996		
Full Service Partnership (FSP) / Assertive Community Treatment (ACT) - Step Down from IMD	\$ 2,127,623	\$ 1,271,907	\$ 855,716		
Full Service Partnership (FSP) / Assertive Community Treatment (ACT) - Transitional Residential Program	\$ 3,861,028	\$ 3,751,028			\$ 110,000
North Coastal Mental Health Center and Vista Clinic	\$ 338,152	\$ 338,152			
Short-Term Mental Health Intensive Case Management - High Utilizers	\$ 751,005	\$ 517,896	\$ 233,109		
Strengths Based Case Management (SBCM)	\$ 1,493,763	\$ 1,493,763			
Total Full Service Partnership (FSP) Programs	\$ 166,616,946	\$ 89,913,642	\$ 62,859,236		\$ 13,844,068

Non-FSP Programs

All-OE Outreach & Engagement for All Ages					
Behavioral Health Services - Victims of Trauma and Torture	\$ 469,447	\$ 469,447			
Behavioral Health Services and Primary Care Integration Services	\$ 1,562,089	\$ 1,562,089			
Behavioral Health Services for Deaf & Hard of Hearing	\$ 368,212	\$ 352,830	\$ 15,382		
Clubhouse - Deaf or Hard of Hearing	\$ 439,975	\$ 439,975			
Psychiatric and Addiction Consultation and Family Support Services	\$ 1,303,994	\$ 1,303,994			
All-SD System Development for All Ages					
Chaldean and Middle-Eastern Social Services	\$ 625,335	\$ 288,630	\$ 336,705		
Mobile Crisis Response Team (MCRT)	\$ 8,776,721	\$ 5,426,641	\$ 1,675,040		\$ 1,675,040
Psychiatric Emergency Response Team (PERT)	\$ 10,754,362	\$ 7,006,627			\$ 3,747,735
CY-OE Outreach & Engagement for Children & Youth					
Parent Partner Services	\$ 352,890	\$ 352,890			
CY-SD System Development for Children & Youth					

Appendix A
FY 2023-24 Through FY 2025-26 Three-Year Mental Health Services Act Expenditure Plan
Community Services and Supports (CSS) Component Worksheet

County: San Diego

	Fiscal Year 2023/24					
	A	B	C	D	E	F
	Estimated Total Mental Health Expenditures	Estimated CSS Funding	Estimated Medi- Cal FFP	Estimated 1991 Realignment	Estimated Behavioral Health Subaccount	Estimated Other Funding
Administrative Services Organization (ASO) - TERM	\$ 2,853,200	\$ 1,615,876	\$ 1,237,324			
Adolescent Day Rehabilitation	\$ 100,880	\$ 60,880			\$ 40,000	
BridgeWays Program	\$ 564,928	\$ 171,709	\$ 169,219		\$ 224,000	
Commercially Sexually Exploited Children (CSEC)	\$ 1,250,912	\$ 89,286	\$ 661,626		\$ 500,000	
County of San Diego - Juvenile Forensic Services	\$ 1,109,680	\$ 1,109,680				
Crisis Action and Connection	\$ 2,464,716	\$ 1,612,087	\$ 338,765		\$ 513,864	
Emergency Screening Unit (ESU)	\$ 5,897,179	\$ 3,980,732			\$ 1,916,448	
Incredible Families	\$ 1,961,329	\$ 937,859	\$ 231,784		\$ 791,686	
Medication Clinic	\$ 1,552,543	\$ 259,893	\$ 1,292,650			
Mental Health Services - For Lesbian, Gay, Bisexual, Transgender or Questioning (LGBTQ)	\$ 1,957,072	\$ 1,003,500	\$ 353,572		\$ 600,000	
Peripartum Program	\$ 509,608	\$ 502,957	\$ 6,651			
Placement Stabilization Services	\$ 2,789,332	\$ 922,243	\$ 1,867,089			
Rural Integrated Behavioral Health and Primary Care Services	\$ 141,810	\$ 91,810			\$ 50,000	
Supplemental Security Income (SSI) Advocacy Services	\$ 302,640	\$ 182,640			\$ 120,000	
Telemedicine	\$ 21,300	\$ 21,300				
TAOA-OE Outreach & Engagement for Ages 18-60+						
Countywide Homeless Outreach Program	\$ 2,492,544	\$ 1,998,384			\$ 494,160	
TAOA-SD System Development for Ages 18-60+						
Augmented Services Program (ASP)	\$ 12,802,322	\$ 11,152,322			\$ 1,650,000	
Behavioral Health Assessors	\$ 691,028	\$ 387,028			\$ 304,000	
Bio-Psychosocial Rehabilitation (BPSR)	\$ 53,508,189	\$ 19,064,847	\$ 27,080,075		\$ 7,363,267	
Clubhouse	\$ 5,083,826	\$ 4,867,589	\$ 216,237			
Consumer Advocacy	\$ 1,266,704	\$ 817,721			\$ 448,984	
Crisis Stabilization - East Region						
Crisis Stabilization - North Coastal Oceanside	\$ 7,666,880	\$ 2,888,578	\$ 4,778,302			
Crisis Stabilization - North Coastal Vista	\$ 7,631,363	\$ 1,013,839	\$ 6,617,524			
Crisis Stabilization - North Inland	\$ 10,245,258	\$ 2,330,244	\$ 6,680,872		\$ 1,234,142	
Crisis Stabilization - South	\$ 7,628,401	\$ 5,060,295	\$ 1,130,435		\$ 1,437,672	
Faith Based Services	\$ 1,464,037	\$ 1,464,037				
Family Education	\$ 1,045,769	\$ 1,045,769				
In-Home Outreach Teams (IHOT)	\$ 4,288,276	\$ 4,288,276				
Inpatient and Residential Advocacy Services	\$ 723,541	\$ 683,041	\$ 40,500			
Institutional Case Management (ICM) - Older Adults	\$ 1,118,526	\$ 784,053	\$ 133,265		\$ 201,208	
Justice System Discharge Planning	\$ 1,149,403	\$ 779,403			\$ 370,000	
Mental Health Advocacy Services	\$ 446,644	\$ 446,644				
North Coastal Mental Health Center and Vista Clinic	\$ 3,386,828	\$ 764,738	\$ 2,622,090			
North Inland Mental Health Center	\$ 3,388,778	\$ 710,088	\$ 2,678,690			
No Place Like Home BHS	\$ 525,520	\$ 317,146			\$ 208,374	
No Place Like Home Dept Pub Works Envir Svcs Unit	\$ 27,742	\$ 3,742			\$ 24,000	
No Place Like Home Housing & Community Dev Svcs	\$ 1,209,708	\$ 340,864			\$ 868,844	
Peer Assisted Support Services	\$ 900,853	\$ 900,853				
Public Defender - Behavioral Health Assessor	\$ 242,112	\$ 146,112			\$ 96,000	
San Diego Employment Solutions	\$ 1,990,288	\$ 1,535,119			\$ 455,169	

Appendix A
FY 2023-24 Through FY 2025-26 Three-Year Mental Health Services Act Expenditure Plan
Community Services and Supports (CSS) Component Worksheet

County: San Diego

	Fiscal Year 2023/24					
	A	B	C	D	E	F
	Estimated Total Mental Health Expenditures	Estimated CSS Funding	Estimated Medi- Cal FFP	Estimated 1991 Realignment	Estimated Behavioral Health Subaccount	Estimated Other Funding
San Diego Housing Commission	\$ 121,056	\$ 109,056			\$ 12,000	
Short Term Acute Residential Treatment (START)	\$ 14,310,876	\$ 9,396,374	\$ 2,137,251		\$ 2,777,251	
Short-Term Bridge Housing	\$ 1,519,434	\$ 1,519,434				
Supplemental Security Income (SSI) Advocacy Services	\$ 504,400	\$ 504,400				
Telemedicine	\$ 469,895	\$ 335,146	\$ 109,749		\$ 25,000	
Tenant Peer Support Services	\$ 3,309,433	\$ 3,157,831			\$ 151,602	
Total Non-Full Service Partnership (FSP) Programs	\$ 199,289,790	\$ 108,578,547	\$ 62,410,799		\$ 28,300,445	
CSS Administration	\$ 29,773,828	\$ 29,773,828				
CSS MHSA Housing Program Assigned Funds						
Total CSS Program Estimated Expenditures	\$ 395,680,565	\$ 228,266,016	\$ 125,270,035		\$ 42,144,514	
FSP Programs as Percent of Total	73.0%					

