

CONTRA COSTA COUNTY

309 Diablo Rd., Danville | 11780 San Pablo Ave, Suite D, El Cerrito



AGENDA

Monday, May 12, 2025

10:30 AM

Family and Human Services Committee

Supervisor Candace Andersen, Chair

Supervisor John Gioia, Vice Chair

*<https://cccouny-us.zoom.us/j/81538392261> | USA 888-278-0254 Conference
code: 382517*

The public may attend this meeting in person at either above location. The public may also attend this meeting remotely via Zoom or call-in.

Agenda Items: Items may be taken out of order based on the business of the day and preference of the Committee.

1. Introductions
2. Public comment on any item under the jurisdiction of the Committee and not on this agenda (speakers may be limited to two (2) minutes).
3. RECEIVE and APPROVE the Record of Action for the April 14, 2025 Family and Human Services Committee (FHS) meeting. (Danielle Fokkema, Sr. Deputy County Administrator) [25-1714](#)
Attachments: [Draft ROA 4.14.25](#)
4. CONSIDER recommending to the Board of Supervisors the appointment of Brock Dubbels to the Member At-Large #12 Seat on the Advisory Council on Aging for a term ending September 30, 2026, as recommended by the Council. [25-1715](#)
Attachments: [Dubbels, Brock ACOA Application Redacted](#)
[ACOA Roster](#)
5. CONSIDER accepting the Council on Homelessness (COH) Quarter 1 report and directing staff to forward the report to the Board of Supervisors for their information. (Jaime Jenett, Staff to the COH) [25-1716](#)
Attachments: [Q1 2025 COH report to FHS](#)
[Q1-2025 Report](#)
6. CONSIDER accepting the report from the Employment and Human Services Department (EHSD) on SNAP/CalFresh and directing staff to forward the report to the Board of Supervisors for their information, as recommended by the EHSD Director. (Angela Bullock-Hayes, Workforce Services Director) [25-1717](#)
Attachments: [2025 FHS CalFresh Presentation](#)
7. CONSIDER accepting the report from the Behavioral Health Division of the Health Services Department on the Opioid Crisis in Contra Costa County, and FORWARD to the Board of Supervisors for discussion. (Dr. Suzanne Tavano, Director of Behavioral Health Services; Fatima Matal Sol, Alcohol and Other Drugs Services (AODS) Program Chief; Elissa Kim, MPH, Opioid Response County Coordinator) [25-1718](#)
Attachments: [FHS Opioid Presentation 5-12-2025](#)
[FHS Opioid Settlement Funds Program Report 5-12-2025](#)

The next meeting is currently scheduled for June 9, 2025.

Adjourn

General Information

This meeting provides reasonable accommodations for persons with disabilities planning to attend a the meetings. Contact the staff person listed below at least 72 hours before the meeting. Any disclosable public records related to an open session item on a regular meeting agenda and distributed by the County to a majority of members of the Committee less than 96 hours prior to that meeting are available for public inspection at 1025 Escobar St., 4th Floor, Martinez, during normal business hours. Staff reports related to items on the agenda are also accessible on line at www.co.contra-costa.ca.us.

HOW TO PROVIDE PUBLIC COMMENT:

Persons who wish to address the Committee during public comment on matters within the jurisdiction of the Committee that are not on the agenda, or who wish to comment with respect to an item on the agenda, may comment in person, via Zoom, or via call-in. Those participating in person should offer comments when invited by the Committee Chair. Those participating via Zoom should indicate they wish to speak by using the “raise your hand” feature in the Zoom app. Those calling in should indicate they wish to speak by pushing *9 on their phones.

Public comments generally will be limited to two (2) minutes per speaker. In the interest of facilitating the business of the Board Committee, the total amount of time that a member of the public may use in addressing the Board Committee on all agenda items is 10 minutes. Your patience is appreciated.

Public comments may also be submitted to Committee staff before the meeting by email or by voicemail. Comments submitted by email or voicemail will be included in the record of the meeting but will not be read or played aloud during the meeting.

For Additional Information Contact: Danielle Fokkema (925) 955-2047



CONTRA COSTA COUNTY

1025 ESCOBAR STREET
MARTINEZ, CA 94553

Staff Report

File #: 25-1714

Agenda Date: 5/12/2025

Agenda #: 3.

FAMILY & HUMAN SERVICES COMMITTEE

Meeting Date: May 12, 2025
Subject: Record of Action for April 14, 2025
Submitted For: Family and Human Services Committee
Department: County Administrator
Referral No: N/A
Referral Name: N/A
Presenter: Danielle Fokkema, Sr. Deputy County Administrator
Contact: Danielle Fokkema, (925) 655-2047

Referral History:

County Ordinance requires that each County body keep a record of its meetings. Though the record need not be verbatim, it must accurately reflect the agenda, and the decisions made in the meeting.

Referral Update:

Attached is the record of action for the April 14, 2025, Family and Human Services Committee meeting.

Recommendation(s)/Next Step(s):

RECEIVE and APPROVE the Record of Action for the April 14, 2025, Family and Human Services Committee meeting.

Fiscal Impact (if any):

There is no fiscal impact.



Meeting Minutes - Draft

CONTRA COSTA COUNTY Family and Human Services Committee

Supervisor Candace Andersen, Chair
Supervisor John Gioia, Vice Chair

<https://cccounty-us.zoom.us/j/81538392261> | USA
888-278-0254 Conference code: 382517

Monday, April 14, 2025

**10:30 AM 338 Mt. Diablo Blvd., Lafayette | 11780 San
Pablo Avenue, Suite D., El Cerrito
<https://cccounty-us.zoom.us/j/81538392261> |
USA 888-278-0254 Conference code: 382517**

The public may attend this meeting in person at either above location. The public may also attend this meeting remotely via Zoom or call-in.

Supervisor Andersen called the meeting to order at 10:30 a.m.

Agenda Items: Items may be taken out of order based on the business of the day and preference of the Committee.

1. Introductions
2. Public comment on any item under the jurisdiction of the Committee and not on this agenda (speakers may be limited to two (2) minutes).

Public Comment was moved to the end of the meeting.

One person spoke during Public Comment.

3. RECEIVE and APPROVE the Record of Action for the March 10, 2025 [25-1305](#)
Family and Human Services Committee (FHS) meeting. (Laura Strobel, Sr.
Deputy County Administrator)

Attachments: [Draft ROA 3.10.25](#)

The Committee approved the Record of Action for the March 10, 2025, meeting as presented.

4. CONSIDER recommending to the Board of Supervisors the appointment of [25-1306](#)
Sharon Maxwell to the Member At-Large #8 Seat, with a term ending
September 30, 2026, on the Advisory Council on Aging, as recommended
by the Council. (Tracy Murray, Aging and Adult Services Director)

Attachments: [Maxwell, Sharon Application_Redacted](#)
[ACOA Roster](#)

The Committee approved the appointment for the Board of Supervisors approval as recommended.

5. CONSIDER recommending to the Board of Supervisors the reappointment of Dena Acosta-Beere to the At-Large #1 seat and Jennifer Rizzo to the At-Large #2 seat on the Contra Costa Commission for Women and Girls with terms expiring February 28, 2029, as recommended by the Commission. (Chrystine Robbins, Sr. Management Analyst) [25-1307](#)

Attachments: [Acosta-Beere, Dena Application_Redacted](#)
[Rizzo, Jennifer Application_Redacted](#)
[CCCWG Roster](#)

The Committee approved the appointments for the Board of Supervisors approval as recommended.

6. CONSIDER approving the funding recommendations for FY 2025/26 Community Development Block Grant - Public Service category and Emergency Solutions Grant projects, and directing staff to prepare a report inclusive of the FHS recommendations for Board of Supervisors approval. (Gabriel Lemus, Department of Conservation and Development Assistant Deputy Director) [25-1308](#)

Attachments: [FHS Committee Memo re FY 2025-26.Funding Recommendations PS and ESG Categories with Attachments](#)

Two people spoke during Public Comment.

Staff from the Department of Conservation and Development reported an error on page 47 of the presentation. The FY26-27 Recommended Funding for the Bay Area Crisis Nursery should reflect the amount of \$17,000 and will be corrected prior to submission to the Board of Supervisors.

The Employment and Human Services Department will follow-up on services currently being provided by La Clinica through separate agreements and will report to the Board of Supervisors.

The Committee approve the funding recommendations and directed staff to forward it to the Board of Supervisors for their information.

7. CONSIDER accepting the report from the Employment and Human Services Department (EHSD) on Aging and Adult Services and directing staff to forward the report to the Board of Supervisors for their information. (Tracy Murray, Aging and Adult Services Director) [25-1309](#)

Attachments: [FHS Aging Adult Services April 2025](#)

The Committee accepted the report and approved staff forwarding it to the Board of Supervisors for their information.

8. CONSIDER accepting an update from the Behavioral Health Division of the Health Services Department on the Behavioral Health Board, approving the appointment of Rebecca Harper to the Education seat, Anthony Arias to the Veteran seat, Logan Campbell to the At-Large seat, Anya Gupta to the [25-1310](#)

Youth seat and forwarding to the Board of Supervisors for their approval.
(Dr. Suzanne Tavano, Director of Behavioral Health Services)

Attachments:

[SB326 Update 4-14-25](#)

[Arias Anthony - BHB Veteran](#)

[Campbell, Logan - BHB At Large](#)

[Gupta Anya - BHB Youth](#)

[Harper Rebecca - BHB Education](#)

[Behavioral Health Board Applicants](#)

[Behavioral Health Board Applications - District 1](#)

[Behavioral Health Board Applications - District 2](#)

[Behavioral Health Board Applications - District 3](#)

[Behavioral Health Board Applications - District 4](#)

[Behavioral Health Board Applications - District 5](#)

The Committee approved the appointments for the Board of Supervisors approval as recommended. Additionally, the Committee directed that Behavioral Health create two alternate seats.

The Committee directed staff to forward the item, along with recommendations for the District 1 Consumer seat and Family seat, for approval by the Board of Supervisors at the April 28, 2025 meeting, as requested by Health Services.

Supervisor Gioia left the meeting at 11:52 a.m.

9. CONSIDER accepting the report from the Behavioral Health Division of the Health Services Department on the Public Mental Health Care System, and directing staff to forward the report to the Board of Supervisors for their information. (Dr. Suzanne Tavano, Director of Behavioral Health Services)

25-1311

Attachments:

[Behavioral Health Transformation 4.14.25](#)

One person spoke during Public Comment.

The Committee accepted the report and approved staff forwarding it to the Board of Supervisors for their information.

The next meeting is currently scheduled for May 12, 2025

Adjourn

The meeting was adjourned at 12:42 p.m.

General Information

This meeting provides reasonable accommodations for persons with disabilities planning to attend a the meetings. Contact the staff person listed below at least 72 hours before the meeting. Any disclosable public records related to an open session item on a regular meeting agenda and distributed by the County to a majority of members of the Committee less than 96 hours prior to that meeting are available for public inspection at 1025 Escobar St., 4th Floor, Martinez, during normal business hours. Staff reports related to items on the agenda are also accessible on line at www.co.contra-costa.ca.us.

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For Additional Information Contact: Danielle Fokkema (925) 655-2047



CONTRA COSTA COUNTY

1025 ESCOBAR STREET
MARTINEZ, CA 94553

Staff Report

File #: 25-1715

Agenda Date: 5/12/2025

Agenda #: 4.

FAMILY & HUMAN SERVICES COMMITTEE

Meeting Date: May 12, 2025
Subject: Appointment to the Advisory Council on Aging
Submitted For: Marla Stuart, Director
Department: Employment and Human Services
Referral No: N/A
Referral Name: Appointments to Advisory Bodies
Presenter: Tracy Murray, Aging and Adult Services Director
Contact: Tracy Murray, (925) 608-4805

Referral History:

On January 7, 2020, the Board of Supervisors adopted Resolution No. 2020/1 adopting policy amendments governing appointments to boards, committees, and commissions that are advisory to the Board of Supervisors. Included in this resolution was a requirement that applications for at-large/countywide seats be reviewed by a Board of Supervisors committee.

The Advisory Council on Aging (ACOA) provides a means for county-wide planning, cooperation and coordination for individuals and groups interested in improving and developing services and opportunities for the older residents of this County. The Council provides leadership and advocacy on behalf of older persons and serves as a channel of communication and information on aging.

The Advisory Council on Aging consists of 40 members serving 2-year staggered terms, each ending on September 30. The Council consists of representatives of the target population and the general public, including older low-income and military persons; at least one-half of the membership must be made up of actual consumers of services under the Area Plan. The Council includes: 19 representatives recommended from each Local Committee on Aging, 1 representative from the Nutrition Project Council, 1 Retired Senior Volunteer Program, and 19 Members at-Large.

Pursuant to the ACOA Bylaws, the ACOA may recommend for appointment up to four (4) alternate Member-at-Large (MAL) members, who shall serve and vote in place of members (City or MAL) who are absent from, or who are disqualifying themselves from participating in a meeting of the ACOA.

The Area Agency on Aging, the ACOA and the Clerk of the Board, using Contra Costa TV (CCTV), assisted with recruitment. Area Agency on Aging staff has encouraged interested individuals including minorities to apply through announcements provided at the Senior Coalition meetings and at the regular monthly meetings of the ACOA. The Contra Costa County Employment and Human Services Department (EHSD) website contains dedicated web content where interested members of the public are encouraged to apply. The website provides

access to the Board of Supervisors' official application with instructions on whom to contact for ACOA related inquiries, including application procedures.

Referral Update:

Brock Dubbels submitted an application for ACOA membership on March 2, 2025. The ACOA Membership Committee interviewed Brock Dubbels on March 19, 2025 and recommended that he fill the MAL #12 seat. At the general meeting of the ACOA on April 16, 2025, members of the ACOA voted unanimously to approve Brock Dubbels' appointment to fill the MAL #12 seat.

Recommendation(s)/Next Step(s):

RECOMMEND to the Board of Supervisors the appointment Brock Dubbels to the Member At-Large #12 Seat on the Advisory Council on Aging for a term ending September 30, 2026.

Fiscal Impact (if any):

There is no fiscal impact for this action.



BOARDS, COMMITTEES, AND COMMISSIONS APPLICATION

First Name Brooke Middle Initial R. Last Name Dunkels

Home Address - Street [REDACTED] City Walnut Creek State CA Postal Code 94598

Primary Phone (best number to reach you) [REDACTED] Email Address [REDACTED]

Resident of Supervisorial District (if out of County, please enter N/A): Yes [District Locator Tool](#)

Do you work in Contra Costa County? ☐ Yes ☒ No If Yes, in which District do you work?

Current Employer Walman Global Tech Job Title Principal Research Length of Employment 13 years

How long have you lived or worked in Contra Costa County? 7 years

Board, Committee, or Commission Advisory Council on Aging Seat Name A-Large

Have you ever attended a meeting of the advisory board for which you are applying?

Please check one: ☒ Yes ☐ No If Yes, how many? 1

EDUCATION

Check appropriate box if you possess one of the following:

☐ High School Diploma ☐ CA High School Proficiency Certificate ☐ G.E.D. Certificate

| Colleges or Universities Attended | Degree Type/ Course of Study/Major | Degree Awarded |
|-------------------------------------|------------------------------------|---|
| <u>Wmms State</u> | <u>BS English</u> | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| <u>University of Mn Twin Cities</u> | <u>Ph.D</u> | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| <u>McMaster University</u> | <u>Post-Doctoral</u> | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |

Occupational Licenses Completed: Public school teacher/librarian

Other Trainings Completed:

Certificate Awarded for Training? ☐ Yes ☐ No

Do you have any obligations that might affect your attendance at scheduled meetings? ☐ Yes ☒ No

If Yes, please explain:

Would you like to be considered for appointment to other advisory bodies for which you may be qualified? ☒ Yes ☐ No

Are you a veteran of the U.S. Armed Forces? ☐ Yes ☒ No

Please explain why you would like to serve on this particular board, committee, or commission.

Advocacy + Impact: improve the lives of elders in community and their caregivers + families who support them.
Professional Growth: bring to share 20 years of psychological research in gerontology + tech.
Personal Fulfillment: engage in purposeful work.
Community engagement: foster a stronger connection in the community.

Describe your qualifications for this appointment. (NOTE: you may also include a copy of your resume).

I have 20 years of applied research experience in elder care related to isolation and quality of care. I am currently a principal scientist at the Gilbreath Center of Aging at McMaster University.

I am including my resume with this application:

Please check one: ☐ Yes ☒ No

Available on LinkedIn or
brockandbells.com

Are you currently or have you ever been appointed to a Contra Costa County advisory board?

