



# County of San Diego

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August 29, 2024

TO: Behavioral Health Advisory Board (BHAB)

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

## **BEHAVIORAL HEALTH SERVICES (BHS) DIRECTOR'S REPORT – September 2024**

### **PROGRAMS AND SERVICES UPDATES**

BHS Programs & Services in partnership with other units across the department, designs, develops, and oversees a network of behavioral health services and supports as a health plan, public health entity, and direct service provider. Below are updates on key bodies of work.

#### **East Region Crisis Stabilization Unit**

The East Region Crisis Stabilization Unit (CSU) celebrated its groundbreaking on July 18, 2024, and is expected to be completed by the end of 2025. This will be the seventh CSU in the County and the first in East County. CSUs provide immediate mental health support and treatment services in a therapeutic setting to individuals with serious behavioral health needs. They are designed to de-escalate a person's level of distress, prevent or treat a behavioral health crisis, and reduce acute symptoms of a mental health condition or a co-occurring condition. Services are provided on a short-term basis, up to 24-hours, in a client-centered calming environment. In Fiscal Year (FY) 2023-2024, the CSUs had approximately 13,900 admissions; over 85% of those individuals were diverted from hospitalization.

For more information on the CSUs and how to access services visit:

[sandiegocounty.gov/content/sdc/hhsa/programs/bhs/csu.html](https://sandiegocounty.gov/content/sdc/hhsa/programs/bhs/csu.html).

#### **Screening to Care**

The Board of Supervisors (Board) dedicated American Rescue Plan Act (ARPA) funding to pilot the Screening to Care program, which provides prevention and early intervention supports to middle school students utilizing the Multi-Tiered System of Supports (MTSS) Framework. The Screening to Care program was developed with the goal of universal screenings for middle school students to determine their social-emotional needs and administer prevention and early intervention supports. The behavioral health interventions overlay the MTSS Framework by providing primary supports for schools and classrooms, secondary supports for students that need extra assistance in meeting academic and behavioral goals, and tertiary support for students that require formal and individualized interventions. All participating districts use the mySAEBRS (my Social, Academic, and Emotional Behavior Risk Screener) evidence-based, self-administered, screening tool. School districts independently decided whether they'd require active or passive consent from parents for the

students to complete the screening tool. Active consent (utilized by 4 of the districts) requires a signature to opt into the screening while passive consent (utilized by two of the districts) requires a signature to opt out of the screening. Screening to Care is offered on 39 school campuses.

FY 2023-24 Screening to Care highlights include:

- Over 18,000 screenings completed to determine students' social-emotional needs.
- An estimated 3,090 students engaged in small group programming focused on building social-emotional skills.
- Over 270 students accessed care coordination services to connect them to behavioral health treatment.
- 550 caregiver activities were managed by *promotora* staff with 900 caregivers having received an outreach contact.

In Spring 2024, Screening to Care was nominated and recognized for a National Association of Counties (NACo) Achievement Award in the Health category. This award recognizes outstanding county government programs for innovative approaches to providing new or needed services, improving the administration of existing programs, or promoting intergovernmental cooperation and coordination.

### **School-Based Incredible Years Programs**

The BHS School-Based Incredible Years (IY) programs began in FY 2016-17 to provide screening, early identification, and early intervention to at-risk children in public elementary schools. The six IY contracts were reprocured for FY 2022-23 and provide service across five regions in various school districts, provided by five community-based contractors. The program is designed to promote emotional and social competence and to prevent and reduce emotional problems in children attending Pre-K through 3<sup>rd</sup> grade. School districts utilized evidence-based social-emotional screening tools, including the SAEBRS, Panorama, and others to assess student needs and provide services using the IY model and curriculum. The BHS School-Based IY programs complete the IY training series, a set of three comprehensive, multifaceted, and developmentally based curricula for parents, teachers, and children. The IY program also utilizes parent-peer partners based on a *promotora* model to increase the engagement of caregivers at school.