Appendix A
FY 2023-24 Through FY 2025-26 Three-Year Mental Health Services Act Expenditure Plan
Community Services and Supports (CSS) Component Worksheet

County: San Diego

Fiscal Year 2024/25					
A	B	C	D	E	F
Estimated Total Mental Health Expenditures	Estimated CSS Funding	Estimated Medi-Cal FFP	Estimated 1991 Realignment	Estimated Behavioral Health Subaccount	Estimated Other Funding

FSP Programs

CY-FSP Full Service Partnerships for Children & Youth					
Children's Full Service Partnership (FSP)	\$ 3,232,630	\$ 2,445,874	\$ 502,036		\$ 284,720
Children's School Based Full Service Partnership (FSP)	\$ 48,389,650	\$ 9,598,383	\$ 34,454,735		\$ 4,336,532
Family Therapy	\$ 1,086,895	\$ 1,086,895			
Incredible Years	\$ 932,131	\$ 245,237	\$ 686,895		
Therapeutic Behavioral Services (TBS)	\$ 4,907,812	\$ 3,919,685	\$ 988,127		
Wraparound Services (WRAP) - Child Welfare Services (CWS)	\$ 7,869,590	\$ 2,555,128	\$ 3,422,016		\$ 1,892,446
TAOA-FSP Full Service Partnerships for Children & Youth					
Adult Residential Treatment	\$ 997,779	\$ 997,779			
Assisted Outpatient Treatment (AOT)	\$ 1,441,696	\$ 840,686	\$ 601,010		
Behavioral Health Court	\$ 2,985,383	\$ 1,831,850	\$ 653,533		\$ 500,000
CARE Court Services	\$ 2,017,600	\$ 2,017,600			
County of San Diego - Institutional Case Management (ICM)	\$ 692,787	\$ 482,897	\$ 13,891		\$ 196,000
County of San Diego - Peer Support Services	\$ 255,512	\$ 255,512			
County of San Diego - Probation	\$ 605,280	\$ 244,604			\$ 360,676
County of San Diego - Strengths Based Case Management (SBCM)	\$ 788,949	\$ 788,949			
Crisis Residential Services - North Inland	\$ 1,770,267	\$ 1,152,971			\$ 617,296
Full Service Partnership (FSP) / Assertive Community Treatment (ACT)	\$ 67,748,015	\$ 37,001,800	\$ 25,642,535		\$ 5,103,681
Full Service Partnership (FSP) / Assertive Community Treatment (ACT) - Housing	\$ 19,919,520	\$ 18,607,929	\$ 868,873		\$ 442,717
Full Service Partnership (FSP) / Assertive Community Treatment (ACT) - Step Down from Acute	\$ 2,454,794	\$ 1,727,684	\$ 727,110		
Full Service Partnership (FSP) / Assertive Community Treatment (ACT) - Step Down from IMD	\$ 2,546,463	\$ 1,557,194	\$ 989,269		
Full Service Partnership (FSP) / Assertive Community Treatment (ACT) - Transitional Residential Program	\$ 3,861,028	\$ 3,751,028			\$ 110,000
North Coastal Mental Health Center and Vista Clinic	\$ 338,152	\$ 338,152			
Short-Term Mental Health Intensive Case Management - High Utilizers	\$ 751,005	\$ 508,534	\$ 242,471		
Strengths Based Case Management (SBCM)	\$ 1,493,763	\$ 1,493,763			
Total Full Service Partnership (FSP) Programs	\$ 177,086,703	\$ 93,450,134	\$ 69,792,501		\$ 13,844,068

Non-FSP Programs

All-OE Outreach & Engagement for All Ages					
Behavioral Health Services - Victims of Trauma and Torture	\$ 469,447	\$ 469,447			
Behavioral Health Services and Primary Care Integration Services	\$ 1,562,089	\$ 1,562,089			
Behavioral Health Services for Deaf & Hard of Hearing	\$ 498,916	\$ 440,793	\$ 58,123		
Clubhouse - Deaf or Hard of Hearing	\$ 466,171	\$ 466,171			
Psychiatric and Addiction Consultation and Family Support Services	\$ 1,344,419	\$ 1,344,419			
All-SD System Development for All Ages					
Chaldean and Middle-Eastern Social Services	\$ 625,335	\$ 264,078	\$ 361,256		
Mobile Crisis Response Team (MCRT)	\$ 13,893,190	\$ 8,007,192	\$ 2,942,999		\$ 2,942,999
Psychiatric Emergency Response Team (PERT)	\$ 10,919,337	\$ 7,171,602			\$ 3,747,735
CY-OE Outreach & Engagement for Children & Youth					
Parent Partner Services	\$ 667,713	\$ 667,713			
CY-SD System Development for Children & Youth					

Appendix A
FY 2023-24 Through FY 2025-26 Three-Year Mental Health Services Act Expenditure Plan
Community Services and Supports (CSS) Component Worksheet

County: San Diego

	Fiscal Year 2024/25					
	A	B	C	D	E	F
	Estimated Total Mental Health Expenditures	Estimated CSS Funding	Estimated Medi- Cal FFP	Estimated 1991 Realignment	Estimated Behavioral Health Subaccount	Estimated Other Funding
Administrative Services Organization (ASO) - TERM	\$ 2,853,200	\$ 1,615,876	\$ 1,237,324			
Adolescent Day Rehabilitation	\$ 100,880	\$ 60,880			\$ 40,000	
BridgeWays Program	\$ 564,928	\$ 157,615	\$ 183,313		\$ 224,000	
Commercially Sexually Exploited Children (CSEC)	\$ 1,250,912	\$ 47,170	\$ 703,742		\$ 500,000	
County of San Diego - Juvenile Forensic Services	\$ 1,109,680	\$ 1,109,680				
Crisis Action and Connection	\$ 2,541,122	\$ 1,629,466	\$ 397,792		\$ 513,864	
Emergency Screening Unit (ESU)	\$ 5,897,179	\$ 3,980,732			\$ 1,916,448	
Incredible Families	\$ 2,027,626	\$ 974,992	\$ 260,949		\$ 791,686	
Medication Clinic	\$ 1,552,543	\$ 193,887	\$ 1,358,656			
Mental Health Services - For Lesbian, Gay, Bisexual, Transgender or Questioning (LGBTQ)	\$ 1,957,072	\$ 997,870	\$ 359,202		\$ 600,000	
Peripartum Program	\$ 1,019,215	\$ 1,005,913	\$ 13,302			
Placement Stabilization Services	\$ 2,838,587	\$ 806,245	\$ 2,032,341			
Rural Integrated Behavioral Health and Primary Care Services	\$ 146,551	\$ 96,551			\$ 50,000	
Supplemental Security Income (SSI) Advocacy Services	\$ 302,640	\$ 182,640			\$ 120,000	
Telemedicine	\$ 21,300	\$ 21,300				
TAOA-OE Outreach & Engagement for Ages 18-60+						
Countywide Homeless Outreach Program	\$ 2,492,544	\$ 1,998,384			\$ 494,160	
TAOA-SD System Development for Ages 18-60+						
Augmented Services Program (ASP)	\$ 12,802,322	\$ 11,152,322			\$ 1,650,000	
Behavioral Health Assessors	\$ 691,028	\$ 387,028			\$ 304,000	
Bio-Psychosocial Rehabilitation (BPSR)	\$ 55,537,726	\$ 18,585,505	\$ 29,588,954		\$ 7,363,267	
Clubhouse	\$ 5,299,980	\$ 5,065,733	\$ 234,247			
Consumer Advocacy	\$ 1,266,704	\$ 817,721			\$ 448,984	
Crisis Stabilization - East Region	\$ 5,422,823	\$ 1,197,272	\$ 3,272,983		\$ 952,568	
Crisis Stabilization - North Coastal Oceanside	\$ 7,666,880	\$ 2,881,693	\$ 4,785,187			
Crisis Stabilization - North Coastal Vista	\$ 7,865,275	\$ 563,387	\$ 7,301,888			
Crisis Stabilization - North Inland	\$ 10,245,258	\$ 2,124,584	\$ 6,886,532		\$ 1,234,142	
Crisis Stabilization - South	\$ 7,628,401	\$ 5,060,295	\$ 1,130,435		\$ 1,437,672	
Faith Based Services	\$ 2,575,402	\$ 2,575,402				
Family Education	\$ 1,045,769	\$ 1,045,769				
In-Home Outreach Teams (IHOT)	\$ 4,288,276	\$ 4,288,276				
Inpatient and Residential Advocacy Services	\$ 738,673	\$ 694,123	\$ 44,550			
Institutional Case Management (ICM) - Older Adults	\$ 1,163,289	\$ 819,054	\$ 143,026		\$ 201,208	
Justice System Discharge Planning	\$ 1,255,474	\$ 885,474			\$ 370,000	
Mental Health Advocacy Services	\$ 446,644	\$ 446,644				
North Coastal Mental Health Center and Vista Clinic	\$ 3,390,767	\$ 687,960	\$ 2,702,807			
North Inland Mental Health Center	\$ 3,388,778	\$ 486,974	\$ 2,901,804			
No Place Like Home BHS	\$ 525,520	\$ 317,146			\$ 208,374	
No Place Like Home Dept Pub Works Envir Svcs Unit	\$ 27,742	\$ 3,742			\$ 24,000	
No Place Like Home Housing & Community Dev Svcs	\$ 1,209,708	\$ 340,864			\$ 868,844	
Peer Assisted Support Services	\$ 1,150,805	\$ 1,150,805				
Public Defender - Behavioral Health Assessor	\$ 242,112	\$ 146,112			\$ 96,000	
San Diego Employment Solutions	\$ 3,363,747	\$ 2,908,578			\$ 455,169	