Please check one: ☒ Yes ☐ No

If Yes, please list the Contra Costa County advisory board(s) on which you are currently serving:

THSS

If Yes, please also list the Contra Costa County advisory board(s) on which you have previously served:

List any volunteer and community experience, including any boards on which you have served.

Taught yoga at Federal Prison system.
Created Cook 2010 for public library
Cultural Equity Commission

Do you have a familial relationship with a member of the Board of Supervisors? (Please refer to the relationships listed under the "Important Information" section on page 3 of this application or Resolution No. 2021/234).

Please check one: ☐ Yes ☒ No

If Yes, please identify the nature of the relationship:

Do you have any financial relationships with the county, such as grants, contracts, or other economic relationships?

Please check one: ☐ Yes ☒ No

If Yes, please identify the nature of the relationship:

I CERTIFY that the statements made by me in this application are true, complete, and correct to the best of my knowledge and belief, and are made in good faith. I acknowledge and understand that all information in this application is publicly accessible. I understand and agree that misstatements and/or omissions of material fact may cause forfeiture of my rights to serve on a board, committee, or commission in Contra Costa County.

Signed

Date:

3/2/25

Submit this application to: ClerkofTheBoard@cob.cccounty.us OR Clerk of the Board
1025 Escobar Street, 1st Floor
Martinez, CA 94553

Questions about this application? Contact the Clerk of the Board at (925) 655-2000 or by email at ClerkofTheBoard@cob.cccounty.us

Important Information

1. This application and any attachments you provide to it is a public document and is subject to the California Public Records Act (CA Government Code §6250-6270).
2. All members of appointed bodies are required to take the advisory body training provided by Contra Costa County.
3. Members of certain boards, commissions, and committees may be required to: 1) file a Statement of Economic Interest Form also known as a Form 700, and 2) complete the State Ethics Training Course as required by AB 1234.
4. Meetings may be held in various locations and some locations may not be accessible by public transportation.
5. Meeting dates and times are subject to change and may occur up to two (2) days per month.
6. Some boards, committees, or commissions may assign members to subcommittees or work groups which may require an additional commitment of time.
7. As indicated in Board Resolution 2021/234, a person will not be eligible for appointment if he/she is related to a Board of Supervisors' member in any of the following relationships: (1) Mother, father, son, and daughter; (2) Brother, sister, grandmother, grandfather, grandson, and granddaughter; (3) Husband, wife, father-in-law, mother-in-law, son-in-law, daughter-in-law, stepson, and stepdaughter; (4) Registered domestic partner, pursuant to California Family Code section 297; (5) The relatives, as defined in 1 and 2 above, for a registered domestic partner; (6) Any person with whom a Board Member shares a financial interest as defined in the Political Reform Act (Gov't Code §87103, Financial Interest), such as a business partner or business associate.

Contra Costa Advisory Council on Aging Roster (as of 10/2023)

| Seat Title | Term Expiration | Current Incumbent | District | City of Residence | BOS Appointment Date |
|---------------------------|-----------------|------------------------|----------|-------------------|----------------------|
| At-Large 1 | 9/30/2026 | Lang, Thomas | I | El Sobrante | 3/21/2023 |
| At-Large 2 | 9/30/2026 | Krohn, Shirley | IV | Walnut Creek | 10/11/2022 |
| At-Large 3 | 9/30/2025 | Hayes, Michelle | I | Richmond | 6/13/2023 |
| At-Large 4 | 9/30/2024 | Alan Goldhammer | II | Orinda | 1/21/2025 |
| At-Large 5 | 9/30/2026 | Card, Deborah | V | Pittsburg | 10/11/2022 |
| At-Large 6 | 9/30/2026 | Lipson, Steve | I | El Cerrito | 10/11/2022 |
| At-Large 7 | 9/30/2025 | Lopez, Nicola | III | Antioch | 10/8/2024 |
| At-Large 8 | 9/30/2024 | Vacant | III | | |
| At-Large 9 | 9/30/2025 | Ortega, Julie | II | Danville | 3/5/2024 |
| At-Large 10 | 9/30/2026 | Tobey, Terri | II | Walnut Creek | 10/11/2022 |
| At-Large 11 | 9/30/2025 | Shaefer, Carol | II | Walnut Creek | 3/5/2024 |
| At-Large 12 | 9/30/2025 | Vacant | | | |
| At-Large 13 | 9/30/2025 | Boaz, Roger | II | Byron | 3/5/2024 |
| At-Large 14 | 9/30/2025 | Yee, Dennis | IV | Pleasant Hill | 10/19/2021 |
| At-Large 15 | 9/30/2025 | Robertson, Logan | IV | Concord | 3/5/2024 |
| At-Large 16 | 9/30/2025 | O'Toole, Brian | IV | Walnut Creek | 10/19/2021 |
| At-Large 17 | 9/30/2026 | Donovan, Kevin D. | II | Danville | 10/11/2022 |
| At-Large 18 | 9/30/2026 | Wener, Michael | II | Walnut Creek | 11/2/2021 |
| At-Large 19 | 9/30/2025 | Kleiner, Jill | II | Moraga | 10/19/2021 |
| At-Large 20 | 9/30/2026 | Sakai-Miller, Sharon | II | San Ramon | 3/22/2022 |
| Local Seat: Antioch | 9/30/2024 | Vacant | III | | |
| Local Seat: Brentwood | 9/30/2025 | Vacant | III | | |
| Local Seat: Clayton | 9/30/2025 | Vacant | IV | | |
| Local Seat: Concord | 9/30/2025 | Fowler, Marilyn | IV | Concord | 5/23/2023 |
| Local Seat: Danville | 9/30/2025 | Donnelly, James | II | Danville | 10/19/2021 |
| Local Seat: El Cerrito | 9/30/2026 | Kehoe, Carol | I | El Cerrito | 7/12/2022 |
| Local Seat: Hercules | 9/30/2024 | Green, Sarah | V | Hercules | 2/25/2025 |
| Local Seat: Lafayette | 9/30/2025 | Morisky, Richard | II | Lafayette | 3/5/2024 |
| Local Seat: Martinez | 9/30/2025 | Monroy-Dexter, Kathryn | V | Martinez | 11/12/2024 |
| Local Seat: Moraga | 9/30/2025 | Benavides, Francisco | II | Moraga | 4/9/2024 |
| Local Seat: Oakley | 9/30/2025 | Buckman, Chalo | III | Oakley | 2/25/2025 |
| Local Seat: Orinda | 9/30/2025 | Evans, Candace | II | Orinda | 10/19/2021 |
| Local Seat: Pinole | 9/30/2025 | Magistrado, Lori | I | Pinole | 1/19/2024 |
| Local Seat: Pittsburg | | Vacant | | | |
| Local Seat: Pleasant Hill | 9/30/2025 | Van Ackeren, Lorna | IV | Pleasant Hill | 10/19/2021 |
| Local Seat: Richmond | 9/30/2026 | Burkhart, Cate | I | Richmond | 3/21/2023 |
| Local Seat: San Pablo | | Vacant | I | | |
| Local Seat: San Ramon | | Vacant | II | | |
| Local Seat: Walnut Creek | 9/30/2025 | Kalm, Denise | IV | Walnut Creek | 4/9/2024 |

Contra Costa Advisory Council on Aging Roster (as of 10/2023)

| Seat Title | Term Expiration | Current Incumbent | District | City of Residence | BOS Appointment Date |
|---------------------------|-----------------|-------------------|----------|-------------------|----------------------|
| Nutrition Project Council | | Vacant | | | |
| Alternate Member 1 | | Vacant | | | |
| Alternate Member 2 | | Vacant | | | |
| Alternate Member 3 | | Vacant | | | |
| Alternate Member 4 | | Vacant | | | |

| | |
|--|------------------|
| | Pending Approval |
| | Vacant |



CONTRA COSTA COUNTY

1025 ESCOBAR STREET
MARTINEZ, CA 94553

Staff Report

File #: 25-1716

Agenda Date: 5/12/2025

Agenda #: 5.

FAMILY & HUMAN SERVICES COMMITTEE

Meeting Date: May 12, 2025
Subject: Council on Homelessness 2025 Quarter 1 Report
Submitted For: Ori Tzvieli, Interim Health Services Director
Department: Health Services
Referral No: 5
Referral Name: Homeless Continuum of Care - Quarterly Report
Presenter: Jaime Jenett, Health Services Community Engagement Specialist
Contact: Danielle Fokkema, (925) 655-2047

Referral History:

In November 2014, the Board approved “Forging Ahead Towards Preventing and Ending Homelessness: An Update to Contra Costa’s 2004 Strategic Plan”, that renewed the County's 2004 plan with the latest data, best practices, and community feedback and reaffirmed the County's commitment to the Housing First approach. As such, “Forging Ahead” establishes this guiding principle:

“Homelessness is first a housing issue, and necessary supports and services are critical to help people remain housed. Our system must be nimble and flexible enough to respond through shared responsibility, accountability, and transparency of the community.”

The Strategic Plan Update identifies two goals:

- 1) Decrease the length of time people experience homelessness by focusing on providing Permanent Housing and Services; and
- 2) Decrease the percentage of people who become homeless by providing Prevention activities.

To achieve these goals, three strategies emerged:

- Implement a coordinated entry/assessment system to streamline access to housing and services while addressing barriers, getting the right resources to the right people at the right time; and
- Use best, promising , and most effective practices to give the consumer the best possible experience through the strategic use of resources; and
- Develop the most effective platforms to provide access, support advocacy, and connect to the community about homelessness and available resources.

The Contra Costa Council on Homelessness (COH), a Board of Supervisors appointed body, provides advice and input on the operations of homeless services, program operations, and program development efforts in the County. The COH establishes the local process for applying, reviewing and prioritizing project applications for funding in the HUD Homeless Assistance Grant Competitions, including the Continuum of Care (CoC) Program and the Emergency Solutions Grant Program.

The County Health, Housing and Homeless Services Division (H3) of the Health Services Department partners with the COH to develop and carry out an annual action plan that identifies the objectives and benchmarks related to each of the goals and strategies of Forging Ahead. Further, H3 incorporates the strategic plan goals into its own delivery system of comprehensive services, interim housing and permanent supportive housing as well as contracting with community agencies to provide additional homeless services and housing with the goal of ending homelessness in our community.

The Council submitted its last quarterly report (2024-Q4) to the Family and Human Services Committee on February 10, 2025, which was later approved and accepted by the Board of Supervisors at their February 25, 2025 meeting.

Referral Update:

Please see the attached Council on Homelessness Quarter 1 report for updates.

Recommendation(s)/Next Step(s):

ACCEPT the Council on Homelessness Quarter 1 report, and DIRECT staff to forward the report to the Board of Supervisors for their information.

Fiscal Impact (if any):

There is no fiscal impact for this action.



COUNCIL ON HOMELESSNESS PRESENTATION

May 12, 2025

Q1, 2025 COH REPORT

SYSTEM FUNDING

Federal

- HUD CoC: \$22M for Contra Costa
- 1 new RRH project for DV survivors



POINT IN TIME COUNT

COMMUNICATIONS

- Frequently Asked Questions page
- Homelessness 101 Event



YOUTH AND YOUNG ADULT HOMELESSNESS



RECOMMENDATIONS

- Publicize CCH/Contra Costa Library "Homelessness 101" events in district newsletters when quarterly event falls in their district.



QUESTIONS?

CONTACT

Jaime Jenett, Staff to the Council on Homelessness

Jaime.jenett@cchealth.org

925-464-0152 (cell)



STAFF REPORT FROM THE CONTRA COSTA COUNCIL ON HOMELESSNESS

Contra Costa County Homeless System of Care Quarterly Report for Quarter 1, 2025 (January - March)

INTRODUCTION

The Contra Costa Council on Homelessness (CoH) is the governing and oversight body for the County homeless Continuum of Care (CoC) and is appointed by the Board of Supervisors. The Council provides advice and input to the Board of Supervisors on the operations of homeless services, program operations, and program development efforts in Contra Costa County. The Contra Costa Council on Homelessness is the governing body for the Contra Costa County Continuum of Care (CoC).

The Contra Costa CoC is comprised of multiple partners, including service providers, members of faith communities, local businesses, private and public funders, community members, education systems and law enforcement, and others who are working collaboratively to end homelessness. The COH and COC are supported by Contra Costa Health - Health, Housing & Homeless Services (H3) Division. H3 functions as the CoC administrative entity and collaborative applicant, CoC Lead Agency and Homeless Management Information System (HMIS database) Lead Agency.

The purpose of this report is to share information about the CoC and COH activities with the Contra Costa County Board of Supervisors and to provide recommendations from the COH to the County Board of Supervisors on long range planning and policy formulation that would support the county homeless CoC. This report includes information on system data, funding and policy activities, and CoC initiatives. All information will reflect activities and data for the prior quarter.

This report was produced on behalf of the CoH by H3 in collaboration with the CoH and CoC partners.

SYSTEM FUNDING

This quarter the CoC continued to monitor the impact of the new federal administration on Housing and Urban Development (HUD) Continuum of Care (CoC) funding.

FEDERAL

HUD NOFO: [HUD released the first round of award decisions in early 2025.](#) Contra Costa CoC was awarded over \$22 million dollars for all renewal projects and one new rapid rehousing project to serve survivors of domestic violence. In March 2025, HUD began issuing grant agreements for projects with new requirements such as compliance with Executive Orders. In alignment with guidance from the National Alliance to End Homelessness, the CoC recommends



grantees consult with legal counsel to understand the impact of these changes. The Council received updates on federal funding during monthly meetings.

SYSTEM INITIATIVES

The CoC regularly engages in multiple activities, partnerships, evaluations, and improvement that are designed to improve services to clients and achieve various system goals.

CoC Participant Satisfaction Survey: These annual surveys were conducted in the month of March across the 7 CoC Program Models (read about the CoC Program Models and Performance Standards here: 638258163191470000). Results analyzed and shared in quarter 2.

Communications:

- Published Frequently Asked Questions page on H3 website ([Frequently Asked Questions About Homelessness | Contra Costa Health](#))
- Hosted first “Homelessness 101” community forum at San Pablo Library in partnership with Contra Costa Library Adult Education program (3/18). Next event planned for 5/19 from 6 pm – 7:30 pm at Pittsburg Library ([Homelessness 101: Community Awareness Session | Events | Contra Costa County Library](#))

Equity: Progress towards the 2025 Work Plan included:

1. Monitor metrics related to equity in the CoC: Dashboard still being developed
2. Provide input to CoC policies and procedures: March: received an update on recommendations from the Governance Committee
3. Learn about topics and programs impacting equity in homelessness response program: Received the following presentations-"Equity Committee 101" presentation to recap the committee's history; "Funding 101" to provide an overview of funding within the Continuum of Care; CoC/CES 101 and Data Basics/HMIS 101.
4. Develop equity dashboard: Outlined dashboard framework as a tool to track and visualize data for a clearer understanding of equity in service delivery, discussing its goals, audience, and potential data. Further discussions refined its purpose for Equity Committee members while considering partners like Behavioral Health, identifying key disparities such as income, language, location, and positive outcomes.
5. Leverage partnerships to increase participation in Equity Committee, particularly PWLE: In progress
6. Develop projects and recommend priorities within CoC to address root causes of racial disparities in homeless system of care: In progress

Engagement of People with Lived Experience of Homelessness (PWLE):



- Housing Needs Assessment Process: hosted input session with Youth Action Board and group of system utilizers, HNA reDesign Steering Committee includes 3 PWLE.
- Staff hosted monthly support meetings for Council members with lived experience of homelessness
- Engaged multiple people with lived experience in Point in Time count planning and execution.

Point in Time Count (PIT):

- More than 150 volunteers and staff were trained and participated in the community observational count portion of the PIT held on the morning of Thursday, January 30, 2025.
- Completed survey gathering process.