BHS School-Based IY highlights for FY 2023-24 include:

- More than 14,400 students were screened.
- An estimated 13,000 students participated in classroom lessons.
- More than 4,000 students participated in small groups.
- Over 1,900 caregivers participated in group education sessions.

### **Youth Development Academy (YDA)**

In October 2020, Governor Newsom signed Senate Bill (SB) 823, which set the path for the eventual closure of the Division of Juvenile Justice (DJJ) by June 30, 2023, and transitioned youth offenders to local county jurisdictions. Under the California Health and Human Services Agency, the newly created Office of Youth and Community Restoration oversees the transition of youth offenders from state to local custody. Through a comprehensive local planning process with BHS, the Probation Department, and several other partners and stakeholders, the various needs of the youth and young adults were examined, and an all-inclusive program was developed. BHS and the Probation Department entered a Memorandum of Understanding (MOU) to provide services which became effective January 2023. BHS provides mental health services inclusive of assessments, individual treatment, family engagement and therapy, group therapy, psychiatric assessment, and medication management, as clinically indicated.

Examples of the innovative approaches to group therapy include the Dress for Success therapeutic group and the Self-Portrait Art Therapy Group. The Dress for Success therapeutic group aims to empower young men seeking to rewrite their narratives by instilling valuable life skills, fostering cultural awareness, and nurturing self-confidence. This program equips participants with tools needed to succeed both within and beyond the confines of the facility, using the transformative power of dressing for success to help these youths change their futures. The Self-Portrait Art Therapy Group centers around fostering self-expression and self-reflection through the creation of symbolic self-portraits. This group has proven to be a valuable tool in promoting emotional well-being, enhancing self-perception, and refining interpersonal skills, leading to positive outcomes for participants.

YDA highlights for FY 2023-24 includes:

- The Stabilization, Treatment, Assessment, and Transition (STAT) team provided over 203,000 minutes of mental health services to 81 unduplicated youth in the program. Mental health services included individual, family, and group treatment sessions, case management, and medication management and assessment.

### **Next Move Youth Outpatient Services**

The Health and Human Services Agency (HHS) and Public Safety Group (PSG) have a well-established history of collaborative engagement in addressing the unique needs of justice-involved youth. Within this context, BHS and the Probation Department have worked in tandem within detention facilities to provide comprehensive care to the youth. Over the years, program offerings, service models, and staffing configurations have undergone iterative adjustments to align with evolving regulatory frameworks, mandates, philosophical shifts, and the ever-changing requirements of our clientele.

Through the CalAIM Justice-Involved initiative, and as mandated in Assembly Bill (AB) 133, the State's Department of Health Care Services (DHCS) will require state prisons, county jails, youth correctional facilities, county behavioral health agencies, and Medi-Cal Managed Care Plans (MCPs) to implement processes for facilitated referrals and linkages to continue behavioral health treatment in the community for individuals who receive behavioral health services while incarcerated. Specifically, behavioral health linkages will include referrals for justice-involved individuals to the appropriate Medi-Cal delivery systems post-release.

Due to this legislative change, effective October 1, 2024, the BHS Juvenile Forensic Services (JFS) STAT Team will begin transitioning to community care settings, offering outpatient care to align with the mandate. This transition will require the provision of outpatient mental health services to youth leaving the detention facility. The new outpatient treatment program, called *Next Move*, will serve youth county-wide. The transition of the BHS team will be implemented in stages to ensure continuous clinical care for youth while the Probation Department onboards a new provider for the institutions.

### **All County Letter (ACL) 24-35**

On July 12, 2024 the California Department of Social Services (CDSS) issued ACL 24-35 that informs county child welfare agencies (CWA), juvenile probation departments (JPD), Tribes with a Title IV-E Agreement with the state, and county mental health plans (MHP) that there is no longer a requirement for CWAs and JPDs to conduct a mental health screening for the purpose of determining whether to refer a child or youth to MHPs. In lieu of the required mental health screening, CWAs and JPDs must submit referrals to the appropriate MHPs for all children and youth within three business days of opening a child welfare case or juvenile probation placement case, and on an ongoing basis, as determined necessary by the Child and Family Team (CFT) and as informed by the Child Adolescent Needs and Strengths (CANS) tool. The departments are in dialogue on how to implement this shift

and ensure access to care with recognition that although current pathways to care exists, review and optimization of workflow will promote service connections.

### **Intensive Outpatient Program (IOP) and Partial Hospitalization Program (PHP)**

BHS implemented two new levels of care for children and youth, effective January 1, 2024. San Diego Center for Children was awarded contracts for both Intensive Outpatient Program (IOP) and Partial Hospitalization Program (PHP). IOP offers diagnostic and clinical treatment services in a time-limited (approximately six to eight weeks), structured, and therapeutic environment with the goal of stabilization, skill building, and medication management. The modality of service offered is a Day Intensive Half (DIH) program for children/youth ages 13-18 who live at home and need more mental health support than weekly outpatient therapy. Services are three days per week after school hours. Referrals will be primarily from outpatient providers when intensive services are needed; Partial Hospitalization Program (PHP) as a step-down plan with a slower transition; Emergency Screening Unit (ESU) to prevent inpatient hospitalization; and/or residential programs or inpatient hospitals as a recommended step down from acute setting.

PHP is a non-24-hour, time-limited (approximately two to three weeks) treatment program that is hospital-based or community-based, in a structured setting. PHP offers diagnostic and clinical treatment services in a therapeutic environment with the goal of stabilization, skill building, and medication management. The modality of service offered is a Day Intensive Full (DIF) program, Monday to Friday, inclusive of educational instruction for children/youth ages 13-18 who would benefit from a structured full day program.

### **Community Response Guide & Online Mandated Reporter System**

BHS outpatient children's programs were invited to participate in piloting Child and Family Well-Being's (CFWB) Community Response Guide. The Community Response Guide is a web-based decision support tool that provides guidance to mandated reporters and concerned residents about thresholds for reporting and alternative supports. The tool was designed through a data-driven workgroup process in collaboration with BHS. The guide does not change or replace reporting requirements but supports providers in applying laws and statutes more consistently. Pilot testing of the tool is taking place through both vignette and field testing from July 8, 2024 - August 9, 2024. CFWB initiated an online mandated reporter system to give mandated reporters the ability to file non-emergent reports via a secure and encrypted website. The system is live and mandated reporters can create an online account through the website. The overall impact of the new system intends to streamline reporting and reduce wait times for urgent reports. The system creates efficiencies for mandated reporters and addresses reports of suspected child abuse or neglect.

For more information on Reporting Child Abuse or Neglect, visit:

[sandiegocounty.gov/content/sdc/hhsa/programs/cs/child\\_welfare\\_services/child\\_abuse\\_hot\\_line.html](https://sandiegocounty.gov/content/sdc/hhsa/programs/cs/child_welfare_services/child_abuse_hot_line.html)

### **Faith-Based Behavioral Health Training and Education Academy and Community Education**

BHS awarded two new contracts to Interfaith Community Services, in the North Inland Region, and Stepping Higher Inc, in the Central Region for Faith-Based Behavioral Health Training and Education Academy (FBBHEA) and Community Education. These contracts provide training and education for BHS System of Care providers and the community to increase awareness and understanding of faith-based approaches to addressing behavioral health. FBBHEAs facilitate behavioral health awareness and connection to local resources within communities.

### **San Diego County Clubhouses**

BHS had the pleasure of hosting representatives from Colusa County Behavioral Health Services for a tour of our local Clubhouse programs on August 6<sup>th</sup> and 7<sup>th</sup>, 2024. The Colusa County

representatives traveled to San Diego to enhance their understanding of the Clubhouse model and how the programs receive accreditation through Clubhouse International. BHS contracts with 10 sites to provide Clubhouse services. These sites are a meeting place for adults with behavioral health conditions that provide a safe setting for members to participate in and find support among peers who share similar lived experiences. With assistance from program staff, members work together in the daily operations of the Clubhouse and can receive assistance with a wide array of supports while building confidence and community through participation in social and recreational activities.

### **Permanent Support Housing**

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. Through different Housing Programs BHS supports approximately 40 developments with more in process in the coming years. Attachment A provides an overview of PSH units. Several PSH efforts are highlighted below.

### **Behavioral Health Support Services and Permanent Supportive Housing**

BHS, in collaboration with the San Diego Housing Commission (SDHC), provides behavioral health supportive services and PSH to residents at SDHC properties. Current properties and services include Kearny Vista and Valley Vista. Established November 2001 in Kearny Mesa, Kearny Vista provides 142 housing units. Valley Vista, established in January 2022, located in Mission Valley, provides 190 housing units. Upcoming projects will add 75 additional units. Pacific Village, located in the Midway District, will provide 62 units. Abbott Wakeland, located in Ocean Beach, will provide 13 units. Presidio Palms is currently in procurement. Slated to begin in December 2024, Presidio Palms will provide 163 units in Mission Valley. In all, there will be 570 PSH units in partnership with SDHC.

Residents are matched through the Coordinated Entry System and must have a verified disabling condition, whether it be mental, physical health, or substance use related. About 30% of Kearny Vista and Valley Vista residents had three or more disabling conditions in FY 2023-24. All residents have access to voluntary supportive services, which include outreach and engagement, case management, crisis intervention, housing stabilization, and care coordination with behavioral health and other social services. In FY 2023-24, Kearny Vista provided services to 191 unduplicated residents, and 95% of individuals received case management services. In the same fiscal year, Valley Vista provided services to 202 unduplicated residents, and 99% of individuals received case management services.

The partnership between BHS, SDHC, and their contracted providers focuses on developing best practices for staff training and fostering safe, supportive communities. Our goal is to ensure that residents receive comprehensive support to achieve housing stability and improved health outcomes.

### **No Place Like Home (NPLH)**

Five new NPLH PSH buildings are scheduled to open, with four 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.

### **Substance Use (SU) Residential Treatment Programs**

Starting last fiscal year, the County transitioned to a fee-for-service (FFS) model as part of the State's behavioral health payment reform initiative. This shift in payment structures is designed to help support system capacity and more optimized service delivery. Several SU residential programs, both adult and perinatal, were recently procured resulting in expanded capacity, additional levels of care,

and the ability to serve clients with complex clinical conditions. As part of the re-established SU providers meeting series, residential program and BHS staff meet bi-monthly and annually in a combined SU provider meeting to allow for information sharing, provider engagement, and problem-solving.

SU residential programs continue to evolve with a focus on community-based programming designed to address a wide range of needs with a particular focus on recuperative care. This aligns with BHS' commitment to integrating different levels of care with SU services to provide comprehensive support tailored to the diverse needs of the community and individual clients, with the objective of fostering better health outcomes and sustainable recovery pathways.

### **Short-Term Residential Treatment Providers (STRTP): Assembly Bill 1051**

Assembly Bill (AB) 1299 (Ridley-Thomas, Chapter 603, Statutes of 2016) established presumptive transfer as the prompt transfer of responsibility for the provision of arranging and payment for specialty mental health services (SMHS) from the county of original jurisdiction to the county in which the foster child/youth reside. Effective July 1, 2024, AB 1051 modified the requirements for presumptive transfer and clarified the responsibility of the MHP in the county of original jurisdiction for providing, arranging, and/or paying for SMHS provided to youth placed in applicable out-of-county residential settings (i.e., Group Homes, STRTPs, Community Treatment Facility (CTFs) and Crisis Residential settings).

To comply with this new system implementation, BHS is working collaboratively with the local CFWB team and Probation Department, as well as other counties, out-of-county (OOC) departments and providers. This approach allows for the establishment of agreements directly with OOC STRTP providers for individual youth placements, when applicable, as well as with other county MHPs for broader county-to-county agreements or MOUs. Both options allow for the county of jurisdiction to reimburse for Specialty Mental Health Services (SMHS) in the county of residence where the foster youth is placed in one of the identified residential placements, per the mandate. Additional information on presumptive transfer and AB 1051 can be found in the June 2024 DHCS All County Letter (ACL) NO. 24-43/ Behavioral Health Information Notice (BHIN) NO. 24-025 and at the links below.

- California Department of Social Services-Presumptive Transfer: [cdss.ca.gov/inforesources/foster-care/presumptive-transfer](https://cdss.ca.gov/inforesources/foster-care/presumptive-transfer)
- BHIN 24-025 ACL Presumptive Transfer: [dhcs.ca.gov/Documents/BHIN%2024-025-ACL%2024-43%20Presumptive%20Transfer%20Policy.pdf](https://dhcs.ca.gov/Documents/BHIN%2024-025-ACL%2024-43%20Presumptive%20Transfer%20Policy.pdf)
- DHCS-Assembly Bill (AB) 1299: [dhcs.ca.gov/services/MH/Pages/Out\\_of\\_County.aspx](https://dhcs.ca.gov/services/MH/Pages/Out_of_County.aspx)
- Assembly Bill (AB) 1051: [leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill\\_id=202120220AB1051](https://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=202120220AB1051)

### **Long-Term Care Continuum**

In alignment with the County's Optimal Care Pathways model (OCP), and in anticipation of SB-43 implementation, BHS continues to pursue opportunities to increase capacity for step-down beds from acute care settings to facilitate clinically appropriate care transitions for clients with complex and co-occurring needs. Currently, planning is underway to renovate the Substance Use Residential & Treatment Services (SURTS) facility located in National City, which will add new residential substance use beds and recuperative care beds to the continuum.

In July 2024, BHS was preliminarily awarded \$12.4M in Round 3 Behavioral Health Bridge Housing (BHBH) grant funding for facility improvements and services specific to the new recuperative care services within SURTS, and BHS will seek authority to accept the funds from the Board of Supervisors later this calendar year. Additionally, as approved by the Board on July 16, 2024, Minute Order (MO) No.22, BHS will pursue additional Proposition 1 Behavioral Health Continuum Infrastructure Program

(BHCIP) Round 1 grant funding to support the remaining costs for renovations within for the SURTS facility.

The efforts to increase step down capacity supports the optimization of resources across the system and ensures that clients receive the appropriate level of care in a timely manner. BHS also continues to explore opportunities to increase access to withdrawal management (WM) and Medication-Assisted Treatment (MAT) services within other long-term care areas, further broadening the scope of support for individuals in need.

### **Children’s Crisis Continuum Pilot Program**

California Assembly Bill (AB) 153 (Chapter 86, Statutes of 2021), signed into law in July 2021, mandated the creation of the Children’s Crisis Continuum Pilot Program to be jointly implemented by the California Department of Social Services (CDSS) and the DHCS. This pilot program provides a framework for a highly integrated continuum of care for foster youth with high acuity needs to be modeled across California. The purpose of the Children’s Crisis Continuum is to fully integrate the system of care for foster youth, enabling a seamless transition between service settings and to provide stabilization and treatment to foster youth with high acuity needs within the least restrictive setting possible. The County was awarded \$8.5 million in grant funding to support the pilot program over the first five years.

BHS, in collaboration with the County’s CFWB and Probation Department, is working to initiate several new services as part of the pilot program, including care coordination services to include linkages to resources and ease of transition of services across levels of care, including to the Children’s Crisis Residential Program. The Children’s Crisis Residential Program is currently under development with services expected to launch within the next year. This new level of care is anticipated to consist of 16 Crisis Residential beds, four of which will be dedicated to serve identified participants of the Children’s Crisis Continuum Pilot Program (CCCPP).

This new service line will be DHCS Medi-Cal certified and licensed by the CDSS. The program will operate seven days a week, 24 hours a day and will serve clients ages 12-18 years old who have Medi-Cal or are uninsured, who are experiencing an acute mental health crisis, and would benefit from crisis services as an alternative to psychiatric hospitalization, re-hospitalization, or a step-down from acute inpatient care. Length of stay will be 10 days or fewer. This program will include strong collaborations with the CFWB Department as well as partnerships with the County Probation Department and San Diego Regional Centers. Additional goals of the program will focus on improving the mental health and behavioral functioning of clients by stabilizing acute crisis symptoms before transitioning to a lower level of care. Additionally, as approved by the Board of Supervisors on July 16, 2024 MO 22, BHS will pursue Proposition 1 Behavioral Health Continuum Infrastructure Program (BHCIP) Round 1 grant funding to support the facility improvements required to operationalize the 16 new crisis residential beds.

## **BHS SPECIAL EVENTS & ANNOUNCEMENTS**

### **National Recovery Month – Community Update**

This year, BHS embarks on an exciting new direction for National Recovery Month, utilizing our online platforms to offer information, resources, and spotlights on the recovery journey. This new approach is in lieu of the one-day National Recovery Month celebration, held last year at the Waterfront Park. Instead, BHS hopes by leveraging these platforms we can expand opportunities throughout the month for the recovery community to come together in celebration.

BHS invites you to get involved and bring San Diego’s recovery community together in the following ways:

1. **Host a Recovery Day of Service Event:** Mobilize Recovery Day of Service is a constellation of connected public service events taking place nationally during September and October, harnessing the power of people in recovery and their allies for positive change in their communities. Be the first to add an event in San Diego! For more information and FAQs check out the Day of Service Toolkit.

To learn more about Mobilize Recovery Day of Service and see Day of Service Toolkit resources:

- Mobilize Recovery Day of Service: <https://www.recoverydayofservice.org/events>
- Day of Service Toolkit: <https://www.recoverydayofservice.org/toolkit>

2. **Add your event to our shared calendar:** BHS is launching a shared calendar of events for the recovery community from August through October.

To add an event to the BHS shared calendar, submit via BHS National Recovery Month Activities Online Form:

- <https://app.smartsheet.com/b/form/bb249879251e4a19a36a35620582fa32>

3. **Invite BHS to your event** using the BHS Community Request Form! *(Please note, all requests should be made with a minimum 2–4 week advance notice).*

BHS Community Request Form:

- <https://app.smartsheet.com/b/form/7e7b445a0deb41abbbf8237a3aadf7f2>

BHS can participate in the following ways:

- Outreach/Tabling – Request BHS staff to attend your event and engage with the attendees to share resources and information.
- Presentation/Speaker – BHS staff can provide presentations on various behavioral health topics.

4. **Submit a spotlight story** about an individual or organization. BHS will highlight stories of individuals and organizations throughout the year to share the community's resilience and spectrum of recovery journeys.

- Individual Stories: If you or a loved one has lived experience with recovery and a story that you'd like to share, let us know.
- Organizations: Nominate an organization providing outstanding service in the recovery field.

To share a spotlight story and/or nominate an organization, submit via BHS National Recovery Month Activities online form:

- <https://app.smartsheet.com/b/form/bb249879251e4a19a36a35620582fa32>

5. **Promote and share your materials** and/or resources for our National Recovery Month online toolkit. This toolkit will include information, resources, and ways to stay engaged throughout National Recovery Month. Please e-mail [Engage.BHS@sdcounty.ca.gov](mailto:Engage.BHS@sdcounty.ca.gov) with any handouts, flyers, and links that you would like to add to the online toolkit.

Stay tuned, as BHS plans to pilot future workshops, collaborating with members of the recovery community to uplift the voices of those impacted by substance use through unique and creative ways. A follow-up message will be issued to announce the launch of the National Recovery Month online toolkit and shared calendar.



September 2024

If you have any questions, please e-mail BHS at [Engage.BHS@sdcounty.ca.gov](mailto:Engage.BHS@sdcounty.ca.gov).

To stay connected on topics such as substance misuse, overdose prevention, or recovery activities, sign up for the BHS National Recovery Month Activities Email List:

<https://app.smartsheet.com/b/form/bb249879251e4a19a36a35620582fa32>

**15th Annual Early Childhood Mental Health Conference - We Can't Wait!**

BHS in partnership with Early Childhood stakeholders, will host the 15th Annual Early Childhood Mental Health Conference-We Can't Wait! on September 26 and 27, 2024. This hybrid event will be held at the Sheraton San Diego Hotel and Marina.

To learn more and register for the 15th Annual Early Childhood Mental Health Conference:

- Conference Details: <https://www.earlychildhoodmentalhealth-sandiego.com/>
- Register: <https://na.eventscloud.com/ereg/newreg.php?eventid=801093&>

Respectfully submitted,



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Behavioral Health Services

c: Caroline Smith, Interim Deputy Chief Administrative Officer  
Aurora Kiviat Nudd, Assistant Director and Chief Operations Officer  
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**County of San Diego Health and Human Services Agency, Behavioral Health Services  
Permanent Supportive Housing Overview**

<b>Development</b>	<b>Housing Program</b>	<b>City</b>	<b>Number of Permanent Supportive Housing Units</b>
15th & Commercial	Mental Health Services Act	San Diego	25
34 <sup>th</sup> Street	Mental Health Services Act	San Diego	5
Atmosphere	Mental Health Services Act	San Diego	31
Cedar Gateway	Mental Health Services Act	San Diego	23
Celadon	Mental Health Services Act	San Diego	25
Churchill	Mental Health Services Act	San Diego	16
Citronica One	Mental Health Services Act	Lemon Grove	15
Citronica Two	Mental Health Services Act	Lemon Grove	10
Connections Housing	Mental Health Services Act	San Diego	7
Mission Cove	Mental Health Services Act	Oceanside	9
Parkview	Mental Health Services Act	San Diego	14
Paseo at Comm22	Mental Health Services Act	San Diego	13
The Mason	Mental Health Services Act	San Diego	16
Tavarua Senior Apartments	Mental Health Services Act	Carlsbad	10
Benson Place	Special Needs Housing Program	San Diego	25
Ivy Senior Apartments	Special Needs Housing Program	San Diego	7
New Palace Hotel	Special Needs Housing Program	San Diego	16
Post 310	Special Needs Housing Program	San Diego	10
Quality Inn	Special Needs Housing Program	San Diego	25
The Beacon Apartments	Special Needs Housing Program	San Diego	22
Trinity Place	Special Needs Housing Program	San Diego	18
Villa Serena	Special Needs Housing Program	San Marcos	8
Parker-Kier	Service-Only	San Diego	22
San Ysidro Senior Village	Service-Only	San Ysidro	12
West Park Inn	Service-Only	San Diego	23
Casa Anita	No Place Like Home	Chula Vista	24
El Cerrito*	No Place Like Home	San Diego	17
Greenbrier Village Apartments*	No Place Like Home	Oceanside	29
Milejo Village	No Place Like Home	San Ysidro	25
Nestor Senior Village*	No Place Like Home	San Diego	35
Santa Fe Senior Village*	No Place Like Home	Vista	25
Southwest Village Apartments*	No Place Like Home	San Diego	16
St. Theresa of Calcutta Villa	No Place Like Home	San Diego	60
Valley Senior Village	No Place Like Home	Escondido	24
Windsor Pointe	No Place Like Home	Carlsbad	24
Kearny Vista	Homekey	San Diego	142
Valley Vista	Homekey	San Diego	190
Pacific Village*	Homekey	San Diego	62
Abbott Wakeland*	Homekey	San Diego	13
<b>Total Number of Developments</b>	<b>39</b>	<b>Total Number of Permanent Supportive Housing Units</b>	<b>1,093</b>

\*Housing developments have not opened but are in the leasing process.