Appendix A
FY 2023-24 Through FY 2025-26 Three-Year Mental Health Services Act Expenditure Plan
Community Services and Supports (CSS) Component Worksheet

County: San Diego

	Fiscal Year 2024/25					
	A	B	C	D	E	F
	Estimated Total Mental Health Expenditures	Estimated CSS Funding	Estimated Medi- Cal FFP	Estimated 1991 Realignment	Estimated Behavioral Health Subaccount	Estimated Other Funding
San Diego Housing Commission	\$ 121,056	\$ 109,056			\$ 12,000	
Short Term Acute Residential Treatment (START)	\$ 14,310,876	\$ 9,396,374	\$ 2,137,251		\$ 2,777,251	
Short-Term Bridge Housing	\$ 1,519,434	\$ 1,519,434				
Supplemental Security Income (SSI) Advocacy Services	\$ 504,400	\$ 504,400				
Telemedicine	\$ 469,895	\$ 330,168	\$ 114,727		\$ 25,000	
Tenant Peer Support Services	\$ 3,309,433	\$ 3,157,831			\$ 151,602	
Total Non-Full Service Partnership (FSP) Programs	\$ 216,596,794	\$ 114,922,433	\$ 71,153,389		\$ 30,520,972	
CSS Administration	\$ 31,255,885	\$ 31,255,885				
CSS MHSA Housing Program Assigned Funds						
Total CSS Program Estimated Expenditures	\$ 424,939,382	\$ 239,628,451	\$ 140,945,890		\$ 44,365,041	
FSP Programs as Percent of Total	73.9%					

Appendix A
FY 2023-24 Through FY 2025-26 Three-Year Mental Health Services Act Expenditure Plan
Prevention and Early Intervention (PEI) Component Worksheet

County: San Diego

Fiscal Year 2023/24						
A	B	C	D	E	F	PEI Category
Estimated Total Mental Health Expenditures	Estimated PEI Funding	Estimated Medi-Cal FFP	Estimated 1991 Realignment	Estimated Behavioral Health Subaccount	Estimated Other Funding	

PEI Programs

1. CO-03 Integrated Peer & Family Engagement	\$ 3,158,045	\$ 2,908,045			\$ 250,000		P
2. DV-03 Alliance for Community Empowerment	\$ 907,920	\$ 907,920					P
3. DV-04 Community Services for Families - Child Welfare Services	\$ 504,408	\$ 504,408					P
4. EC-01 Positive Parenting Program (Triple P)	\$ 1,395,098	\$ 955,098			\$ 440,000		P
5. FB-01 Early Intervention for Prevention of Psychosis	\$ 1,790,620	\$ 139,878	\$ 940,742		\$ 710,000		EI
6. NA-01 Native American Prevention and Early Intervention	\$ 2,127,686	\$ 1,411,480			\$ 716,206		P
7. OA-01 Community-Based Services for Older Adults	\$ 574,162	\$ 346,500			\$ 227,661		P
8. OA-02 Home Based Services - For Older Adults	\$ 583,652	\$ 583,652					P
9. OA-06 Caregiver Support for Alzheimer & Dementia Patients	\$ 1,090,271	\$ 1,090,271					P
10. PS-01 Education and Support Lines							P / S&D / P
ACEs Prevention Parenting Program for Fathers	\$ 1,606,514	\$ 1,606,514					
Breaking Down Barriers	\$ 441,653	\$ 441,653					
Clubhouse Services Program	\$ 504,400	\$ 504,400					
Come Play Outside	\$ 504,400	\$ 504,400					
County of San Diego - Community Health & Engagement	\$ 877,350	\$ 877,350					
Family Peer Support Program	\$ 200,307	\$ 200,307					
Mental Health First Aid	\$ 623,862	\$ 623,862					
Recuperative Services and Support Program for Transitional Age Youth	\$ 846,935	\$ 427,161			\$ 419,774		
Suicide Prevention & Stigma Reduction Media Campaign - It's Up To Us	\$ 5,320,444	\$ 5,320,444					
Suicide Prevention Action Plan	\$ 717,663	\$ 717,663					
Supported Employment Technical Consultant Services	\$ 219,143	\$ 219,143					
11. RC-01 Rural Integrated Behavioral Health and Primary Care Services	\$ 1,723,141	\$ 1,723,141					P / EI
12. RE-01 Independent Living Association (ILA)	\$ 302,640	\$ 302,640					O
13. SA-01 School Based Prevention and Early Intervention	\$ 6,716,875	\$ 6,716,875					P / EI
14. SA-02 School Based Suicide Prevention & Early Intervention	\$ 2,478,136	\$ 2,478,136					SP
15. VF-01 Veterans & Family Outreach Education	\$ 1,420,390	\$ 1,420,390					A
<p>PEI Categories</p> <p>A - Access to Treatment EI - Early Intervention O - Outreach P - Prevention S&D - Stigma & Discrimination SP - Suicide Prevention</p> <p><i>Individual programs may serve more than one area</i></p>							
PEI Administration	\$ 4,939,700	\$ 4,939,700					
PEI Assigned Funds	\$ 400,000	\$ 400,000					
Total PEI Program Estimated Expenditures	\$ 41,975,416	\$ 38,271,033	\$ 940,742		\$ 2,763,641		

Appendix A
FY 2023-24 Through FY 2025-26 Three-Year Mental Health Services Act Expenditure Plan
Prevention and Early Intervention (PEI) Component Worksheet

County: San Diego

Fiscal Year 2024/25						
A	B	C	D	E	F	PEI Category
Estimated Total Mental Health Expenditures	Estimated PEI Funding	Estimated Medi-Cal FFP	Estimated 1991 Realignment	Estimated Behavioral Health Subaccount	Estimated Other Funding	