Youth and Young Adult Homelessness

H3 and the Youth Action Board (YAB), a group of transitional aged youth with a lived experience of homelessness, remained actively engaged in advancing our youth and young adult (YYA) homelessness response. Q1 activities include:

- **YYA Community Strategic Planning:** In February, H3 launched a year-long effort to implement the [YYA Homelessness Strategic Plan](#). This plan outlines 14 first-tier and 10 second-tier actions across eight objectives, directly addressing the findings from our recent [needs assessment](#) and the voices of YYA and providers. This work will set us on a path to developing a longer-term and comprehensive coordinated community plan.
- **CoC Initiatives:** Throughout Q4, YAB members participated in key CoC initiatives including the Housing Needs Assessment Redesign Steering Committee, the Housing and Homelessness Funding RFP Panel, and the YYA Community Strategic Planning.
- **Youth Empowerment Summit:** On March 2-4, H3 staff, YAB members, and RYSE Center partners attended the Youth Empowerment Summit in Sacramento. The event brought together young people, community leaders, and service providers from across California to collaborate on preventing and ending youth homelessness.
- **YAB Meetings and Leadership Development:** The YAB held nine hybrid meetings at H3 offices in Concord and the RYSE Center in Richmond. Meetings focused on finalizing YAB bylaws, electing core leadership, creating restorative space, and the formation of three subcommittees: Communications, Outreach & Retention, and Data & Research
- **YHDP Application:** The HUD NOFO for the FY 2024 Youth Homelessness Demonstration Program (YHDP) was published on January 14, 2025, but later removed on January 28. H3, YAB, and partners remained committed to reapplying once YHDP is re-published.
- **Community Partnerships:** The YAB continued collaboration with key partners, including Rainbow Community Center and the Alameda County YAB.



- **YAB One-Year Anniversary:** In March, the YAB celebrated its official one-year anniversary with a community building and recognition of all the progress made.

GOVERNANCE/REPORTING

- The Brown Act requirement for in person attendance continues to create barriers to participation for a number of members in seats that require lived experience.
- Hosted COH Orientation on 1/9.
- At the February Council on Homelessness meeting, the Council elected Nicole Green as Chair and Juno Hedrick as Vice Chair.
- The Governance Committee met in February and March to review bylaws and consider updates and improvements.
- Polls conducted at the beginning of each Council on Homelessness regular meetings capture data on # of Council meetings previously attended, lived experience of homelessness and race/ethnicity of attendees. (See Appendix B for Q4 averages.)

MEETINGS, TRAININGS AND EVENTS

Council on Homelessness (COH) Meetings: The Council on Homelessness held three (3) regular business meetings this quarter. In addition to the regular Council on Homelessness meetings, the following committees met:

| Committee | Purpose |
|---------------------------|--|
| Equity Committee | Create accessible information, outreach, and educational materials to engage hard to reach or previously unreached communities in Contra Costa County. |
| Governance Committee | Review and revise the Governance Charter and Bylaws to increase CoH efficiency and impact. |
| HMIS Policy Committee | Develops and shares updates on Homeless Management Information System (HMIS) policies & practices, compliance, & troubleshooting. Plans technical assistance & training. |
| Nominating Committee | Reviews application tools and process for potential new CoH members. |
| Oversight Committee | Reviewing and assessing the development, implementation, and improvement of the CoC, Coordinated Entry System, HMIS database, and system outcomes |
| PATH Innovation Committee | Work towards the goal of reducing unsheltered homeless in Contra Costa County by 75% . |

Trainings



- Meeting the Housing Needs of People With Criminal Records (1.13.25)
- Housing First (2.10.25)
- Supporting Families with Minor Children and Unaccompanied Minors (3.10.25)

Events

- CoC Provider Meetings (3)
- Homeless-Workforce Integration Network field trip to Lao Community Family Development location in San Pablo (2/26)

The recordings, minutes and materials for trainings and meetings can be found on the H3 website¹ and on the County agenda center², and a calendar of upcoming meetings and events can be found on the H3 website.

RECOMMENDATIONS

- Publicize CCH/Contra Costa Library "Homelessness 101" events in district newsletters when quarterly event falls in their district.

¹ [Trainings | Contra Costa Health \(cchealth.org\)](https://www.contracosta.ca.gov/agendacenter)

² <https://www.contracosta.ca.gov/agendacenter>



APPENDIX A

Commonly Used Acronyms and Terms

| Acronym | Definition |
|-------------------------|--|
| APR | Annual Performance Report (for HUD homeless programs) |
| BIPOC | Black and Indigenous People of Color |
| CARE | Coordinated Assessment and Resource |
| CCYCS | Contra Costa Youth Continuum of Services |
| CDBG, CDBG-CV | Community Development Block Grant (federal and state programs) and the federal Community Development Block Grant CARES Act coronavirus allocation. |
| CESH | California Emergency Solutions and Housing program (state funding) |
| Continuum of Care (CoC) | Continuum of Care approach to assistance to the homeless. Federal grant program promoting and funding permanent solutions to homelessness. |
| Con Plan | Consolidated Plan, a locally developed plan for housing assistance and urban development under CDBG. |
| CORE | Coordinated Outreach Referral, Engagement program |
| COVID-19 | Coronavirus |
| DCD | (Contra Costa County) Department of Conservation and Development |
| DOC | Department Operations Center |
| EHSD | (Contra Costa County) Employment and Human Services Division |
| EOC | Emergency Operations Center |
| ESG and ESG-CV | Emergency Solutions Grant (federal and state program) and the federal Emergency Solutions Grant CARES Act coronavirus allocation. |
| ESG-CV | Emergency Solutions Grant CARES |
| FMR | Fair Market Rent (maximum rent for Section 8 rental assistance/CoC grants) |
| HCD | Housing and Community Development (State office) |
| HEAP | Homeless Emergency Aid Program (State funding) |
| HEARTH | Homeless Emergency and Rapid Transition to Housing (HEARTH) Act of 2009 |
| HHAP | Homeless Housing and Assistance Program |
| HMIS | Homeless Management Information System |
| HOME | Home Investment Partnerships (CPD program) |
| HUD | U.S. Department of Housing and Urban Development (federal) |
| MHSA | Mental Health Services Act |
| NOFA/NOFO | Notice of Funding Availability/ Notice of Funding Opportunity |
| PHA | Public Housing Authority |
| PUI | Persons Under Investigation |
| PWLE | People With Lived Experience of Homelessness |
| SAMHSA | Substance Abuse & Mental Health Services Administration |
| SRO | Single-Room Occupancy housing units |
| SSDI | Social Security Disability Income |
| SSI | Supplemental Security Income |
| TA | Technical Assistance |



COH QUARTERLY REPORT

| | |
|----------|---|
| TAY | Transition Age Youth (usually ages 18-24) |
| VA | Veterans Affairs (U.S. Department of) |
| VASH | Veterans Affairs Supportive Housing |
| VI-SPDAT | Vulnerability Index – Service Prioritization Decision Assistance Tool |

APPENDIX B

Poll Question Answers Q1

How many Council on Homelessness meetings have you attended?

Q4 avg

| | |
|---------------------------------|-----|
| This is my first meeting | 16% |
| I've attended some meetings | 24% |
| I've attended a lot of meetings | 45% |
| I prefer not to answer | 0% |

Do you have lived experience of homelessness?

| | |
|------------------------------|-----|
| Yes, currently | 6% |
| Yes, within the past 7 years | 4% |
| Yes, more than 7 years ago | 19% |
| No | 73% |
| I prefer not to answer | 0% |

What best describes your racial identity?*

| | |
|--|-----|
| African American/Black | 12% |
| American Indian/Alaskan Native | 10% |
| Asian/Pacific Islander/Native Hawaiian | 7% |
| Hispanic/Latinx | 21% |
| White | 40% |
| Multi-racial | 7% |
| I prefer not to answer | 1% |
| I describe myself in another way | 2% |

*This category allows people to select multiple options



CONTRA COSTA COUNTY

1025 ESCOBAR STREET
MARTINEZ, CA 94553

Staff Report

File #: 25-1717

Agenda Date: 5/12/2025

Agenda #: 6.

FAMILY & HUMAN SERVICES COMMITTEE

Meeting Date: May 12, 2025
Subject: SNAP/CalFRESH Program Annual Update
Submitted For: Marla Stuart, Director
Department: Employment and Human Services
Referral No: 103
Referral Name: SNAP/CalFRESH Update
Presenter: Angela Bullock-Hayes, Workforce Services Director
Contact: Danielle Fokkema, (925) 655-2047

Referral History:

The SNAP Program was originally referred to the Family and Human Services Committee (FHS) by the Board of Supervisors on February 15, 2011. This program was formerly known as Food Stamps and is currently known as the Federal Supplemental Nutrition Assistance Program (SNAP). In California, the name of the program is CalFresh. The Employment and Human Services Department (EHSD) has presented periodic status reports to the FHS related to concerns about extended wait times for benefits and the impact of the expansion of CalFresh benefits to SSI (Supplemental Security Income/Supplementary Payments) recipients. The last update was made to FHS on May 20, 2024.

Referral Update:

Please see the attached report providing an update on the Employment and Human Services Department's SNAP/CalFresh program.

Recommendation(s)/Next Step(s):

ACCEPT the report from the Employment and Human Services Department (EHSD) on SNAP/CalFresh and directing staff to forward the report to the Board of Supervisors for their information.

Fiscal Impact (if any):

There is no fiscal impact.



CalFresh Report

May 12, 2025

Angela Bullock-Hayes, Workforce Services Director
info@ehsd.cccounty.us | 925-608-4800

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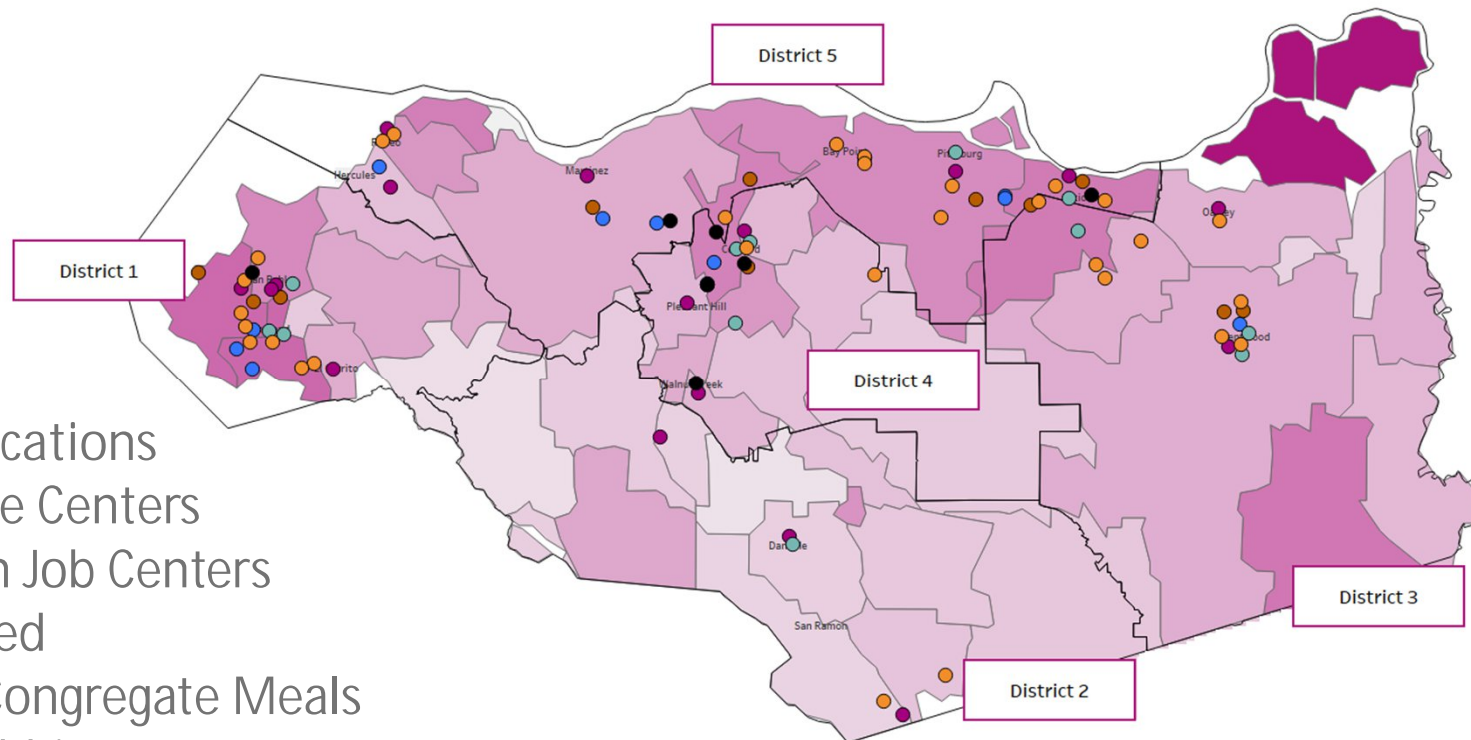
- Community Need
- Client Portfolio
- Client Experience
- Legislation

Building Brighter Futures Together

Community Need

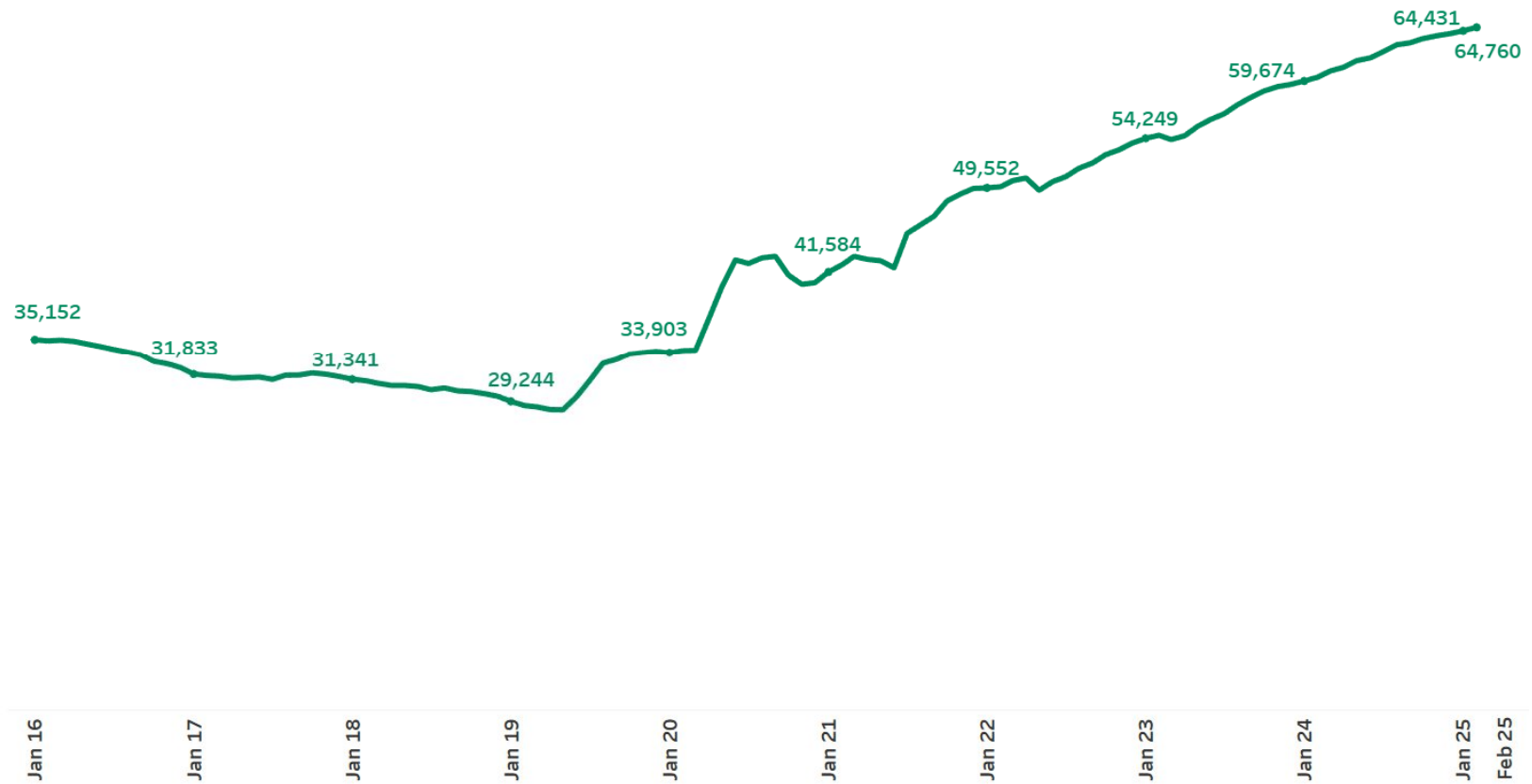


Uneven Poverty Distribution



- 91 EHSD Locations
- Child Care Centers
 - American Job Centers
 - Co-Located
 - Seniors Congregate Meals
 - Public Lobbies
 - Administrative Offices

Active Households

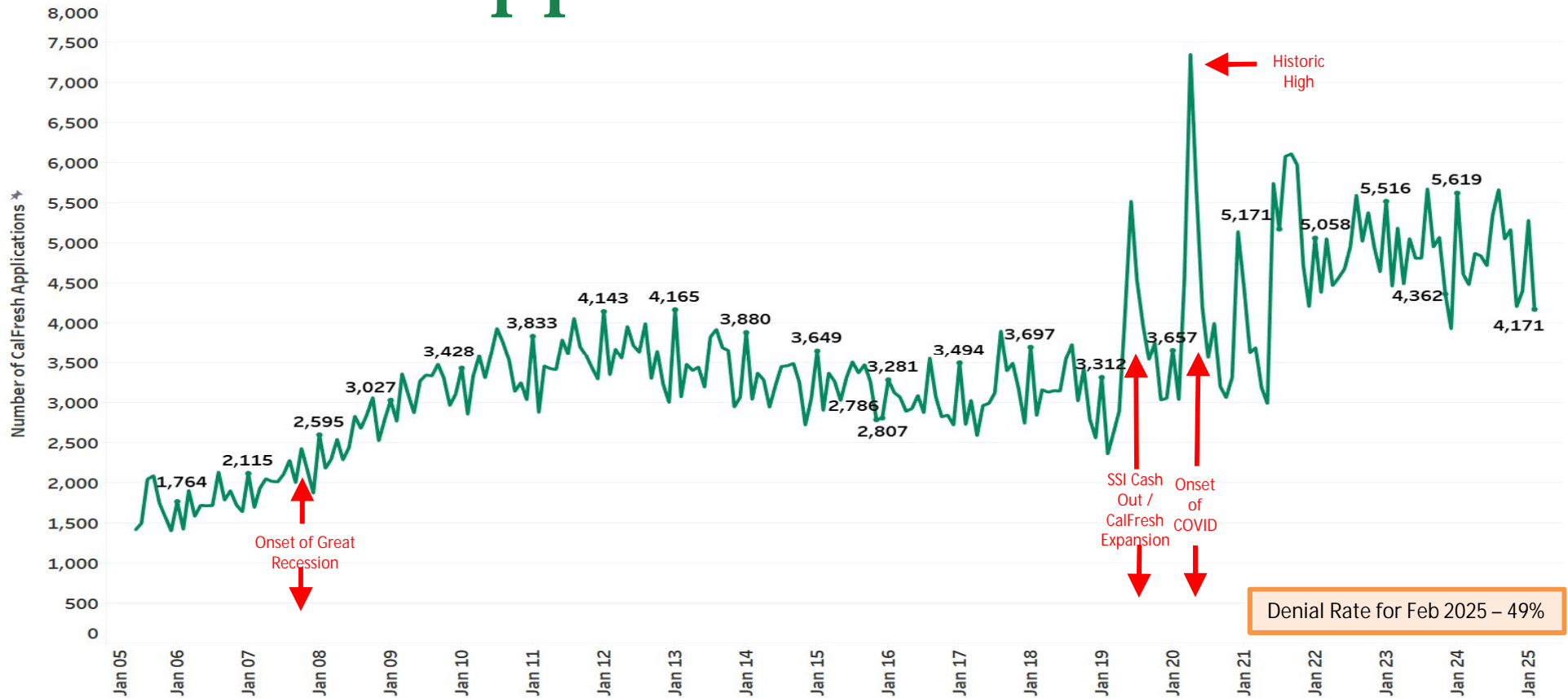


CONTRA COSTA COUNTY

EMPLOYMENT & HUMAN SERVICES

Data Source: CalWIN: Jan 2016 – Feb 2023; CalSAWS: Mar 2023 – Feb 2025, Avg Household size = 1.7

Application Trends

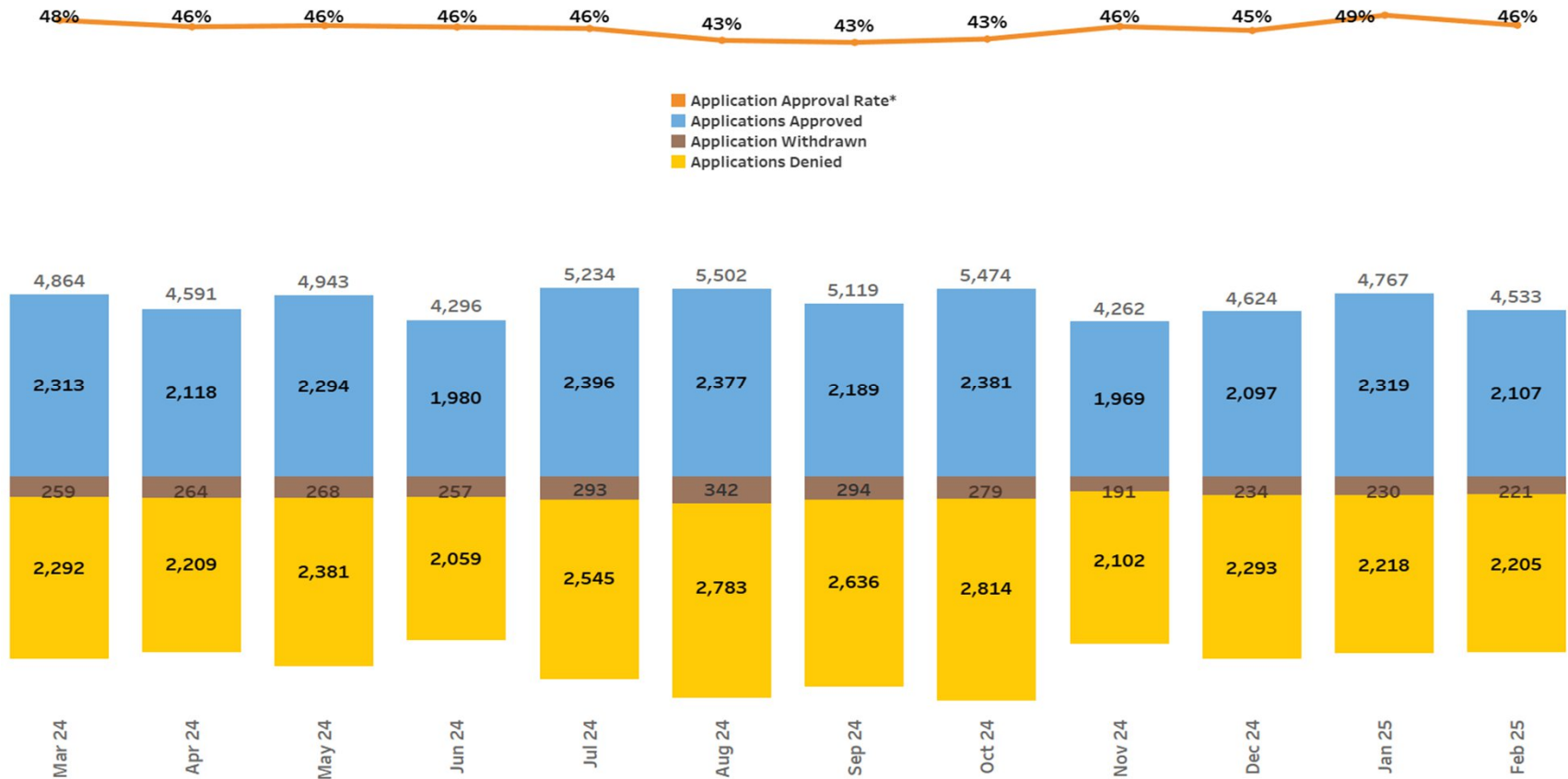


CONTRA COSTA COUNTY

EMPLOYMENT & HUMAN SERVICES

Data Source: CalSAWS; Census ACS 5-Year Table DP05 for Contra Costa population counts; Population counts for) used for 2022, 2023, and 2024. Denial Rate is the number of CalFresh applications denied divided by the number of CalFresh applications disposed during the month.

Application Approval Rate

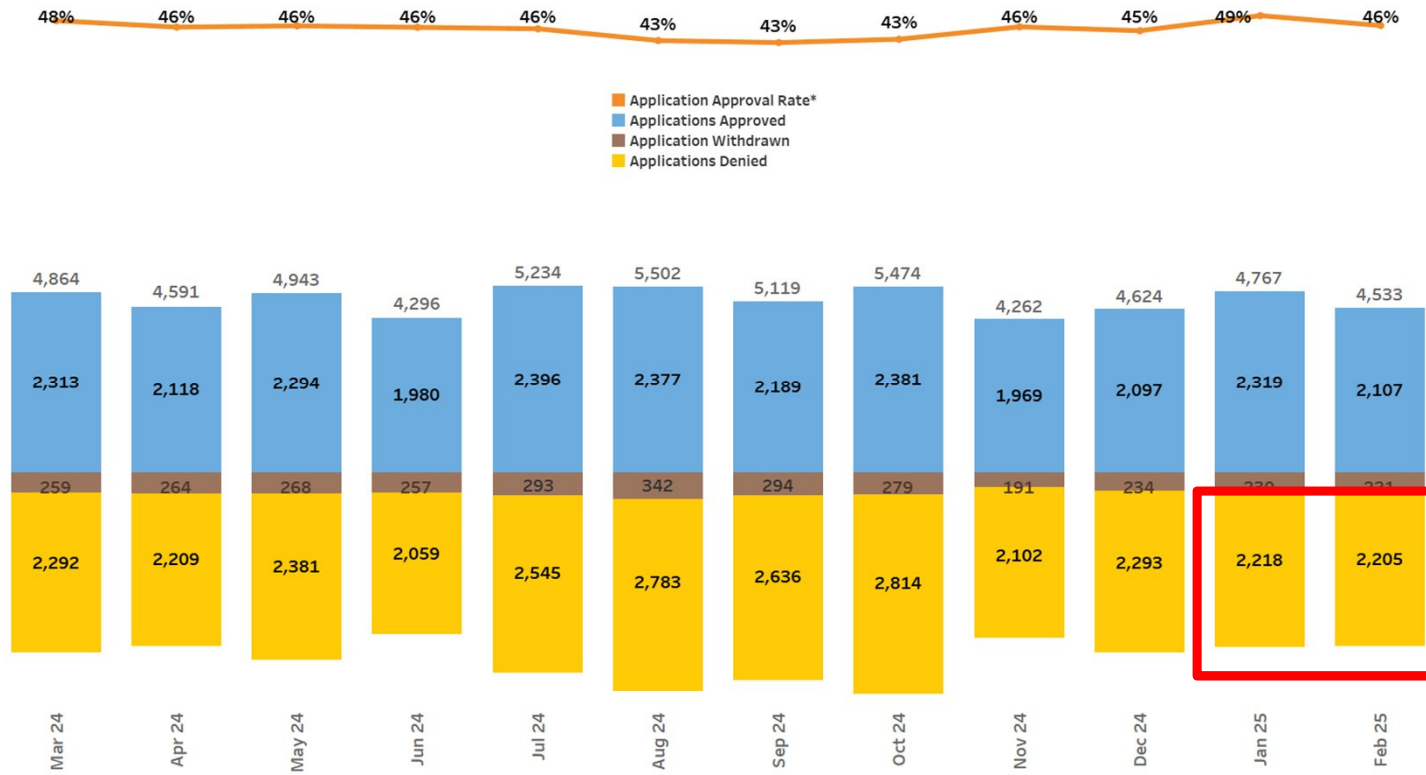


CONTRA COSTA COUNTY

EMPLOYMENT & HUMAN SERVICES

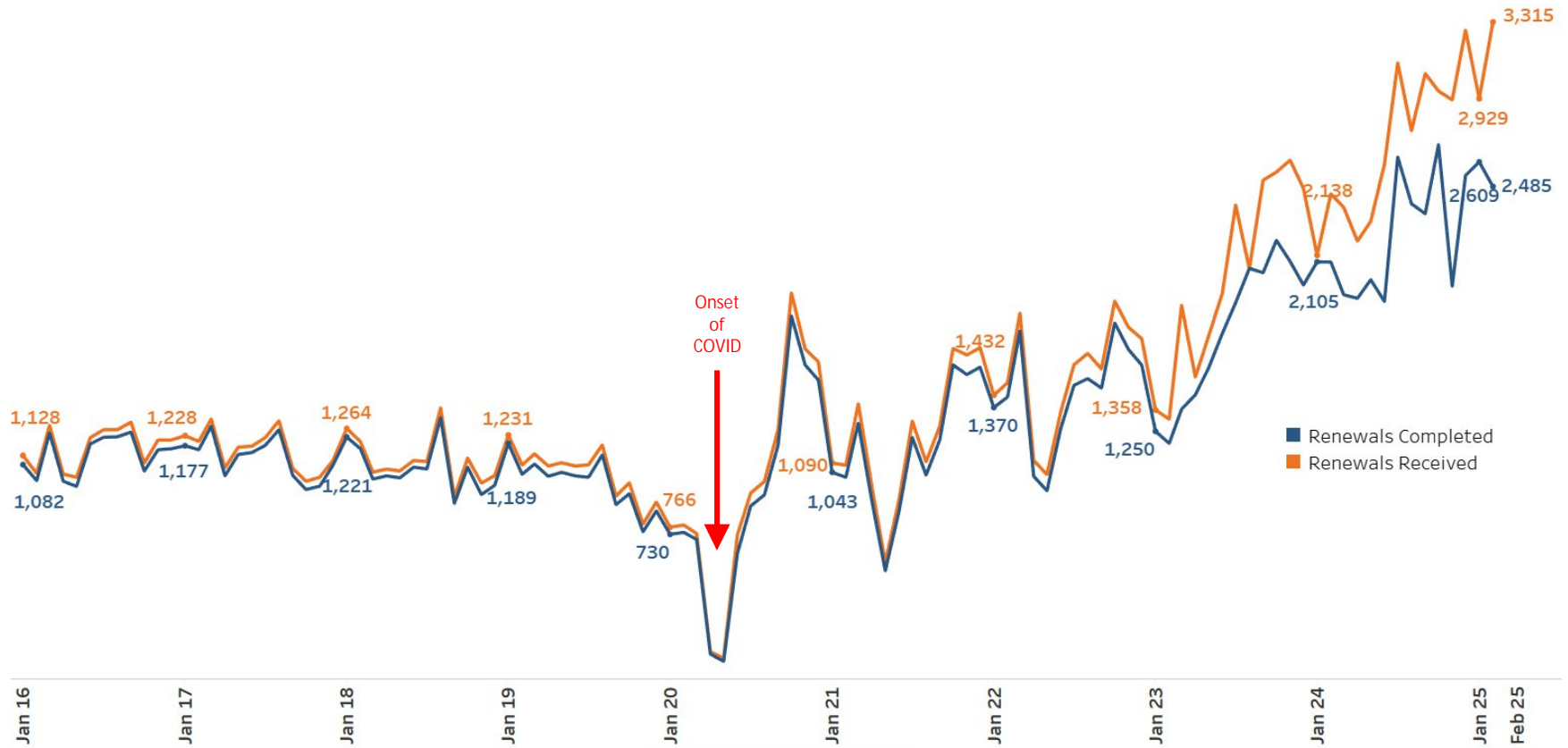
Note: Approval Rate is the number of CalFresh applications approved divided by the number of CalFresh applications disposed during the month.
Data Source: CalSAWS

Top Denial Reasons



| Top Denial Reasons January and February 2025 | | |
|---|--------------|--------------|
| Category | Jan 2025 | Feb 2025 |
| Missed CF Application Interview | 654 (29%) | 668 (30%) |
| Over Income | 376 (17%) | 380 (17%) |
| Failed to Complete Application | 358 (16%) | 350 (16%) |
| Verbal Withdrawal | 216 (10%) | 205 (9%) |
| No Eligible Household Member | 209 (9%) | 185 (8%) |

Renewals

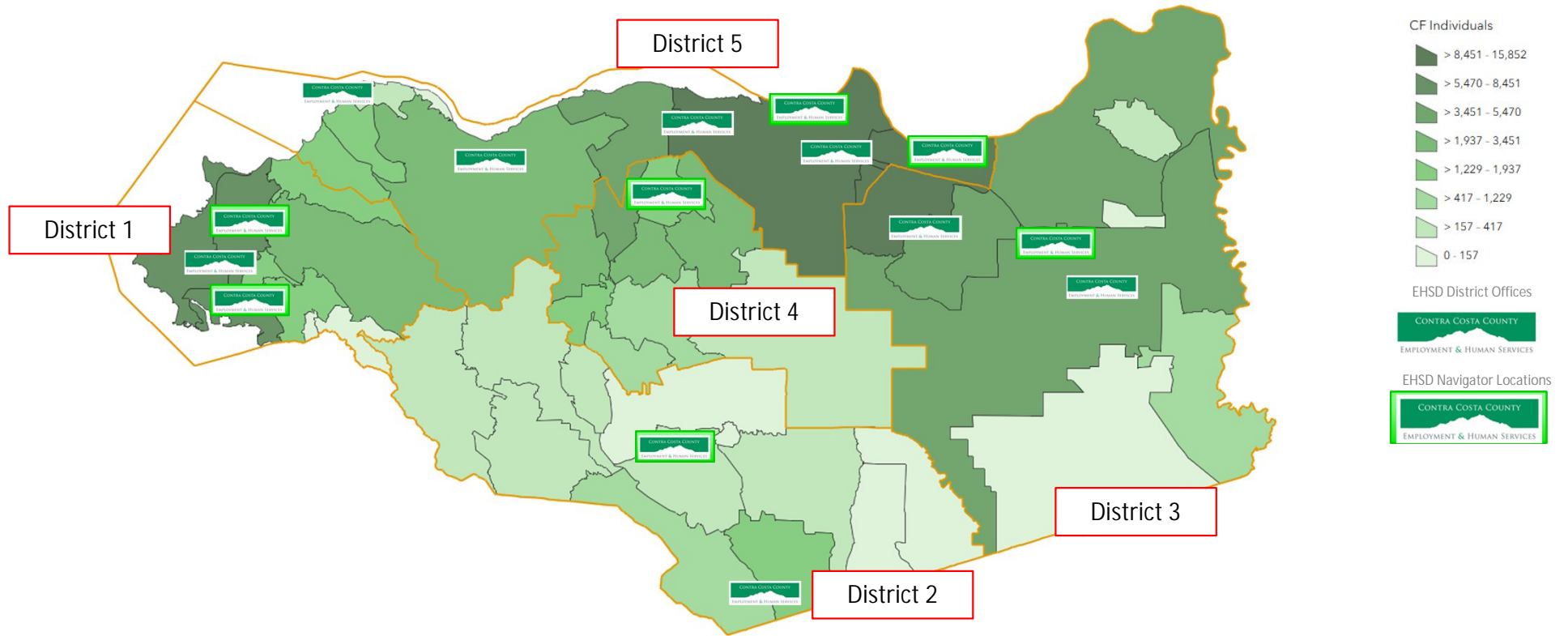


CONTRA COSTA COUNTY

EMPLOYMENT & HUMAN SERVICES

Data Source: Jan 2016 – Feb 2023 – CalWIN; March 2023 – Feb 2025 - CalSAWS CalFresh Renewals Processing Report

Individuals by District February 2025



Data Source: CalSAWS

CONTRA COSTA COUNTY
EMPLOYMENT & HUMAN SERVICES

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February 2025 CalFresh Individuals

| District | # of CF Individuals | % of CF Individuals | # of CF Households | % of CF Households | % of District Population |
|----------|------------------------|------------------------|-----------------------|-----------------------|-----------------------------|
| 1 | 28,657 | 26% | 17,463 | 27% | 13% |
| 2 | 4,787 | 4% | 3,161 | 5% | 2% |
| 3 | 26,016 | 24% | 14,214 | 22% | 12% |
| 4 | 17,382 | 16% | 10,368 | 16% | 7% |
| 5 | 31,182 | 28% | 18,508 | 29% | 14% |
| Other | 1,892 | 2% | 918 | 1% | 0% |
| Total | 109,916 | 100% | 64,632 | 100% | 10% |

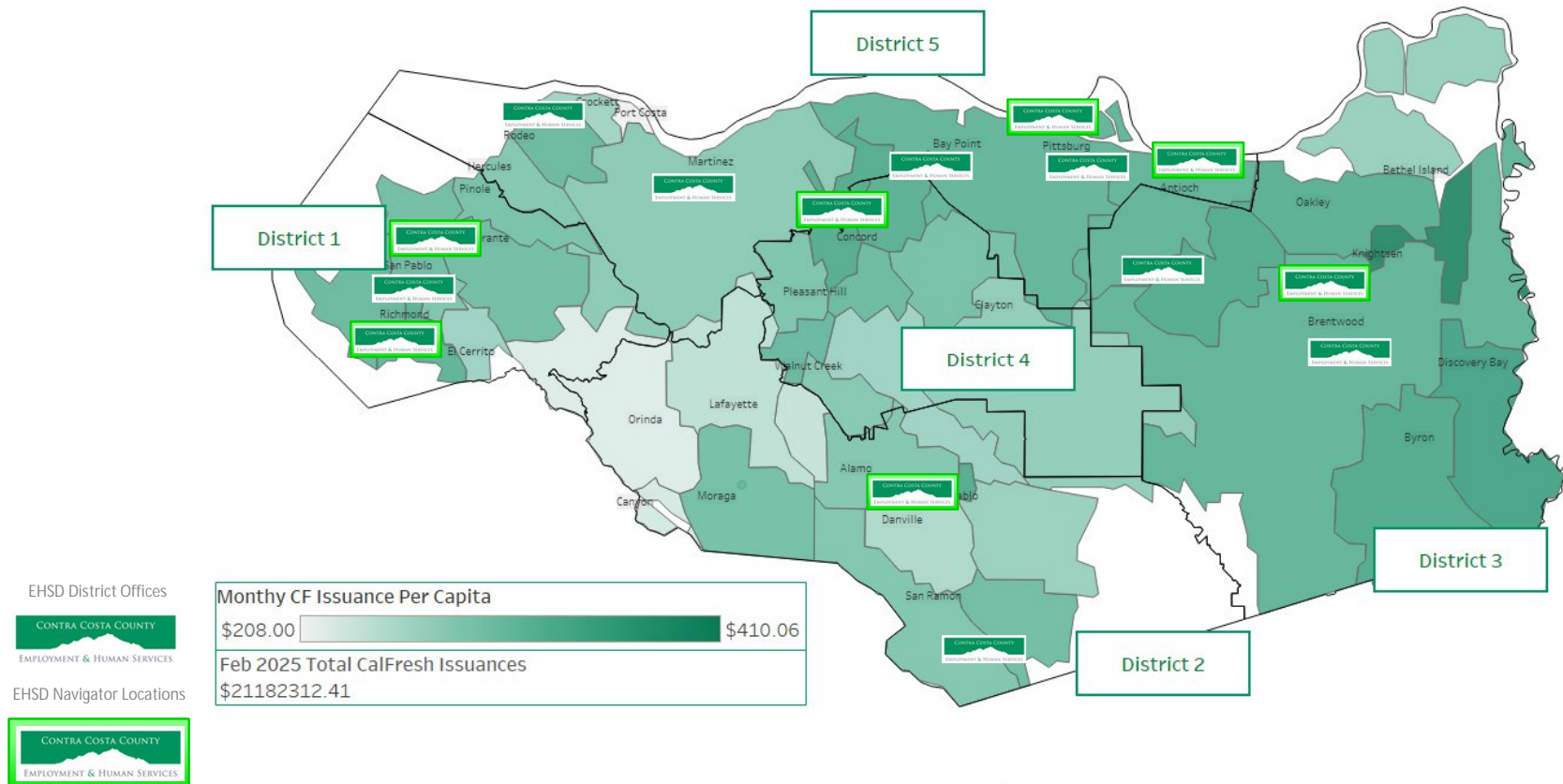
CONTRA COSTA COUNTY

EMPLOYMENT & HUMAN SERVICES

Data Source: CalSAWS

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Issuances by District February 2025



Data Source: CalSAWS

CONTRA COSTA COUNTY
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February 2025 CalFresh Issuances

| District | # of Issuances | Total Issuances in \$ | # of HH Receiving | Average Issuance per HH | # of HH in District | % of HH Receiving |
|----------|----------------|-----------------------------|----------------------|-------------------------------|------------------------|----------------------|
| 1 | 17,152 | \$5,201,402 | 16,158 | \$322 | 79,837 | 20% |
| 2 | 3,335 | \$902,885 | 3,146 | \$287 | 99,826 | 3% |
| 3 | 19,282 | \$6,175,069 | 18,217 | \$339 | 80,448 | 23% |
| 4 | 11,665 | \$3,570,451 | 10,967 | \$326 | 87,448 | 13% |
| 5 | 15,070 | \$4,564,880 | 14,158 | \$322 | 61,823 | 23% |
| Other | 2,440 | \$767,625 | 2,282 | \$336 | | 0% |
| Total | 68,944 | \$21,182,312 | 64,928 | \$326 | 409,382 | 16% |

Data Source: CalSAWS

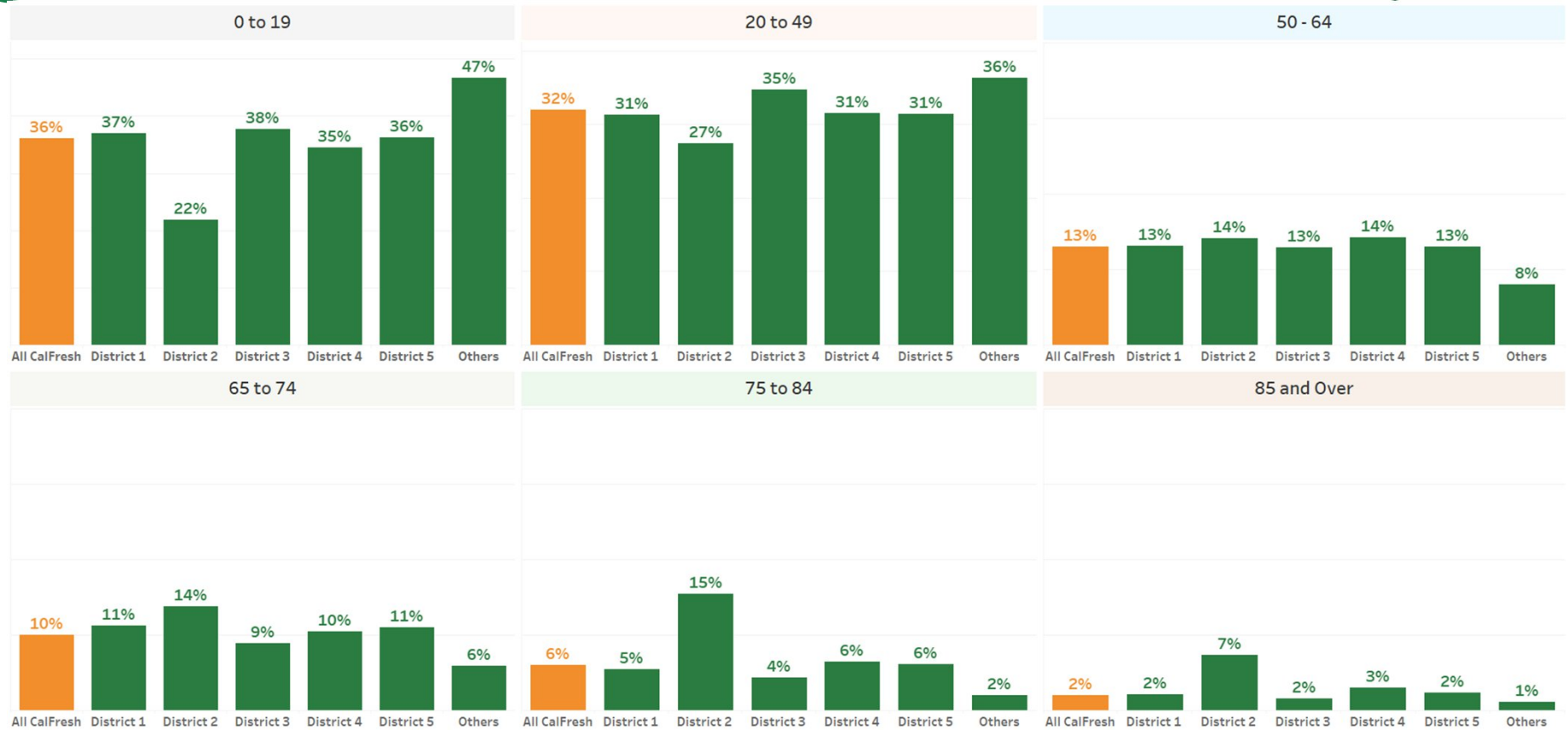
EMPLOYMENT & HUMAN SERVICES

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Client Portfolio



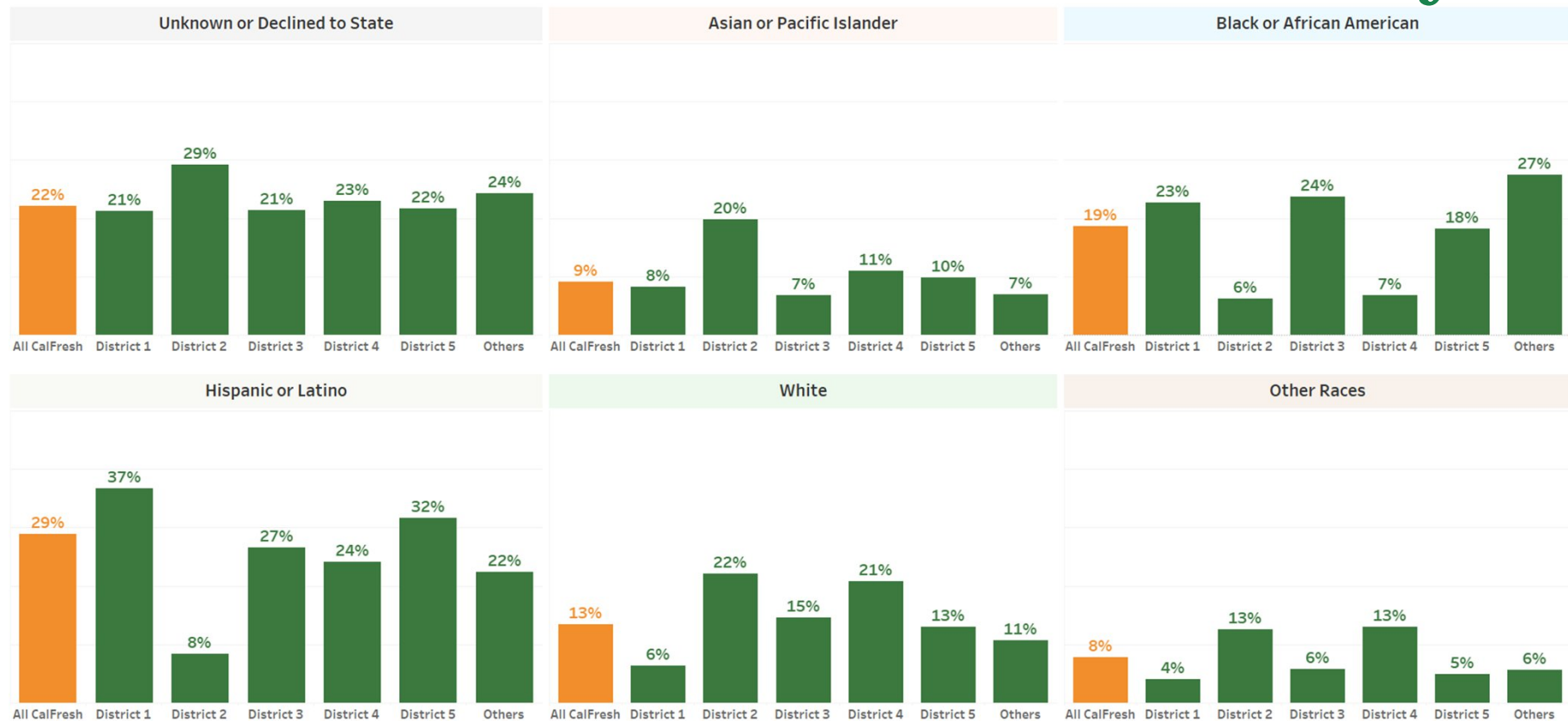
Age: CalFresh Individuals February 2025



CONTRA COSTA COUNTY

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Race: CalFresh Individuals February 2025



CONTRA COSTA COUNTY

EMPLOYMENT & HUMAN SERVICES

Client Experience



Customer Access



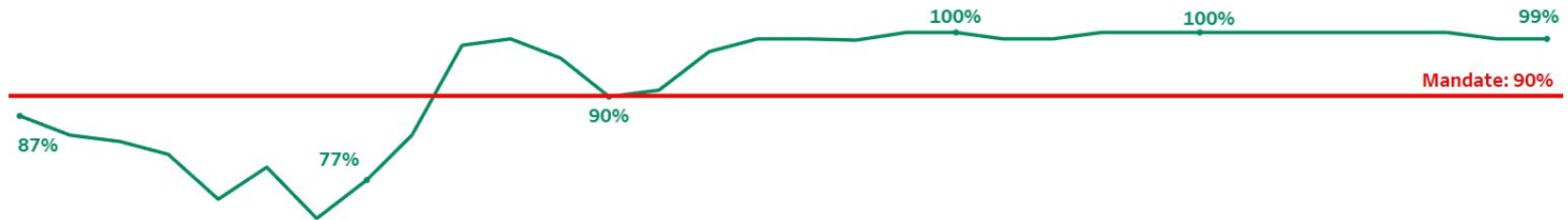
2024

6
Average Days to Schedule
CalFresh Intake
Appointment in 2024

101,512
CalFresh Calls to
Medi-Cal Service Center
(MCSC)

53:48
Average Wait Time
for
CalFresh MCSC Callers

CalFresh Applications Processing July 2022 - February 2025



Jul 22 Aug 22 Sep 22 Oct 22 Nov 22 Dec 22 Jan 23 Feb 23 Mar 23 Apr 23 May 23 Jun 23 Jul 23 Aug 23 Sep 23 Oct 23 Nov 23 Dec 23 Jan 24 Feb 24 Mar 24 Apr 24 May 24 Jun 24 Jul 24 Aug 24 Sep 24 Oct 24 Nov 24 Dec 24 Jan 25 Feb 25

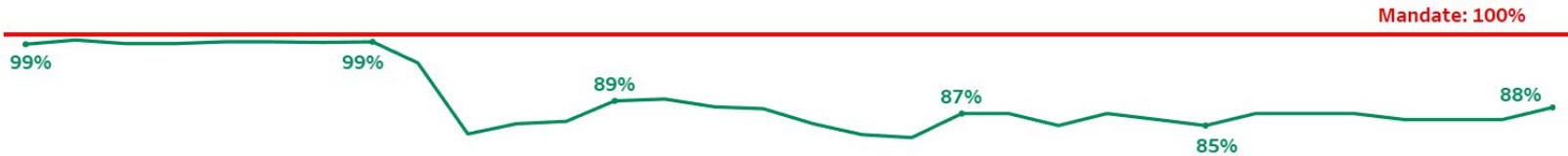
CONTRA COSTA COUNTY

EMPLOYMENT & HUMAN SERVICES

Data Source: : July 2022- Feb 2023 – CalWIN; March 2023 - eXemplar Executive Dashboard

Renewals Processing Timeliness

July 2022 - February 2025



Jul 22 Aug 22 Sep 22 Oct 22 Nov 22 Dec 22 Jan 23 Feb 23 Mar 23 Apr 23 May 23 Jun 23 Jul 23 Aug 23 Sep 23 Oct 23 Nov 23 Dec 23 Jan 24 Feb 24 Mar 24 Apr 24 May 24 Jun 24 Jul 24 Aug 24 Sep 24 Oct 24 Nov 24 Dec 24 Jan 25 Feb 25



Data Source: : July 2022- Feb 2023 – CalWIN; March 2023 - eXemplar Executive Dashboard

Legislation



Legislation

1. Senate Bill (SB) 1254 CalFresh

- SB1254 - CalFresh pre-enrollment of incarcerated individuals prior to their release from State prison or County jail.
- Effective for a period of four years beginning October 1, 2026, through September 30, 2030.

2. Federal Budget FY 2025-26

- Budget reconciliation plan: \$230 billion in cuts to SNAP through 2034
 - This would represent more than 20 percent of current funding
- Cuts may include:
 - Shorter time limits
 - Redirection of benefits
 - Cost-sharing with states

Data Source: 1) Millions of Low-Income Households Would Lose Food Aid Under Proposed House Republican SNAP Cuts, Center for Budget and Policy Priorities, 2.24.25, 2) Imposing SNAP Food Benefit Costs on States Would Worsen Hunger, Hurt States' Ability to Meet Residents' Needs, Center on Budget and Policy Priorities 3.21.25 3) Republican-Proposed CalFresh Cuts Put Millions of Californians at Risk of Hunger, California Budget & Policy, 4.2025. *Note: "Since SNAP's start in its current form nearly 50 years ago, the federal government has fully funded the cost of SNAP food benefits while states, which screen for eligibility and issue benefits, have paid roughly half of the cost of administering SNAP."

CONTRA COSTA COUNTY

EMPLOYMENT & HUMAN SERVICES

Building Brighter Futures Together

Discussion

CalFresh Report, May 12, 2025

Angela Bullock-Hayes, Workforce Services Director
info@ehsd.cccounty.us | 925-608-4800



CONTRA COSTA COUNTY

1025 ESCOBAR STREET
MARTINEZ, CA 94553

Staff Report

File #: 25-1718

Agenda Date: 5/12/2025

Agenda #: 7.

FAMILY & HUMAN SERVICES COMMITTEE

Meeting Date: May 12, 2025
Subject: Behavioral Health Transformation
Submitted For: Ori Tzvieli, Interim Health Services Director
Department: Health Services
Referral No: N/A
Referral Name: N/A
Presenter: Dr. Suzanne Tavano, Director of Behavioral Health
Contact: Dr. Suzanne Tavano, (925) 957-5169

Referral History:

In response to the nationwide opioid crisis, Contra Costa County has joined California's broader effort to leverage resources secured through national settlement agreements. These settlements, finalized in 2022 and 2023, resolve litigation against major opioid manufacturers, distributors, and retail pharmacies for their role in exacerbating the epidemic.

Through these agreements - which include companies such as Janssen Pharmaceuticals (Johnson & Johnson subsidiary), McKesson, Cardinal Health, AmerisourceBergen, Teva, Allergan, Walgreens, Walmart, and CVS - California is expected to receive more than \$2 billion in settlement funds over the coming years. These funds are designated to support activities that prevent, treat, and remediate opioid use disorders (OUD).

Contra Costa County participates in the California Opioid Settlement Funds (OSF), through direct access to funding from the California Abatement Accounts Fund. The California Department of Health Care Services (DHCS) oversees these funds statewide, providing guidance and ensuring that allocations align with state law and the settlement terms. BrownGreer PLC, the national administrator, manages payment distribution.

According to the terms of the OSF, the funds must be used for opioid remediation activities outlined in Exhibit E3 of the National Settlement Agreement. Local priorities are expected to focus on Opioid-related prevention, treatment expansion, harm reduction services, and recovery support. Specific examples of eligible activities include:

- Naloxone distribution and overdose prevention initiatives
- Medication-assisted treatment (MAT) program expansion
- Public health education and awareness campaigns
- Services addressing co-occurring mental health and substance use conditions

Administrative costs are capped at no more than 5% of a jurisdiction's total funding allocation, ensuring that most dollars are directed toward direct service delivery and community impact.

Settlement payments are structured over multiple years, with funding disbursed annually and extending for up to 18 years, depending on the terms of each agreement. This long-term investment provides Contra Costa County with an opportunity to expand a sustainable opioid response infrastructure, strengthen partnerships with community-based organizations, and drive measurable reductions in opioid-related harm across diverse communities.

Referral Update:

Please see the attached 2025 report on the Opioid Crisis in Contra Costa, including Opioid Settlement Funds.

Recommendation(s)/Next Step(s):

ACCEPT the report from the Behavioral Health Division of the Health Services Department on the Opioid Crisis in Contra Costa, and FORWARD to the Board of Supervisors for discussion;

ACKNOWLEDGE that the delays created in program implementation, resulted from slow release of funding, workforce shortages, inability to hire in a timely manner and delays in implementing the required community engagement process;

DIRECT Behavioral Health to continue efforts intended to raise community awareness and education in the community;

DIRECT Behavioral Health to distribute funds through the Request for Proposals (RFP) process and support projects and activities with equity-driven programming, and measurable community impact;

ACCEPT the Division's recommendation to distribute available OSF as follows: 50% treatment and recovery, 20% harm reduction/intervention, 30% prevention, while maintaining spending requirements of no less than 50% in High Impact Abatement Initiatives;

ACCEPT recommendation to issue additional Request for Proposals to ensure that Exhibit E activities and Core Strategies are implemented in the community;

DIRECT Behavioral Health staff to continue to track data to monitor the impact of opioids in the County and continue efforts to prevent overdoses;

SUPPORT, efforts intended to promote the County's OD-Free Contra Costa campaign to increase awareness and education in the community;

SUPPORT continued efforts to increase substance use disorder (SUD) and medication assisted treatment (MAT) and support SUD treatment provider initiatives intended to remove barriers to treatment; and

DIRECT, Behavioral Health to continue to work with local cities and subdivisions to amplify the impact of abatement efforts.

Fiscal Impact (if any):

There is no fiscal impact.



CONTRA COSTA
HEALTH



cchealth.org

Behavioral Health Services Opioid Settlement Funds

Presentation to the Family and Human
Services Committee of the Board of
Supervisors

Suzanne Tavano, PhD Behavioral
Health Director

Fatima Matal Sol, AOD Program Chief
Elissa Kim, MPH Opioid Response Coordinator

May 14, 2025

THE LAWSUITS AGAINST THE PHARMACEUTICAL COMPANIES

During the course of the opioid overdose epidemic, state, local, and tribal governments have brought lawsuits against pharmaceutical and drug distribution companies to recover costs associated with the epidemic and ensure that future crises are prevented.

Though often referred to in tandem, the Janssen & Distributors (J&D) Settlements come from two separate agreements – one through a nationwide lawsuit against Janssen Pharmaceuticals and the other through a nationwide lawsuit against McKesson, AmerisourceBergen, and Cardinal Health (“the Distributors”).

Opioid Settlement Funds Background

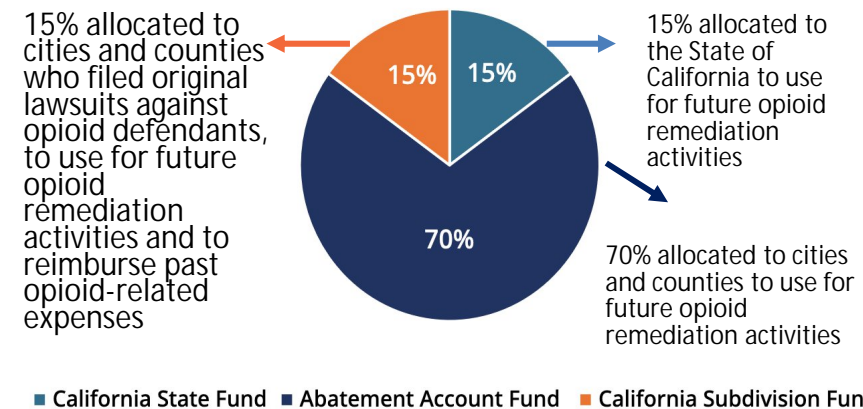
Overview

- Participating companies include: Janssen (J&J), McKesson, Cardinal Health, AmerisourceBergen, Teva, Walgreens, CVS and Walmart
- California is expected to receive approximately \$2.05 billion from the J&D Settlement Agreements, which will be paid through 2038. The majority of funds will be provided to Participating Subdivisions to be used for opioid abatement activities
- Contra Costa County receives funding through participation in California's national opioid settlement agreements finalized in 2022–2023.¹

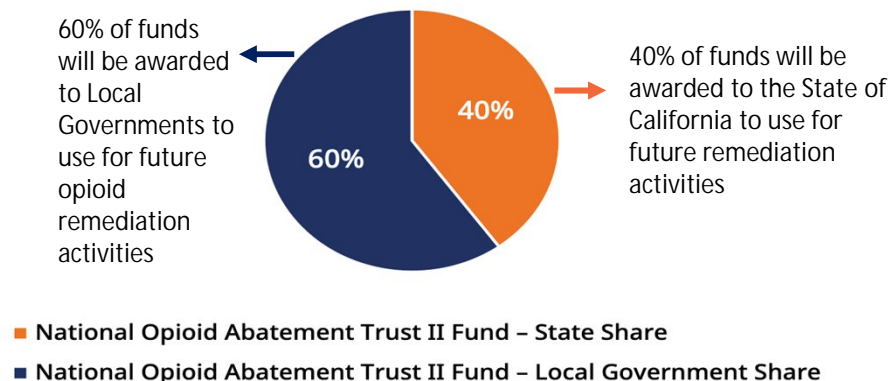
Administration and Oversight

- Funds are overseen by the California Department of Health Care Services (DHCS).² Payments are distributed and tracked by the national settlement administrator BrownGreer PLC.
- Funds would be disbursed annually for up to 18 years
- Administrative cost are capped at no >5% of jurisdiction's total funding allocation

Distribution of California's Opioid Settlements



Distribution of California's Bankruptcy Settlements



Source: DHCS California's Opioid Settlements and Bankruptcies [California's Opioid Settlements and Bankruptcies - DHCS Opioid Response](#)

1. BHIN 24-002 CA Participating Subdivision Use of OSF Allocated from the CA Abatement Accounts Fund 2. California Code, GOV 12534 3. [Exhibit E Final Settlement Agreement 8-2021](#)

Abatement Activities and Allowable Expenditures

No less than 50% - High Impact Abatement Activities (HIAA)

| No. | Activity |
|-----|---|
| 1 | Provision of matching funds or operating costs for substance use disorder facilities with an approved project within the Behavioral Health Continuum Infrastructure Program (BHCIP) |
| 2 | Creating new or expanded substance use disorder (SUD) treatment infrastructure |
| 3 | Addressing the needs of communities of color and vulnerable populations (including sheltered and unsheltered homeless populations) that are disproportionately impacted by SUD |
| 4 | Diversion of people with SUD from the justice system into treatment, including by providing training and resources to first and early responders (sworn and non-sworn) and implementing best practices for outreach, diversion and deflection, employability, restorative justice, and harm reduction |
| 5 | Interventions to prevent drug addiction in vulnerable youth |

Priority Core Abatement Strategies & Exhibit E

Schedule A: Core Strategies

- » Naloxone or Other FDA-Approved Drug to Reverse Opioid Overdoses
- » Medication-Assisted Treatment (MAT) Distribution and Other Opioid-Related Treatment
- » Pregnant and Postpartum Women (screening, referral, treatment, etc.)
- » Expanding Treatment for Neonatal Abstinence Syndrome (NAS)
- » Expansion Of Warm Hand-Off Programs and Recovery Services
- » Treatment for Incarcerated Population
- » Prevention Programs
- » Expanding Syringe Service Programs
- » Evidence-Based Data Collection and Research Analyzing the Effectiveness of the Abatement Strategies Within the State

| SETTLEMENT SOURCE | AMOUNT RECEIVED TO DATE |
|---------------------------------------|-------------------------|
| ABATEMENT FUNDS | 17,397,375.95 |
| SUBDIVISION FUNDS | 3,877,714.43 |
| CA MALLINGCKRODT ALLOCATION (NOAT II) | 464,041.82 |
| ENDO PUBLIC OPIOID TRUST | 419,145.65 |
| MCKINSEY SUBDIVISION SETTLEMENT | 441,906.26 |
| Amount Received to Date | \$22,600,184.11 |
| AMOUNT SPENT TO DATE | 1,014,996.37 |
| FY23/24 | 175,426.65 |
| FY24/25 | 839,569.72 |

ROLLING OVER/ENCUMBERING FUNDS

- Participating Subdivisions may roll over funds from the previous year and/or encumber funds for future eligible purchases.
- Funds must be expended or encumbered within five (5) years of receipt, or seven (7) years for capital outlays projects
- For example, funds received during 2022 must be spend or encumbered by 2027 (five (5) years) for non-capital outlay projects or 2029 (seven (7) years) for capital outlay projects. Funds not expended or encumbered within these timeframes must be returned to the state.

FUNDS RECEIVED TO DATE

We are currently receiving allocations from the following three settlements:

Distributors Settlement

- National Opioid Settlement Allocation Notice (NOAT II) PY1

2.Janssen Settlement

- more cities opted out of direct payments for this settlement than did for the distributors

3.Mallincrodt Bankruptcy proceeds

- NOAT II – Planned Allocation Letter

REALLOCATED AMOUNTS BY CITY

UNALLOWABLE ACTIVITIES

Participating Subdivisions suspected of spending funds allocated from the Janssen & Distributors (J&D) Settlements on unallowable activities, whether through review of reports or information from any other sources, will be required to meet and confer with DHCS to resolve the concern. If unable to reach a resolution, DHCS may conduct an audit of the Subdivision's use of the funds and pursue legal action

| CITIES/SUBDIVISIONS | SUM OF REALLOCATED AMOUNTS |
|---------------------|----------------------------|
| Brentwood | 198,940.49 |
| Antioch | 23,943.13 |
| Clayton | 16,684.63 |
| Danville | 75,991.55 |
| El Cerrito | 174,630.01 |
| Hercules | 14,600.09 |
| Lafayette | 42,525.16 |
| Martinez | 71,732.84 |
| Oakley | 75,424.28 |
| Orinda | 35,251.44 |
| Pinole | 20,687.77 |
| Pleasant Hill | 98,213.43 |
| Richmond | 224,103.59 |
| San Ramon | 163,021.18 |
| Walnut Creek | 195,977.59 |
| Grand Total | \$1,431,727.18 |

About The Opioid Epidemic

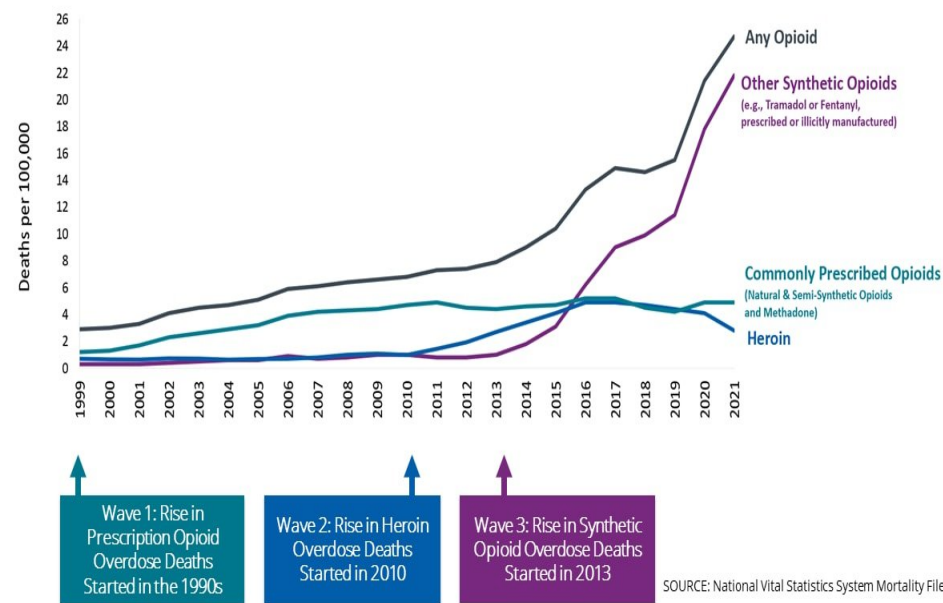
The Centers for Disease Control (CDC) has highlighted that the opioid epidemic has evolved through waves.

- Wave 1** Rise of prescription opioid misuse in 1990s
- Wave 2** Rise in heroin use in 2010s
- Wave 3** A sharp increase in synthetic opioids (e.g., Fentanyl) in 2013

Opioid Impact Timeline

- 1999-2021** Nearly **645,000** people died in the U.S. from overdoses involving prescription and illicit opioids
- 2017** Opioid epidemic was declared a national public health emergency in the U.S. with **47,600** opioid-related overdose deaths reported that year
- 2017-2022** **70,237** people died due to opioid-related overdoses with fentanyl accounting for a significant portion of these deaths in the U.S.

Three Waves of Opioid Overdose Deaths

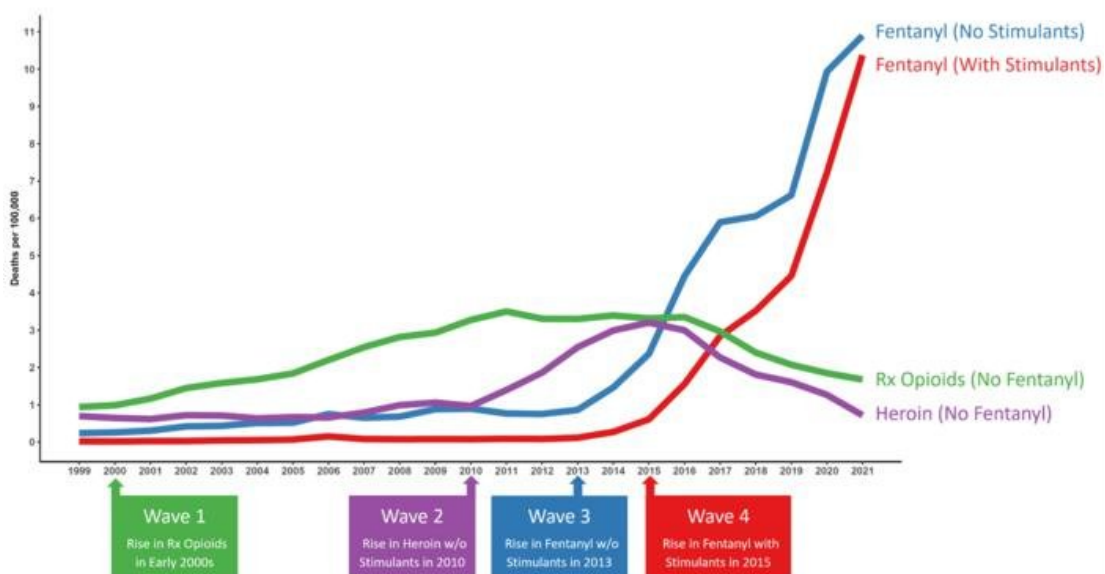


https://www.cdc.gov/overdose-prevention/media/images/sharable-graphics/overdoseprevention-3-waves-opioid-overdose-deaths-1999-2021.png?CDC_AAref_Val=https://www.cdc.gov/opioids/basics/epidemic.html



The Fourth Wave

Polysubstance Trends: The Fourth Wave



Between 2015 and 2021, most overdose deaths in the United States involved synthetic opioids like fentanyl with stimulants and/or methamphetamine marking the transition to a “fourth wave” of the opioid crisis.

California has also experienced a significant increase in poly-substance overdose deaths, particularly those involving a combination of fentanyl and psychostimulants, primarily methamphetamine

LOCAL NEWS

Man Found Dead Inside Bathroom At Concord BART Station

June 28, 2023 - 10:01 AM • 68 comments



A man was found dead inside the bathroom at the Concord BART station on Tuesday, according to officials.

Just after 3 p.m., Officers located an adult male who appeared to be suffering from an apparent overdose in the bathroom.

The officers administered two doses of NARCAN and summoned for medical assistance.

LOCAL NEWS

Man Dies Of Apparent Drug Overdose On BART Train In Dublin – Authorities Administer NARCAN To Another Drug User At Pleasant Hill BART

July 3, 2023 - 3:00 PM • 0 comment

A person died of an apparent drug overdose on a BART train at the West Dublin Station on July 1, and another person was administered a dose of NARCAN to help reverse another drug overdose, according to BART Police.

Here are the details from BART Police:

NARCAN Deployment – Pleasant Hill Station

7/1/2023 1648 hours An officer administered one (1) dose of NARCAN to an unresponsive male subject who appeared to be suffering from an apparent drug overdose. The subject was transported to an area hospital for further medical treatment.

OAKLEY POLICE RESPOND TO FENTANYL OVERDOSE CALL

By Art Ray

written by CC News | November 19, 2024



Photo by Art Ray

Oakley Police Department responded to two people found unconscious at the Antioch fishing pier parking lot.

Contra Costa County Fire responded to the end of Bridgehead Road. Upon arrival, one victim was cold to the touch, and the second male was saved by Oakley Police Department officers who had administered a counteracting agent.

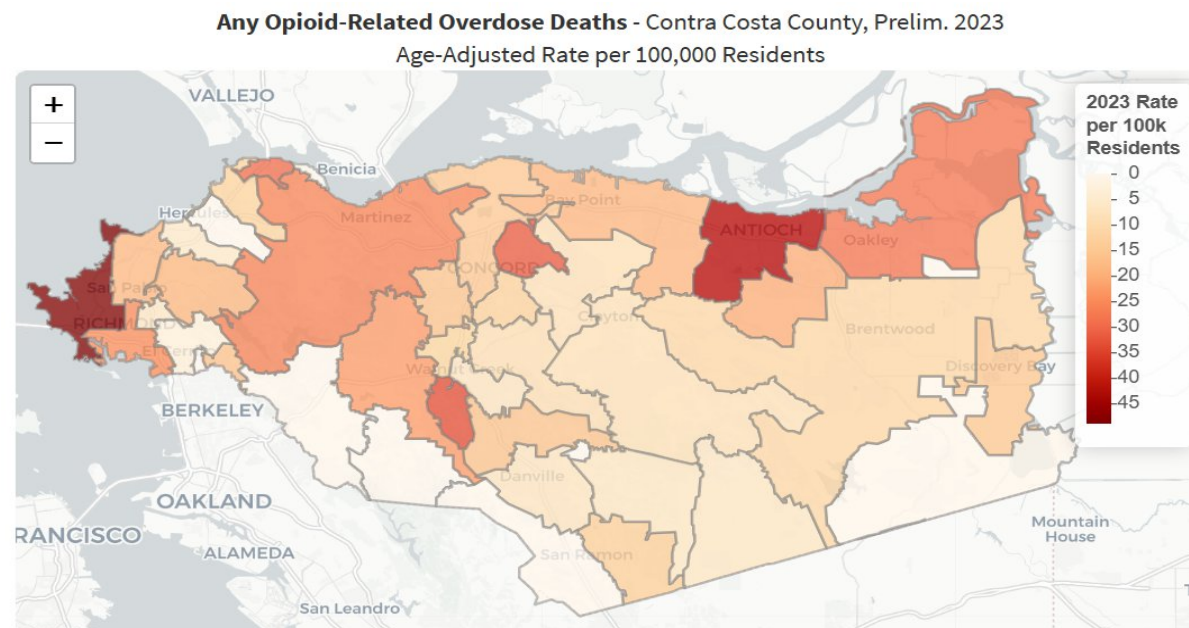
California Opioid Overdose Surveillance Dashboard 2023 Data

Opioid Overdose Risk Across County

- Age-adjusted death rates shown by ZIP code for 2023
- Age adjustment accounts for population differences across regions
- Enables accurate comparison of overdose risks across communities

Key Findings

- Richmond (rate: 48.6, per 100,000) and Antioch (rate: 42.3 per 100,000) report highest overdose death rates
- Elevated rates also observed in Pittsburg, Oakley, Bay Point, and parts of Concord and South County
- There were **178** overdoses in 2023

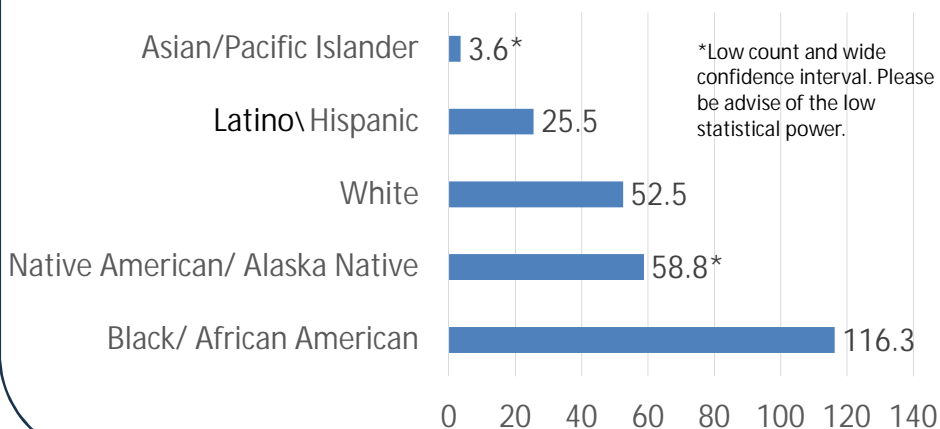


178 (16.6/100k)

Deaths Related to Any Opioid Overdose in Contra Costa County, 2023

Opioid Related Emergency Department Visits

Any Opioid-Related Overdose ED Visits - Contra Costa County by Race/Ethnicity, 2023
Age-Adjusted Rate per 100,000 Residents



- Black/African American residents: highest ED visit rate (116.3 per 100,000)
- Native American/Alaska Native residents: 58.8 per 100,000 (interpret cautiously)
- Hispanic/Latino residents: 25.5 per 100,000
- White residents: 52.5 per 100,000
- Asian/Pacific Islander residents: lowest ED visit rate (3.6 per 100,000; interpret cautiously)

407 (39/100k)

ED Visits Related to Any Opioid Overdose in Contra Costa County, 2023

127 (10.8/100k)

Hospitalizations Related to Any Opioid Overdose in Contra Costa County, 2023

Opioid-Related Mortality Trends

Leading Causes of Death in Contra Costa County (2020 – 2022)

■ Communicable ■ Cancer ■ Cardiovascular ■ Other Chronic ■ Injury ■ Perinatal

| Ranking | 0 - 4 | 5 - 14 | 15 - 24 | 25 - 34 | 35 - 44 | 45 - 54 | 55 - 64 | 65 - 74 | 75 - 84 | 85+ |
|---------|----------------------------|--------|---------------------|-----------------------|-----------------------|------------------------------|-------------------------------|-------------------------------|-------------------------------|-----------------------------------|
| 1 | Neonatal conditions 58 | * | Road injury 66 | Drug overdose 162 | Drug overdose 148 | Drug overdose 145 | Ischemic heart disease 307 | Ischemic heart disease 476 | Alzheimer's disease 703 | Alzheimer's disease 2,234 |
| 2 | Congenital anomalies 28 | * | Drug overdose 60 | Road injury 81 | Alcohol-related 60 | Alcohol-related 102 | COVID-19 213 | COVID-19 276 | Ischemic heart disease 618 | Stroke 1,002 |
| 3 | * | * | Homicide 50 | Homicide 66 | Homicide 52 | COVID-19 101 | Drug overdose 168 | Lung Cancer 273 | Stroke 499 | Ischemic heart disease 835 |
| 4 | * | * | Suicide 39 | Suicide 61 | Road injury 50 | Ischemic heart disease 94 | Alcohol-related 147 | Stroke 265 | COVID-19 362 | COVID-19 469 |
| 5 | * | * | * | Alcohol-related 36 | Suicide 48 | Breast cancer 33 | Breast cancer 75 | Breast cancer 125 | Lung Cancer 327 | Hypertensive heart disease 467 |

*numbers less than 11 not reported for patient privacy

Source for Life Expectancy and Age-Adjusted Mortality Rate by Sex: California Department of Public Health Community Burden of Disease Version P3.0, 3/1/2024
Source for Infant Mortality: California Department of Public Health, Center for Family Health, Maternal, Child and Adolescent Health Division, Infant Mortality Dashboard, Last Modified June 2023

8

On August 13, 2024, Contra Costa County's Interim Health Services Dr. Ori Tzvieli, presented mortality data from the County's ATLAS dashboard, covering 2020 to 2022.

- Drug overdose emerged as the leading cause of death among residents aged 25 to 54.
- Residents aged 15 to 24, ranked as second leading cause of death.

These patterns highlight the need for interventions to address opioid misuse and prevent overdose fatalities across all age groups.

Drug Medi-Cal (DMC) Claim Data Trends

Drug Medi-Cal Organized Delivery System (DMC-ODS) Penetration Rates

CCBHS administers DMC-ODS as a Prepaid Inpatient Health Plan (PIHP). The system provides full continuum of care: prevention, treatment, and MAT services. Health Services also operates Choosing Change a MAT program at Federally Qualified Health Centers (FQHCs) and public health clinics

Measuring Access to Service

- Penetration Rate (PR) = % of Medi-Cal eligible individuals who received SUD services
- Higher PR indicates stronger access to care
- Lower PR signals service delivery gaps or barriers to treatment

Areas for Improvement

Ongoing efforts to improve PR among:

- Latino/Hispanic populations
- Asian/Pacific Islander populations
- Justice-involved individuals
- Focus on reducing barriers and enhancing culturally/linguistically competent care

Contra Costa County's DMC-ODS Medi-Cal eligible population, the number of members served, and corresponding penetration rates by age group for Calendar Year 2022.

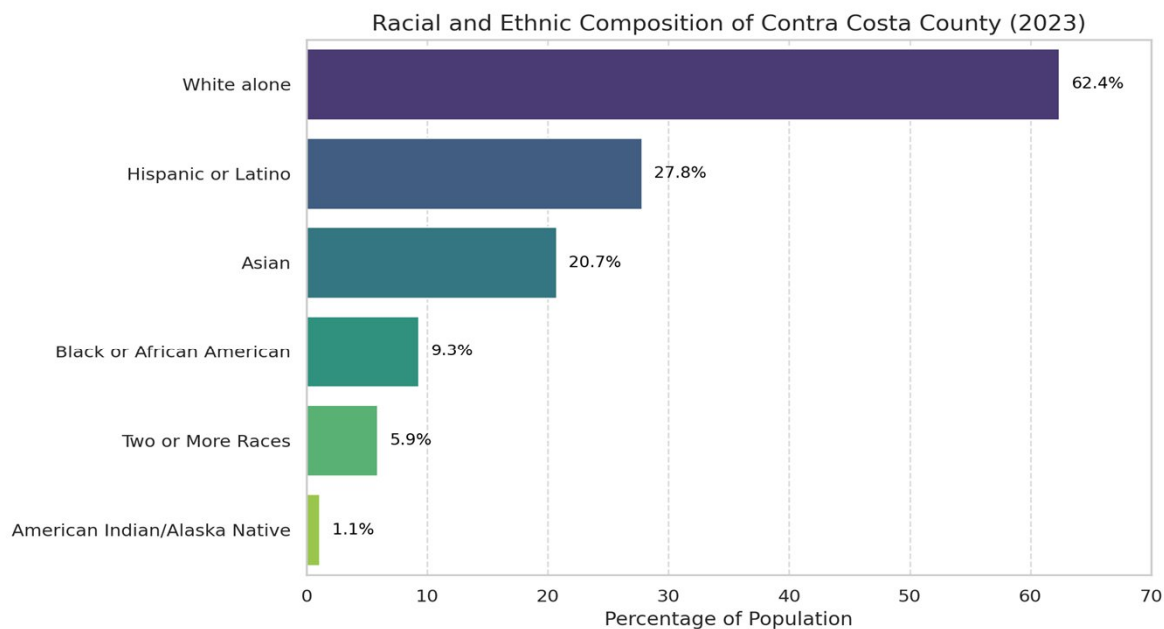
| Age Groups | # Members Eligible | # Members Served | County PR | County Size Group PR | Statewide PR |
|--------------|--------------------|------------------|--------------|----------------------|--------------|
| Ages 12-17 | 35,236 | 122 | 0.35% | 0.29% | 0.25% |
| Ages 18-64 | 177,604 | 2,315 | 1.30% | 1.29% | 1.19% |
| Ages 65+ | 34,052 | 214 | 0.63% | 0.56% | 0.49% |
| Total | 246,892 | 2,651 | 1.07% | 1.04% | 0.95% |

DMC-ODS Medi-Cal eligible population, members served, and penetration rates by race and ethnicity for Calendar Year 2022.

| Racial/Ethnic Groups | # Members Eligible | # Members Served | County PR | Same Size Counties PR | Statewide PR |
|------------------------|--------------------|------------------|-----------|-----------------------|--------------|
| African American | 31,665 | 457 | 1.44% | 1.29% | 1.19% |
| Asian/Pacific Islander | 28,883 | 60 | 0.21% | 0.15% | 0.15% |
| Hispanic/Latino | 76,183 | 396 | 0.52% | 0.74% | 0.69% |
| Native American | 628 | 16 | 2.55% | 2.34% | 2.01% |
| Other | 68,336 | 872 | 1.28% | 1.34% | 1.26% |
| White | 41,200 | 850 | 2.06% | 1.89% | 1.67% |

County Population Data

According to the 2023 American Community Survey (ACS)¹ racial and ethnic composition of Contra Costa County is characterized by diversity:



Note: Categories are not mutually exclusive. Individuals may identify with more than one group.



The County's diverse racial and ethnic composition underscores the importance of culturally responsive, equity-focused opioid prevention and treatment strategies.

¹ U.S. Census Bureau QuickFacts: Contra Costa County, California

Preliminary Approval

In November 2021, Contra Costa Health presented a Preliminary Plan for the use of Opioid Settlement Funds (OSF), contingent on local jurisdictions electing to defer their individual allocations to the County. Because of the urgency to respond to the local impact, in 2023 the CAO and local Cities approved the preliminary plan for the use of OSF until community input could be gathered.

Phase 1

- Medi-Cal match towards operating cost for existing SUD providers to bolster services and capacity.
- Focus on Justice Involved Populations: SUD treatment in the jails. Addition of counselors, medication
- Add 1FTE Addiction Medicine Psychiatrist to assist with establishment of MAT expansion to include medical treatment for Alcohol disorders.
- Develop Adolescent/Youth SUD Treatment Infrastructure (Residential and Outpatient)
- Leadership and Coordination (1 FTE Coordinator) to support implementation of County's Opioid Prevention and Response Program ensure inclusiveness and diversity of community stakeholders, address needs of communities of color and disproportionately impacted

Phase 2

- Continue to fund MEDS Coalition and add staff as needed.
- Fund Harm Reduction strategies including working with Needle Exchange Sites
- Increase SUD street outreach capacity in Recovery Residences, homeless shelters, libraries, encampments, BART stations, etc.
- Provide comprehensive care management services to pregnant and postpartum individuals with OUD
- Social Media Campaign to increase public awareness. (Billboard, bus banners, web page design/operation)

Opioid Settlement Funds Requirements



OPIOID COMMUNITY LISTENING

We want to hear from you about the services needed in Contra Costa County to address the opiate epidemic in our communities.

Please let your voice be heard!

| | |
|--|---|
| <p>EAST COUNTY LISTENING SESSION MAY 8TH, 4:30- 6:30 340 MARINA BLVD IN PITTSBURG</p> <p>SOUTH COUNTY LISTENING SESSION MAY 15TH, 5:30- 7:00 HTTPS://US02WEB.ZOOM.US/J/86471048719? PWD=BF01ETRJTU9QOWU9ST084YJN4MMZVQ09</p> | <p>CENTRAL COUNTY LISTENING SESSION MAY 9TH, 9:30- 11:30 2380 BISSO LANE IN CONCORD</p> <p>WEST COUNTY LISTENING SESSION MAY 16TH, 11:30- 1:30 2200 MACDONALD AVE IN RICHMOND</p> |
|--|---|

You can also share your feedback online at:
<https://survey.alchemer.com/s3/7820053/CCBHS-Opioid-Settlement-Funds-Community-Feedback>



If you would like to request interpretation or other accommodations, please email Jessica.Recinos@cchealth.org



*Overdose prevention supplies will also be available at these events.



Guiding Principles for Allocating Opioid Settlement Funds¹

- Have a transparent process for determining where to expend the funds. Include people with lived experience and individuals working in prevention, treatment, harm reduction and recovery when planning.
- Seek input from a wide variety of groups during planning, including experts in SUD treatment, organizations working directly with youth and people who use drugs, opioid focused coalitions, law enforcement personnel, recovery community organizations, and social service organizations.
- Solicit and use input from the public to help raise the profile of the plans and give those community members with unique perspectives the opportunity to provide feedback.

<https://www.dhcs.ca.gov/Documents/CSD/CA-OSF-Guiding-Principles.pdf>

Opioid Community Listening Sessions

Informing Opioid Settlement Fund Priorities



Behavioral Health staff and the Indigo Project conducted 4 regional Community Listening Sessions across East, Central, West and South County (in-person and virtual). KGO coverage.

- ✓ 397 surveys completed (81% English, 19% Spanish)
- ✓ Participants included parents, youth, justice-involved individuals, homeless and BH providers, faith-based organizations
- ✓ In person sessions with Spanish speaking parents and clients in SUD treatment and in jail
- ✓ Youth on probation and participating in SUD prevention services

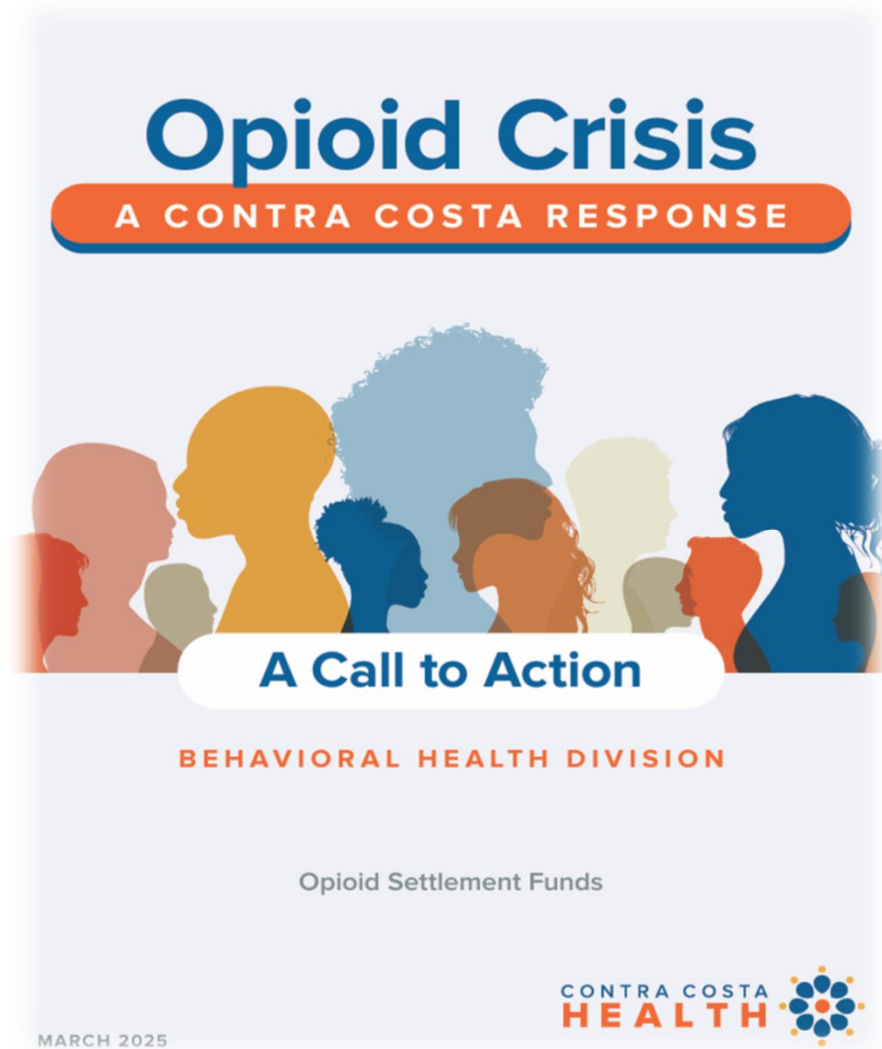
Why Listening Session

- ✓ Community engagement is important to equitable opioid response
- ✓ Ensure the settlement funds reflect real community needs



Emerging Themes

- Expand youth residential treatment and MAT-friendly sober living environments
- Support justice-involved and unhoused individuals with navigation services and care management
- Increase culturally responsive care
- Provide overdose education and increase Naloxone access
- Launch stigma-reduction public education campaigns to reduce stigma and increase awareness of treatment options
- Expand SUD treatment including detox services in East County, focus on co-occurring services



Contra Costa's A Call to Action uplifts the voices of people in recovery and in treatment. It includes unhoused and incarcerated clients.

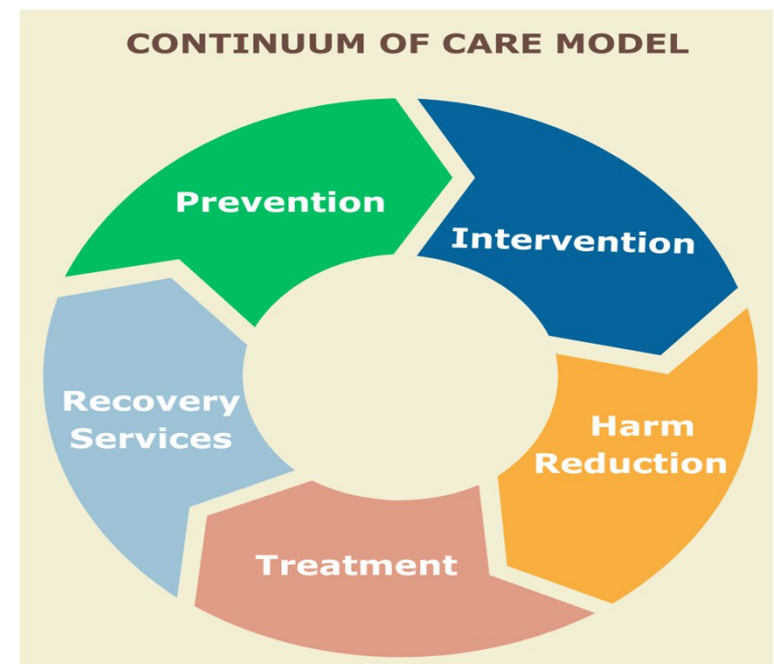
Incorporates the expert advise of individuals working in prevention, harm reduction, treatment and recovery

In March 2025, BHS published "A Call to Action" and posted it in our landing page

OSF STRATEGIES

To address the ever changing and complex patterns and trends in substance use, Behavioral Health works in partnership with others to address the following objectives:

- Improve county, cities and agency coordination
- Monitor state and local surveillance
- Promote protective factors and reduce risk factors to support individual and community safety and reduce overdoses
- Increase public awareness and education about the impact of Opioids and reduce overdoses through prevention
- Expand naloxone access, saturation, and education. Ensure Naloxone is available at high-risk locations
- Expand SUD treatment, MAT and reduce stigma
- Support harm reduction and drug checking services
- Establish low-barrier treatment and Naloxone distribution
- Prioritize communities of color, justice involved, unhoused, youth



Visualization of the funding core strategies

Opioid Response Efforts

Behavioral Health's opioid response strategy prioritize populations most disproportionately impacted by the overdose crisis. Guided by local and State data and community input, the County has identified the following priority groups for targeted investments and tailored interventions:



Racial and Ethnic Communities

- African American, Native American and Asian communities experience disproportionately high rates of opioid-related outcomes alongside low service utilization



People Experiencing Homelessness/Unhoused Individuals

- Persistent housing instability is a significant barrier to treatment engagement, recovery, and ongoing care
- Integrated housing and treatment support services are critical



Youth and children

- Drug overdose is the second leading cause of death among residents aged 15–24 in Contra Costa County



Pregnant and Postpartum Individuals

- Require specialized, coordinated care addressing maternal health, child safety, and recovery simultaneously.
- Focus on perinatal opioid use disorder (OUD) programs and wraparound supports.



Justice-Involved Individuals

- Individuals reentering the community after incarceration face heightened risk of overdose, particularly within the first week post-release
- Emphasis on reentry programs, treatment linkages, and continuity of care

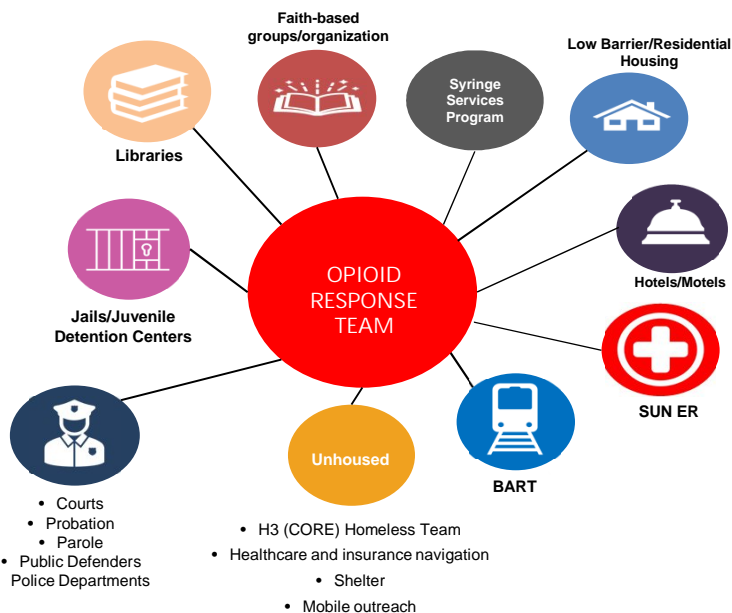
County Response: Opioid Response Team

What is Opioid Response Team?

Opioid Response Team (ORT) is comprised of substance use counselors dedicated to outreach and engagement with individuals in need of care and support. The team collaborates with community-based organizations, treatment and service providers and public health agencies to support people impacted by opioid use.

Core Services

1. Distributing naloxone and fentanyl test strips
2. Connecting clients to treatment and recovery services
3. Implementing prevention and harm reduction strategies
4. Housing navigation and case management for unhoused clients.
5. Follow-up support after treatment completion to sustain recovery.



ORT's Approach

ORT prioritizes a compassionate, nonjudgmental, and client-centered approach focused on:

- Harm reduction – meeting clients where they are
- