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TO: Behavioral Health Advisory Board (BHAB)

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

BEHAVIORAL HEALTH SERVICES (BHS) DIRECTOR'S REPORT - December 2024

BHS 2024 Year in Review

BHS continues to make advancements in strengthening and enhancing the behavioral health Continuum of Care (CoC). Below are a few notable initiatives and achievements spanning across long-term and community-based care, capital projects, behavioral health policy, and ongoing community engagement efforts

Long-Term and Community- Based Care

Throughout the year, BHS continued efforts to sustain and expand capacity within subacute and community-based care as informed by the BHS Optimal Care Pathways (OCP) model. The OCP model expands long-term care by including community-based services that provide continuous care and housing to people with behavioral health conditions. In 2024, BHS pursued actions to advance continuous care capacity, including linkages to housing and care coordination, to meet both immediate behavioral health needs and support long-term recovery.

Recuperative Care Services

Recuperative care services provide adults with behavioral health conditions who are experiencing homelessness, a safe and secure environment to transition into, post-hospitalization. In July 2024, the California Department of Health Care Services (DCHS) awarded BHS with \$12.4 million of competitive grant funding as part of the Behavioral Health Bridge Housing (BHBH) Round 3 grant funding. The grant funds will be utilized for capital and operational costs to establish 48 new recuperative care beds locally. Notably, a portion of the grant funding will be used for renovations that will create 16 new recuperative care beds within the County-owned Substance Use Residential and Treatment Services (SURTS) facility in National City.

Licensed Board & Care Facilities

Licensed board and care facilities provide 24/7 recovery-focused support and supervision, or community-based care, for people requiring daily assistance to meet their clinical and social needs. Through contracted provider agreements, the County utilized Mental Health Services Act funding, along with newly

established State grant funding preserve and expand local board and care facility capacity dedicated to people with serious mental illness.

- In March 2024, BHS established 55 new Board and Care slots funded by Behavioral Health Bridge Housing Round 1 grant funds, for which BHS was awarded \$44.3 million, with additional slots planned for 2025.
- In May 2024, BHS convened licensed board and care providers locally to commence the process of planning and awarded Community Care Expansion Preservation grant funding, for which BHS received of \$16.8 million, to preserve existing licensed board and care beds.

Expanding Recovery Residence Access

Recovery residences are privately owned homes that provide living environments that are secure, safe, and free of alcohol and other substances through agreements with local community-based substance use outpatient and opioid treatment programs (OTP) providers. Recovery residences provide housing to adults with substance use or co-occurring conditions who are experiencing homelessness and enrolled in County substance use outpatient treatment programs. In Spring 2024, the Board of Supervisors allocated \$8.0 million of funding to increase recovery residence access for people within County-funded substance use outpatient treatment. To support access to recovery residences the funds were infused into existing contracts the County has with OTP providers. The funds will be administered over three fiscal years, starting in Fiscal Year 2023-24 and ending in Fiscal Year 2025-26. Funding amounts were allocated based on the number of individuals a program serves. Additionally, a small portion of the funds will support equitably streamlining access to recovery residence based on utilization needs.

No Place Like Home (NPLH)

Permanent Supportive Housing (PSH) is an evidence-based housing intervention that combines non-time-limited affordable housing assistance with wrap-around supportive services for people experiencing homelessness, as well as other people with disabilities. The No Place Like Home (NPLH) State program provides PSH for individuals with behavioral health conditions who are experiencing or at risk of chronic homelessness. Individuals experiencing homelessness with serious mental illness are connected to NPLH units through the Coordinated Entry System, administrated by Regional Task Force on Homelessness.

Five new NPLH PSH buildings were recently developed, with two currently in the leasing phase. These developments will increase housing capacity by adding 122 supportive housing units designated for behavioral health clients. Many of these units will be offered to individuals transitioning from homelessness, providing them with the opportunity to have their own apartment. Comprehensive housing support services will be available to all residents to ensure they maintain housing stability.

For more information on residential services visit the BHS Residential and Long-Term Services webpage at the following link: sandiegocounty.gov/content/sdc/hhsa/programs/bhs/long-term and residential services.html

BHS Capital Projects

Throughout 2024, BHS made significant strides in advancing two major capital projects, demonstrating its commitment to strengthening infrastructure and addressing community needs. BHS participated in an enterprise- wide capital planning process, providing meaningful opportunity for community input.

East Region Crisis Stabilization Unit (CSU) Groundbreaking

On July 18, 2024, County and BHS leadership along with community partners and stakeholders, broke ground on the region's seventh CSU development in El Cajon at 200 S. Magnolia Avenue and West Douglas Avenue. The development of the East Region CSU reflects a milestone for regionally distributed crisis services. The 14,000 square foot CSU is currently under construction and expected to open in Fall 2025. Its completion will mark all six County HHSA regions having a CSU. This facility will enhance the

service offerings available to those living in East County and help ensure crisis care is accessible in their community.

For more information visit the BHS Crisis Stabilization Units Webpage at the following link: sandiegocounty.gov/content/sdc/hhsa/programs/bhs/csu.html

Tri-City Psychiatric Health Facility (PHF)

Late in 2024, the construction of the Tri-City PHF was completed. The new state-of-the-art facility in Oceanside will provide short-term inpatient mental health services to people in North San Diego County who are experiencing a mental health crisis. Final planning is underway to commence services at the PHF, which will be operated by Exodus Recovery, Inc.

Capital Plan Open House

On November 14, 2024, the public was invited to the County 2025-30 Capital Plan Open House, at the County Operations Center, to learn about the enterprise-wide capital planning process, upcoming capital projects, and share feedback on County developments relative to community needs and priorities. BHS participated in the open house event, as part of the Capital Improvement Needs Assessment (CINA), to share information and answer questions on BHS facility projects intended to roll out over the course of the next five years. BHS leadership joined community members in conversation regarding three behavioral health infrastructure developments: 1) San Diego County Psychiatric Hospital Conversion to Subacute Care, 2) Children's Crisis Residential at Polinsky Children's Center, 3) Central Region Behavioral Health Community-Based Care.

To view the preliminary draft of 2025-2030 Capital Plan and provide feedback visit *Engage San Diego County* at the following link: engage.sandiegocounty.gov/capitalplan25-30

Significant Behavioral Health Policy Updates

BHS and partners achieved critical progress and reached key milestones in implementation and planning of state-wide behavioral health policies. Accomplishments included expanding capacity through strategic funding, fostering collaborative planning with diverse stakeholders, amending contracts to ensure alignment with operational changes and state requirements, and bolstering critical supports to strengthen the continuum of care.

Involuntary Behavioral Health Treatment in San Diego County

Senate Bill (SB) 43 makes changes to Lanterman-Petris-Short (LPS) Act, a California law governing involuntary detention, treatment, and conservatorship of people with behavioral health conditions by augmenting the definition of "gravely disabled." BHS achieved significant milestones in pathways toward implementation, ensuring readiness for an effective date of January 1, 2025. Key actions for preparation span across four distinct areas 1) Education and Training, 2) Expanding Treatment, Services, and Supports for People with Substance Use Disorder (SUD), 3) Alternatives to emergency departments for 5150 Transports, and 4) Updating Procedures and Adding Capacity for the Public Conservator's Office. Notable advancements include the following:

- Over the last two years, BHS increased capacity in opioid treatment programs by 150 treatment slots, and increased treatment capacity by 10% in the County adult general substance use outpatient programs to include expanded services and medication for addiction treatment (MAT) and ambulatory withdrawal management.
- In February 2024, the Board approved \$15 million for the implementation of SB 43 program implementation.
- As of October 2024, Jewish Family Services of San Diego (JFS) successfully administered SB 43
 trainings, achieving the following metrics. JFS conducted 31 law enforcement agency trainings
 and six Psychiatric Emergency Response Team (PERT) trainings. Notably, trainings reached a
 total of 1,438 law enforcement individuals. Additionally, JFS conducted 85 non-LPS designated

- facility trainings reaching 1,766 staff and 31 LPS facility trainings reaching 629 staff. In total, 60 trainings were provided to community partners.
- October 2024, San Diego Relay launched to provide behavioral health support in emergency departments for substance use-related needs, including non-fatal overdoses and involuntary holds
- Fall 2024, all County Office of the Public Conservator (PC) staff were trained on updated policies and procedures, LPS referral form, and operational processes. PC conducted an analysis on existing staffing and other resources to identify additional supports needed for SB 43 related conservatorship referrals.
- BHS is in the process of amending contracts to ensure providers are equipped to support the implementation of SB43.

For morning information visit the BHS SB 43 Webpage at the following link: sandiegocounty.gov/content/sdc/hhsa/programs/bhs/senate bill 43/

Community Assistance, Recovery, and Empowerment (CARE) Act Program

The CARE Act program launched on October 1, 2023, in San Diego County. Within a year of its implementation, the County has established itself as a state leader, setting a benchmark for excellence, for successfully enrolling individuals into the program. Outcomes of the program demonstrate that individualized support promotes access to ongoing behavioral health care, housing, medical services, and social benefits, while reducing reliance on emergency services and more restrictive forms of treatment. As of September 2024, the BHS CARE team received 175 petitions, with 57 participants successfully engaged and enrolled in individualized CARE plans. Other program highlights include:

- In Fiscal Year 2023-24, Independent Living Association (ILA) and Recovery Residence Association (RRA) contract was amended to include the CARE Housing Locator program to expand housing inventory for CARE participants.
- During February 2024- August 2024, 22 individuals were referred to the CARE Short-Term Bridge Housing (STBH) program, as part of the ILA contract, providing cost-free, temporary, housing.
- In collaboration with National Alliance on Mental Illness (NAMI) San Diego, BHS co-facilitated six CARE Act program Information Sessions to connect with community members with subject matter experts on the topic of CARE program process and criteria. Joined by The San Diego Access and Crisis Line (ACL) and Legal Aid Society of San Diego, information sessions addressed more than 130 participant questions.

For morning information visit the BHS CARE Act Program Webpage at the following link: https://www.sandiegocounty.gov/content/sdc/hhsa/programs/bhs/care act program.html

Community Engagement

BHS continued to steadily increase capacity to deliver tailored engagement opportunities for stakeholders to connect with the department, in alignment with recommendations identified by communities in recent years. Community input was also elevated through Board Letters, Board Memos, and presentations provided by BHS to the Board.

In April 2024, Community Health Workers (CHWs) were added to enhance department outreach and education efforts. The addition of CHW staff, coupled with increased promotion and utilization by stakeholders of BHS' online Community Request Form, resulted in the department's participation in nearly 288 new community-based activities and events. CHWs have been instrumental in delivering presentations to youth, young adults, and education sector professionals as part of the County's Youth Suicide Reporting and Crisis Response Pilot funded through the California Department of Public Health (CDPH). Since joining BHS, CHWs coordinated 144 community outreach activities, engaging with over 9,500 individuals, and specifically connecting with more than 5,300 youth.

C&E community engagement staff coordinated a variety of pilot activities to increase opportunities for stakeholder input to inform the refinement of BHS efforts in health promotion, planning, and programming. This included a series of data and public messaging workshops conducted in partnership with BHS' Population Health Unit and other County teams. As part of the department's Community Experience Partnership (CEP) initiative, regional population health data on self-harm, suicide, fatal and non-fatal overdoses were presented to community groups to initiate action planning activities and identify opportunities to refine existing BHS public messaging brands.

At the start of 2024, the department launched materials to support a new "30-Day Mental Wellness" as a fun, free, and accessible way for community members to identify and engage in self-care activities to support their personal mental wellness. Learnings continue to reinforce the importance and benefits of tailoring engagement opportunities to the unique experiences of groups of shared identity, in addition to looking at regional and sector-based programming.

Community dialogues with stakeholders through *It's Up to Us "Let's Talk About..."* events have specifically resulted in the identification of key areas of focus that will help guide health promotion programming, community listening sessions, and countywide public messaging efforts in the new year. Key topics include:

- Bolstering socio-emotional competence and wellness
- Promoting behavioral health literacy
- Preventing social isolation and deaths by suicide
- Substance use and overdose prevention
- Resources for youth and transition age youth
- Public behavioral health workforce development

Additionally, a desire for more streamlined convenings to optimize processes, foster broader community participation, promote better service outcomes, and enable more meaningful stakeholder engagement were identified by stakeholders. In response to this, new impending policy changes, and recent changes across the broader County enterprise, in early in 2025, BHS will realign system of care council meetings and regional collaboratives, into more inclusive meetings tailored around communities of shared identity, regional and sector-based programming, and behavioral health transformation initiatives.

Engagement channels and mechanisms outside of the department were leveraged to enhance public awareness of behavioral health priorities, resources, and promote new activities. Greater collaboration with HHSA's Communications Team increased coverage and promotion of behavioral health topics and BHS news on County social media accounts and the County News Center. In addition, presentations and in-service trainings for the enterprise's new *Engage San Diego County* platform were initiated by the County's Communication Office for BHS' C&E staff. Following this orientation, C&E staff will work with stakeholders to identify behavioral health content and projects for future BHS pages. The online platform offers a new opportunity for bi-directional communication between the department and those it serves.

For HHSA BHS Community Request Form visit the following link: bit.ly/BHS CommunityRequest

For Engage San Diego County visit the following link: engage.sandiegocounty.gov

Look Ahead

As we look to the new year, several large-scale policy changes will significantly impact the system of care, including the implementation of SB43, which as noted above will begin on January 1, 2025. BHS will continue to collaborate with multi-sector partners and stakeholders in implementing SB 43. BHS will continue to advocate for solutions to the operational and Medi-Cal reimbursement-related challenges to providing SUD care in LPS-designated facilities. In addition, BHS is threading with the California Behavioral Health Directors Association and other counties throughout the state to learn about

implementation activities and planning efforts, while sharing strategies and best practices. BHS will also be working with the state to establish data systems and infrastructure to reflect application of 5150 holds across demographics in the context of SB 43.

In the upcoming year, BHS will continue readiness planning for the implementation of the Behavioral Health Services Act (BHSA), which seeks to transform the Mental Health Services Act (MHSA). BHSA will shift the scope of services funded previously by MHSA, with shifts anticipated to services, increased accountability, improved outcome reporting, and a broadened focus that requires reporting on all funding sources supporting behavioral health services. BHSA implementation requirements will become effective in July 2026. BHS will continue to provide updates on policy driven operational impacts related to CalAIM and payment reform, CARE Act, SB 43, and BHSA.

Respectfully submitted,

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