PEI Programs

1. CO-03 Integrated Peer & Family Engagement	\$ 3,158,045	\$ 2,908,045			\$ 250,000	P
2. DV-03 Alliance for Community Empowerment	\$ 907,920	\$ 907,920				P
3. DV-04 Community Services for Families - Child Welfare Services	\$ 504,408	\$ 504,408				P
4. EC-01 Positive Parenting Program (Triple P)	\$ 1,536,434	\$ 1,096,434			\$ 440,000	P
5. FB-01 Early Intervention for Prevention of Psychosis	\$ 1,790,620	\$ 61,523	\$ 1,019,097		\$ 710,000	EI
6. NA-01 Native American Prevention and Early Intervention	\$ 2,186,106	\$ 1,467,004			\$ 719,102	P
7. OA-01 Community-Based Services for Older Adults	\$ 574,162	\$ 346,500			\$ 227,661	P
8. OA-02 Home Based Services - For Older Adults	\$ 583,652	\$ 583,652				P
9. OA-06 Caregiver Support for Alzheimer & Dementia Patients	\$ 1,090,271	\$ 1,090,271				P
10. PS-01 Education and Support Lines						P / S&D / P
ACEs Prevention Parenting Program for Fathers	\$ 2,057,952	\$ 2,057,952				
Breaking Down Barriers	\$ 441,653	\$ 441,653				
Clubhouse Services Program	\$ 504,400	\$ 504,400				
Come Play Outside	\$ 504,400	\$ 504,400				
County of San Diego - Community Health & Engagement	\$ 910,955	\$ 910,955				
Family Peer Support Program	\$ 200,307	\$ 200,307				
Mental Health First Aid	\$ 633,950	\$ 633,950				
Recuperative Services and Support Program for Transitional Age Youth	\$ 891,686	\$ 471,912			\$ 419,774	
Suicide Prevention & Stigma Reduction Media Campaign - It's Up To Us	\$ 5,320,444	\$ 5,320,444				
Suicide Prevention Action Plan	\$ 728,212	\$ 728,212				
Supported Employment Technical Consultant Services	\$ 367,128	\$ 367,128				
11. RC-01 Rural Integrated Behavioral Health and Primary Care Services	\$ 1,846,829	\$ 1,846,829				P / EI
12. RE-01 Independent Living Association (ILA)	\$ 302,640	\$ 302,640				O
13. SA-01 School Based Prevention and Early Intervention	\$ 6,716,875	\$ 6,716,875				P / EI
14. SA-02 School Based Suicide Prevention & Early Intervention	\$ 2,530,381	\$ 2,530,381				SP
15. VF-01 Veterans & Family Outreach Education	\$ 1,463,002	\$ 1,463,002				A
<p>PEI Categories</p> <p>A - Access to Treatment</p> <p>EI - Early Intervention</p> <p>O - Outreach</p> <p>P - Prevention</p> <p>S&D - Stigma & Discrimination</p> <p>SP - Suicide Prevention</p> <p><i>Individual programs may serve more than one area</i></p>						
PEI Administration	\$ 5,095,020	\$ 5,095,020				
PEI Assigned Funds	\$ 400,000	\$ 400,000				
Total PEI Program Estimated Expenditures	\$ 43,247,452	\$ 39,461,818	\$ 1,019,097		\$ 2,766,537	

Appendix A
FY 2023-24 Through FY 2025-26 Three-Year Mental Health Services Act Expenditure Plan
Innovations (INN) Component Worksheet

County: San Diego

Fiscal Year 2023/24					
A	B	C	D	E	F
Estimated Total Mental Health Expenditures	Estimated INN Funding *	Estimated Medi-Cal FFP	Estimated 1991 Realignment	Estimated Behavioral Health Subaccount	Estimated Other Funding

INN Programs

1. INN-18 Peripartum Program	\$ 563,251	\$ 557,809	\$ 5,442			
2. INN-19 Telemental Health	\$ 1,132,972	\$ 564,287	\$ 568,685			
3. INN-24 Early Psychosis and Learning Health Care Network	\$ 201,626	\$ 201,626				
* Up to 5% for evaluation is embedded in Estimated INN Funding						

INN Administration	\$ 198,558	\$ 198,558				
Total INN Program Estimated Expenditures	\$ 2,096,407	\$ 1,522,280	\$ 574,127			

Fiscal Year 2024/25					
A	B	C	D	E	F
Estimated Total Mental Health Expenditures	Estimated INN Funding *	Estimated Medi-Cal FFP	Estimated 1991 Realignment	Estimated Behavioral Health Subaccount	Estimated Other Funding

INN Programs

1. INN-18 Peripartum Program						
2. INN-19 Telemental Health						
3. INN-24 Early Psychosis and Learning Health Care Network						
* Up to 5% for evaluation is embedded in Estimated INN Funding						

INN Administration						
Total INN Program Estimated Expenditures	\$ -	\$ -	\$ -			

Appendix A
FY 2023-24 Through FY 2025-26 Three-Year Mental Health Services Act Expenditure Plan
Workforce, Education and Training (WET) Component Worksheet

County: San Diego

Fiscal Year 2023/24					
A	B	C	D	E	F
Estimated Total Mental Health Expenditures	Estimated WET Funding	Estimated Medi-Cal FFP	Estimated 1991 Realignment	Estimated Behavioral Health Subaccount	Estimated Other Funding

WET Programs

1. WET-02 Training & Technical Assistance	\$ 2,793,677	\$ 2,793,677				
2. WET-03 Mental Health Career Pathway Programs	\$ 100,880	\$ 100,880				
3. WET-04 Residency and Internship Program	\$ 3,984,760	\$ 3,984,760				

WET Administration	\$ -	\$ -				
Total WET Program Estimated Expenditures	\$ 6,879,317	\$ 6,879,317				

Fiscal Year 2024/25					
A	B	C	D	E	F
Estimated Total Mental Health Expenditures	Estimated WET Funding	Estimated Medi-Cal FFP	Estimated 1991 Realignment	Estimated Behavioral Health Subaccount	Estimated Other Funding

WET Programs

1. WET-02 Training & Technical Assistance	\$ 3,046,961	\$ 3,046,961				
2. WET-03 Mental Health Career Pathway Programs	\$ 100,880	\$ 100,880				
3. WET-04 Residency and Internship Program	\$ 4,388,280	\$ 4,388,280				

WET Administration	\$ -	\$ -				
Total WET Program Estimated Expenditures	\$ 7,536,121	\$ 7,536,121				

Appendix A
FY 2023-24 Through FY 2025-26 Three-Year Mental Health Services Act Expenditure Plan
Capital Facilities/Technological Needs (CFTN) Component Worksheet

County: San Diego

Fiscal Year 2023/24					
A	B	C	D	E	F
Estimated Total Mental Health Expenditures	Estimated CFTN Funding	Estimated Medi-Cal FFP	Estimated 1991 Realignment	Estimated Behavioral Health Subaccount	Estimated Other Funding

CFTN Programs - Capital Facilities Projects					
1. CF-2 North County Mental Health Facility					
2. CF-4 North Inland Crisis Residential Facility					
3. CF-5 Emergency Screening Unit (ESU) Facility					
4. CF-6 East Region Crisis Stabilization Unit (CSU)	\$ 1,000,000	\$ 1,000,000			
CFTN Programs - Technological Needs Projects					
1. SD-3 Personal Health Record					
2. SD-5 Telemedicine Expansion					
CFTN Administration	\$ -	\$ -			
Total CFTN Program Estimated Expenditures	\$ 1,000,000	\$ 1,000,000			

Fiscal Year 2024/25					
A	B	C	D	E	F
Estimated Total Mental Health Expenditures	Estimated CFTN Funding	Estimated Medi-Cal FFP	Estimated 1991 Realignment	Estimated Behavioral Health Subaccount	Estimated Other Funding

CFTN Programs - Capital Facilities Projects					
1. CF-2 North County Mental Health Facility					
2. CF-4 North Inland Crisis Residential Facility					
3. CF-5 Emergency Screening Unit (ESU) Facility					
4. CF-6 East Region Crisis Stabilization Unit (CSU)	\$ 9,000,000	\$ 9,000,000			
CFTN Programs - Technological Needs Projects					
1. SD-3 Personal Health Record					
2. SD-5 Telemedicine Expansion					
CFTN Administration	\$ -	\$ -			
Total CFTN Program Estimated Expenditures	\$ 9,000,000	\$ 9,000,000			

MHSA COUNTY FISCAL ACCOUNTABILITY CERTIFICATION¹

County/City: County of San Diego

- Three-Year Program and Expenditure Plan
- Annual Update
- Annual Revenue and Expenditure Report

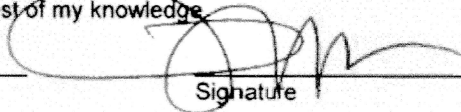
<p align="center">Local Mental Health Director</p> <p>Name: Luke Bermann, Ph. D.</p> <p>Telephone Number: 619-563-2766</p> <p>E-mail: Luke.Bergmann@sdcounty.ca.gov</p>	<p align="center">County Auditor-Controller / City Financial Officer</p> <p>Name: Julie Bjerke, CPA</p> <p>Telephone Number: 858-694-2216</p> <p>E-mail: JulieL.Bjerke@sdcounty.ca.gov</p>
<p>Local Mental Health Mailing Address:</p> <p>3255 Camino Del Rio South, San Diego, CA 92108</p>	

I hereby certify that the Three-Year Program and Expenditure Plan, Annual Update or Annual Revenue and Expenditure Report is true and correct and that the County has complied with all fiscal accountability requirements as required by law or as directed by the State Department of Health Care Services and the Mental Health Services Oversight and Accountability Commission, and that all expenditures are consistent with the requirements of the Mental Health Services Act (MHSA), including Welfare and Institutions Code (WIC) sections 5813.5, 5830, 5840, 5847, 5891, and 5892; and Title 9 of the California Code of Regulations sections 3400 and 3410. I further certify that all expenditures are consistent with an approved plan or update and that MHSA funds will only be used for programs specified in the Mental Health Services Act. Other than funds placed in a reserve in accordance with an approved plan, any funds allocated to a county which are not spent for their authorized purpose within the time period specified in WIC section 5892(h), shall revert to the state to be deposited into the fund and available for counties in future years.

I declare under penalty of perjury under the laws of this state that the foregoing and the attached update/revenue and expenditure report is true and correct to the best of my knowledge.

Luke Bergmann, Ph. D.

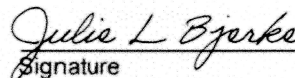
Local Mental Health Director (PRINT)


01/13/24
 Signature Date

I hereby certify that for the fiscal year ended June 30, 2023, the County/City has maintained an interest-bearing local Mental Health Services (MHS) Fund (WIC 5892(f)); and that the County's/City's financial statements are audited annually by an independent auditor and the most recent audit report is dated November 21, 2023 for the fiscal year ended June 30, 2023. I further certify that for the fiscal year ended June 30, 2023, the State MHSA distributions were recorded as revenues in the local MHS Fund; that County/City MHSA expenditures and transfers out were appropriated by the Board of Supervisors and recorded in compliance with such appropriations; and that the County/City has complied with WIC section 5891(a), in that local MHS funds may not be loaned to a county general fund or any other county fund.

I declare under penalty of perjury under the laws of this state that the foregoing, and if there is a revenue and expenditure report attached, is true and correct to the best of my knowledge.

Julie Bjerke
County Auditor Controller / City Financial Officer (PRINT)


6/18/2024
 Signature Date

¹ Welfare and Institutions Code Sections 5847(b)(9) and 5899(a)
Three-Year Program and Expenditure Plan, Annual Update, and RER Certification (07/22/2013)

MHSA Amendment Stakeholder Comments
30-Day Public Notice Feedback Summary (3/05/24 - 4/04/24)

Date	Source (VM, E-mail, Smartsheet)	Comment	Response
3/5/24	Smartsheet	The Hospital Association of San Diego & Imperial Counties greatly appreciates the County's ongoing commitment to build out services lines, especially critically needed services in East County. Crisis Stabilization Units are a vital component of the continuum of care and help divert people from emergency departments to other community based resources. CSUs will also play an important role in the implementation of SB 43. We look forward to continuing to work with the county and other key stakeholders in working to meet the needs of our most vulnerable residents.	noted
4/3/24	Email	The City of El Cajon (City) does NOT support the transfer of funds for the development and construction of the East County Crisis Stabilization Unit and Sobering Center (project) unless the project construction design is modified to be consistent with the El Cajon General Plan. The City's General Plan seeks to establish buildings at the sidewalk edge in order to facilitate a pedestrian friendly environment. We think the proposed project will negatively impact the surrounding pedestrian environment. This design standard is found in almost any community's downtown plans and is not out of the ordinary. I ask that the funding for this project be paused and that County DGS revisit the project design with El Cajon staff to create an infill project that is consistent with the El Cajon General Plan.	noted



County of San Diego

ERIC C. MCDONALD, MD, MPH, FACEP
INTERIM AGENCY DIRECTOR

HEALTH AND HUMAN SERVICES AGENCY
BEHAVIORAL HEALTH SERVICES
3255 CAMINO DEL RIO SOUTH, MAIL STOP P-531
SAN DIEGO, CA 92108-3806
(619) 563-2700 • FAX (619) 563-2705

LUKE BERGMANN, Ph.D.
DIRECTOR, BEHAVIORAL HEALTH SERVICES

**NOTICE OF INITIATION OF 30-DAY PUBLIC REVIEW AND COMMENT PERIOD
RE: AMENDMENT TO MENTAL HEALTH SERVICES ACT THREE YEAR PLAN
FOR FYS 2023-24 THROUGH 2025-26**

Dear Community Members and Stakeholders:

The County of San Diego is holding a 30-day public review and comment period for the Mental Health Services Act (MHSA) Amendment to the Three-Year Plan for Fiscal Years 2023-24 through 2025-26. The review period begins March 5, 2024, and ends April 4, 2024, when final comments will be heard at the April Behavioral Health Advisory Board (BHAB) meeting. The MHSA Amendment will go before the San Diego County Board of Supervisors on May 21, 2024, subject to change, for review and approval, as required by the Mental Health Services Oversight & Accountability Commission (MHSOAC).

The Amendment seeks to shift \$10.0 million of Community Services and Supports (CSS) component funding to the Capital Facilities and Technological Needs (CFTN) component in Fiscal Year (FY) 2023-24, to support the development and construction of the East Region Crisis Stabilization Unit.

The following information is located on the Behavioral Health Services website:

Amendment to the MHSA Three-Year Plan for Fys 2023-24 through 2025-26:

https://www.sandiegocounty.gov/content/sdc/hhsa/programs/bhs/mental_health_services_act/mhsa_cosd_docs.html

BHAB Meeting Information:

http://www.sandiegocounty.gov/content/sdc/hhsa/programs/bhs/mental_health_services_act/bhab.html

Please review the draft MHSA Amendment and send your comments, suggestions and/or questions to either the MHSA voice message line or email address below or use the Public Comment link below:

[Mental Health Services Act Amendment Public Comment Form](#)

Mental Health Services Act Comment/Question Line:

Phone: 619-584-5063 / Toll-Free: 888-977-6763

Email: MHSProp63.HHSA@sdcounty.ca.gov

Thank You,

LUKE BERGMANN,
Ph.D., Director

Digitally signed by LUKE
BERGMANN, Ph.D., Director
Date: 2024.02.29 10:16:12 -0800

LUKE BERGMANN, Ph.D., Director
Behavioral Health Services

**COUNTY OF SAN DIEGO
BOARD OF SUPERVISORS
TUESDAY, JUNE 04, 2024**

MINUTE ORDER NO. 16

SUBJECT: RECEIVE AND APPROVE THE MENTAL HEALTH SERVICES ACT ANNUAL UPDATE FOR FISCAL YEAR 2024-25 (DISTRICTS: ALL)

OVERVIEW

The Mental Health Services Act (MHSA) provides ongoing dedicated funding to counties to address a broad continuum of mental health service needs, including prevention, early intervention, system development, technology, and training to effectively support the public mental health system. MHSA programs provide services for children and their families, transition age youth, adults, and older adults, with an emphasis on individuals who are unserved or underserved. MHSA is comprised of five components, including 1) Community Services and Supports; 2) Prevention and Early Intervention; 3) Innovation; 4) Workforce Education and Training; and 5) Capital Facilities and Technological Needs.

County of San Diego, Behavioral Health Services is in the second year of implementing the MHSA Three-Year Program and Expenditure Plan for Fiscal Years (FY) 2023-24 through 2025-26 (Three-Year Plan), previously approved by the San Diego County Board of Supervisors (Board) on June 13, 2023 (22). The MHSA FY 2024-25 Annual Update (Annual Update) includes budget and programmatic changes to the Three-Year Plan. The Annual Update includes MHSA funding of \$299.7 million in FY 2024-25. It also includes \$400,000, dedicated to the California Mental Health Services Authority, to continue participation in statewide prevention and early intervention campaigns and local initiatives. A majority of services outlined in the Annual Update are a continuation of programs previously approved by the Board in the Three-Year Plan. As mandated by the MHSA, the Three-Year Plan and Annual Update require Board approval prior to submission to the California Mental Health Services Oversight and Accountability Commission (MHSOAC) and the Department of Health Care Services (DHCS).

Today's action requests the Board receive and approve the Annual Update and to submit to the MHSOAC and the DHCS, if approved. Today's action also supports the County vision of a just, sustainable, and resilient future for all, specifically for communities and populations in San Diego County that have been historically left behind, as well as our ongoing commitment to the regional *Live Well San Diego* vision of healthy, safe, and thriving communities.

RECOMMENDATION(S)

CHIEF ADMINISTRATIVE OFFICER

Receive and approve the Mental Health Services Act Annual Update for Fiscal Year 2024-25 and authorize the Agency Director, Health and Human Services Agency, to submit the Annual Update to the California Mental Health Services Oversight and Accountability Commission and the Department of Health Care Services.

EQUITY IMPACT STATEMENT

The vision of the Mental Health Services Act (MHSA) is to build a system in which mental health services are equitable and accessible to all individuals and families within the region who are in need. According to 2021 data from the California Department of Healthcare Access and Information, Black or African American residents experienced higher emergency department rates of serious mental illness,

self-inflicted injury/suicide attempt, and substance related disorders, compared to others. Additionally, according to the California Health Interview Survey, conducted by University of California Los Angeles in 2022, nine percent of San Diegans reported experiencing serious psychological distress in the past month. However, higher percentages of serious psychological distress were reported by residents who live below 200% of the federal poverty level, had a history of incarceration, or identified as Black or African American, Hispanic/Latino, Asian, or multiracial, compared to others.

MHSA funding provides individuals, who are experiencing serious mental illness, serious emotional disturbance, or have co-occurring substance use disorders, including those with opioid use disorder, with timely access to quality behavioral health care that is responsive to their cultural and linguistic needs. County of San Diego (County), Behavioral Health Services (BHS) serves a diverse range of vulnerable, unserved, and underserved low-income populations who include, but are not limited to, all age groups, individuals experiencing homelessness, LGBTQ+, Black or African American, Indigenous, and People of Color. Behavioral health services offered through County-operated and contracted programs address the social determinants of health by being accessible, capable of meeting the needs of a diverse population, and with the intent to equitably distribute services to those most in need.

In support of these efforts, BHS utilizes a population health approach, along with evidence-based practices and robust data analysis to identify needs and design services that are impactful, equitable, and yield meaningful outcomes for clients. This includes facilitating community engagement forums to solicit input from the community, stakeholders, consumers, family members, community-based providers, and healthcare organizations through formal and informal convenings, along with cross-collaboration with other County departments and community partners.

SUSTAINABILITY IMPACT STATEMENT

Mental Health Services Act (MHSA) programs support the County of San Diego (County) Sustainability Goal #1 to engage the community in meaningful ways and seek stakeholder input to foster inclusive and sustainable communities. County, Behavioral Health Services engages the community through the Community Planning Process, advisory boards, and stakeholder engagements to collaborate and encourage community and diverse range of stakeholders to partner and participate in decisions that impact their lives and communities.

Additionally, MHSA programs support the County Sustainability Goal #2 to provide just and equitable access through the regional distribution of services by allowing chronically unserved and underserved communities and individuals with behavioral health conditions to receive care near where they live. Services are provided at County locations, as well as through community-based providers to ensure care is geographically dispersed throughout the region.

FISCAL IMPACT

Funds for this request are included in the Fiscal Year (FY) 2024-26 CAO Recommended Operational Plan for the Health and Human Services Agency. If approved, this request will result in estimated Mental Health Services Act (MHSA) costs and revenues of approximately \$299.7 million in FY 2024-25, inclusive of \$400,000 dedicated to the California Mental Health Services Authority, to continue participation in statewide prevention and early intervention campaigns and local initiatives. The funding source is MHSA. There will be no change in net General Fund cost and no additional staff years.

BUSINESS IMPACT STATEMENT

N/A

ACTION:

ON MOTION of Supervisor Vargas, seconded by Supervisor Anderson, the Board of Supervisors took action as recommended.

AYES: Vargas, Anderson, Lawson-Remer, Montgomery Steppe, Desmond

State of California)
County of San Diego) §

I hereby certify that the foregoing is a full, true and correct copy of the Original entered in the Minutes of the Board of Supervisors.

ANDREW POTTER
Clerk of the Board of Supervisors



Signed
by Andrew Potter

May 21, 2024 Board Item: Mental Health Services Act Amendment to the FY 2023-26 Three-Year Plan



Behavioral Health Advisory Board Meeting

April 4, 2024

Proposed MHSA Amendment



BACKGROUND

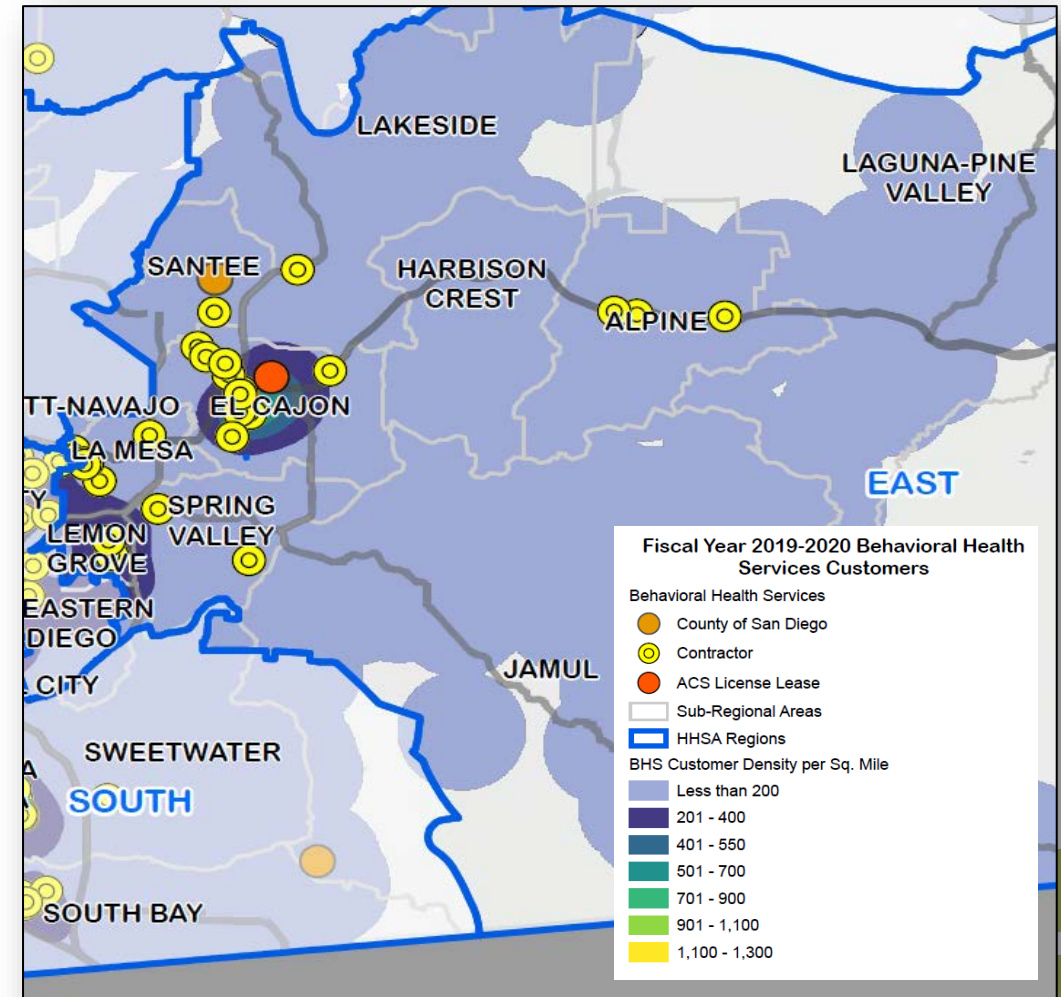
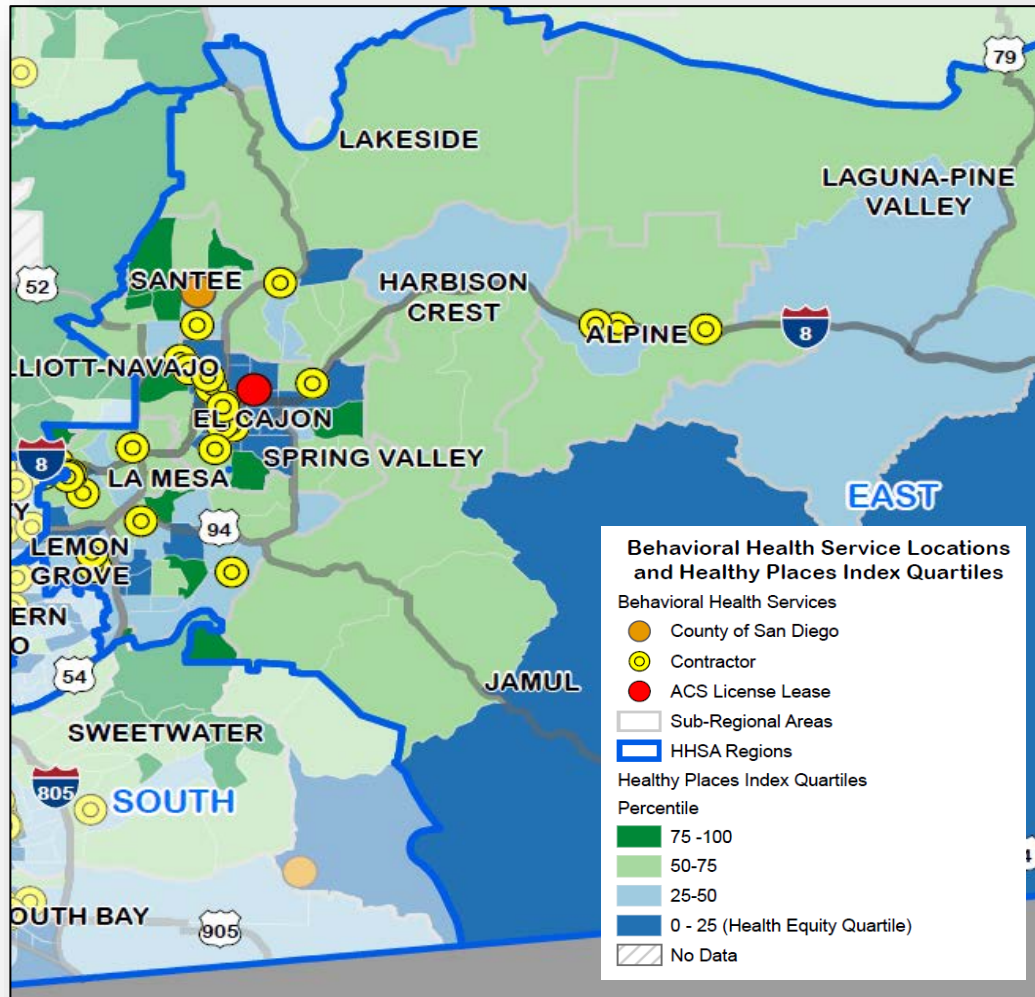
- MHSA allows for an ongoing 20% transfer between components

REQUESTED AMENDMENT

- Requests transfer of **\$10 million** from Community Services & Supports (CSS) to Capital Funds & Technology Needs (CF/TN)
- Transfer falls within the 20% cap
- Funds will support the construction of the East Region Crisis Stabilization Unit (CSU)



Community Need in East Region



Crisis Stabilization Unit Overview



CSU SERVICES

Services provided on a short-term basis (up to 24 hours):

- Crisis intervention
- Mental health assessment
- Medication assistance
- Therapy and peer support
- Resources and connections to ongoing behavioral health services

ACCESSING SERVICES

- Drop-offs by health, safety, and law enforcement agencies
- Walk-ins for adults ages 18 and up



North Coastal CSU (Oceanside)

MHSA Proposed Budget FY 23-24



Components	Original Budget FY 23-24	Revised Budget
Community Services and Supports	\$228,266,016	\$228,266,016
Prevention and Early Intervention	\$38,271,033	\$38,271,033
Innovation	\$1,522,280	\$1,522,280
Workforce Education and Training	\$6,879,317	\$6,879,317
Capital Facilities and Technological Needs*	\$0	\$10,000,000
Total	\$274,938,646	\$284,938,646

*Transfer will be with unspent funds

Recommendation



- Receive and approve the Amendment (MHSA Amendment to the FY 2023-26 MHSA Three-Year Plan) and authorize the Agency Director, Health and Human Services Agency, to submit the amendment to the Mental Health Services Oversight and Accountability Commission.



QUESTIONS



April 4, 2024
Behavioral Health Advisory Board (BHAB)
Meeting Minutes

MEMBERS PRESENT

Bill Stewart, Member-at-Large – District 1
 Janice Luna Reynoso, Member-at-Large – District 1
 Gaurav Mishra – District 1
 Joel San Juan - District 1
 Todd Boyer – District 2
 Kaye Kelley Turpin – District 2
 Serita Polinaire, 1st Vice Chair – District 2
 Jessica Kramer – District 3
 Holly Herring – District 3
 Stuart Gaiber – District 3
 Shea Benton – District 4
 Judith Yates, 2nd Vice Chair – District 4
 Carol Clemens, Member-at-Large – District 5
 Andrea Rodriguez, on Behalf of Nora Vargas, Chair of the Board of Supervisors

MEMBERS NOT PRESENT

Robin Sales, Chair – District 3
 Janessa Goldbeck – District 4

STAFF TO THE BEHAVIORAL HEALTH ADVISORY BOARD

Aurora Kiviat, Assistant Director, Behavioral Health Services (BHS)
 Dania Barroso-Conde, Program Coordinator, BHS
 Maria Molina-Melendez, BHAB Coordinator, BHS

I. CALL TO ORDER

The Behavioral Health Advisory Board (BHAB) was called to order by 1st Vice Chair Serita Polinaire at 2:31PM in-person and via Zoom.

II. NON-AGENDA PUBLIC COMMENTS

(Note: Spelling of names are unconfirmed)

Two written e-comments received.

- Carol Clemens shared her family experience with CARE Court, expressed appreciation to BHS CARE Court staff for their support, and provided BHS staff permission to share her contact to anyone interested in hearing her story.
- Angela Rowe advocated for more housing options for families involved in Child and Family Well-Being (CFWB) services so families can safely reunify as well as for more recovery residence funding.
- Irma Contreras advocated for the importance of substance use treatment programs as well as housing for families involved in the CFWB.

- Mary Jo O'Brien, Co-Chair of the Peer Council identified four (4) areas of concern for advocacy: Implementation of Peer Support Certification; Transitional Age Youth; Special Population; and Adult and Older Adult Issues. Currently their focus is on self-care for the certified Peer Support and would like the County to consider looking into aid for them.
- Tonya Savice, a disabled Veteran, Director of Advocacy for the Veteran's Art Project, and a peer support specialist advocated for more funding for art programs for mental wellness for through art. She would like to request funding to help veterans deal with PTSD through Art and affordable housing for Veterans in San Diego County.
- Rio Reese, Prevention Outreach Specialist with the Southern Indian Health Council, advocated for increased grant funding in East County for holistic healing programs through the arts in partnership with the Veteran's Art Project and proposed a pilot program for Native Veteran's to support re-integration through cultural arts.
- Ivan Sav is a Cultural Advocate for Native American veterans, stated that there needs to be a focus on cultural healing and teaching life skills to be able to be back in their own tribal communities.
- Karen Marie commented on her son who has a diagnosis of anosognosia, has been granted LPS conservatorship, and is waiting for placement. She advocates for more to be done for those diagnosed with anosognosia while also being grateful that conservatorship has been granted to her son.

III. CONSENT CALENDAR

An amendment was made to correct the Minutes from March 7, 2024, to show Jessica Kramer's attendance as attended.

ON MOTION of Judith Yates, seconded by Bill Stewart, BHAB approved the motion to correct the meeting minutes from March 7, 2024, and the acceptance of Donations Board Letter.

AYES: 13 NAYS: 0 ABSTENTIONS: 0

IV. PUBLIC HEARING: MENTAL HEALTH SERVICES ACT (MHSA) AMENDMENT TO THE FISCAL YEAR (FY) 2023-26 THREE-YEAR PLAN

Dania Barroso-Conde stated one public comment was submitted for the MHSA amendment and will be included with the MHSA Amendment report.

V. PRESENTATION AND ACTION ITEM: MHSA AMENDMENT TO THE FY 2023-26 THREE-YEAR PLAN

Nadia Privara, Assistant Director, Chief Strategy and Finance Officer at BHS, provided an overview of the MHSA Amendment that will be presented to the Board of Supervisors (Board) on June 4, 2024. The Amendment would transfer \$10 million from Community Services & Supports (CSS) to Capital Funds & Technology Needs (CF/TN). Funds will support the construction of the East Region Crisis Stabilization Unit (CSU).

ON MOTION of Serita Polinaire, seconded by Bill Stewart, BHAB approved the motion for the MHSA Amendment to the FY2023-26 Three-Year Plan.

AYES: 12 NAYS: 1 ABSTENTIONS: 0

VI. ACTION ITEM: BHAB 2024 PRIORITIES

ON MOTION of Judith Yates, seconded by Bill Stewart, BHAB approved the motion to approve the BHAB 2024 Priorities.

AYES: 13 NAYS: 0 ABSTENTIONS: 0

VII. ACTION ITEM: ESTABLISHING THE 2024 BHAB SUBCOMMITTEES

Judith Yates, 2nd Vice Chair, provided input on behalf of Robin Sales, BHAB Chair, supporting the item and acknowledging the thought and effort that went into the drafting of the action item in preparation for the April BHAB meeting. Dania Barroso-Conde provided additional input noting the background and context in developing the action item with the identified subcommittees.

ON MOTION of Gaurav Mishra, seconded by Todd Boyer, BHAB approved the establishing of the 2024 BHAB Subcommittees.

AYES: 13 NAYS: 0 ABSTENTIONS: 0

VIII. ACTION ITEM: APPROVAL OF BHAB PUBLIC COMMENT LANGUAGE ON SENATE BILL (SB) 43

ON MOTION OF Stuart Gaiber, seconded by Joel San Juan, BHAB approved the Public Comment Language on Senate Bill 43.

AYES: 13 NAYS: 0 ABSTENTIONS: 0

IX. DIRECTOR'S REPORT

Aurora Kiviat, Assistant Director & Chief Operations Officer, BHS, provided updates on the following:

- The April BHAB Director's Report (DR) provides a comprehensive update on BHS's approach to optimize community and stakeholder engagement built upon the foundation of the BHS Communication & Engagement Team and outlines key drivers and mechanism for community engagement with the community as informed by BHAB.
- On April 9, 2024, BHS will provide a report back to the Board on Senate Bill (SB) 43 implementation in San Diego County and a report back on regional board and care capacity.
- The Board approved \$15 million in American Rescue Plan Act (ARPA) funding to support the implementation for Senate Bill (SB) 43.
- With the passage of California Proposition 1, the Board will present a Board Letter on April 9, 2024, that lays the foundation for implementation planning by BHS in response to the changes to programs and services under Proposition 1. BHS planning has been ongoing and will be informed by BHAB.
- Information on CARE Act informational sessions can be found in the April DR.

X. CHAIR'S REPORT

Serita Polinaire, 1st Vice Chair, yielded her time to Bill Stewart, Member-at-Large to provide a CARE Act update.

Bill stated that he is a member of the Judicial Council of California CARE Act Working Group as a San Diego County regional representative and shared information gathered through his participation in the workgroup. Community members are encouraged to participate in the CARE Act Working Group ad hoc subcommittees to provide valuable feedback. More information on the CARE Act Working Group can be found at the following link: <https://www.chhs.ca.gov/home/committees/care-act-working-group>

XI. ANNOUNCEMENTS

- The MHSA annual update has been posted online for a 30-day public review period.

- The California Association of Behavioral Health Boards and Commissions (CALBHB/C) meeting will be held in-person in Sacramento and via Zoom on April 19, 2024, with a training session on April 20, 2024.

XII. MEETING ADJOURMENT

ON MOTION of Serita Polinaire, seconded by Bill Stewart the meeting adjourned at 3:51pm.



**BEHAVIORAL HEALTH ADVISORY BOARD (BHAB) ACTION ITEM
APRIL 4, 2024**

RECEIVE AND APPROVE AN AMENDMENT TO THE FISCAL YEARS 2023-2026 MENTAL HEALTH SERVICES ACT THREE-YEAR PROGRAM AND EXPENDITURE PLAN

Under the leadership of the San Diego County Board of Supervisors (Board), the County of San Diego (County) Health and Human Services Agency, Behavioral Health Services continues making strides to create a behavioral health system with regionally distributed services that are accessible to all individuals and families in need. The Mental Health Services Act (MHSA) provides funding for critical mental health programs that serve people with serious mental illness or serious emotional disturbance, supporting some of San Diego County's most vulnerable and unserved populations through services that are responsive to cultural and linguistic needs. MHSA provides dedicated ongoing funding to counties to address a broad continuum of mental health services needs within five distinct components including Prevention and Early Intervention (PEI), Community Services and Supports (CSS), Innovation (INN), Workforce Education and Training (WET), and Capital Facilities (CF) and Technological Needs (TN).

As required by the Welfare and Institutions Code, counties must complete a three-year plan and subsequent annual updates for MHSA-funded programs inclusive of all programs and expenditures. The most recent MHSA Three-Year Plan for Fiscal Years (FY) 2023-24 through 2025-26 was approved by the Board on June 13, 2023 (22) and was subsequently submitted to the Mental Health Oversight and Accountability Commission (MHOAC). This action requests the Board receive and approve an amendment to the MHSA Three-Year Plan, which would transfer \$10.0 million of CSS funds to the CFTN component in FY 2023-24 for the development and construction of the East Region Crisis Stabilization Unit, and to submit the amendment to the MHOAC, if approved by the Board.

It is, THEREFORE, staff's recommendation that BHAB supports the approvals and authorizations needed to implement the above recommendation.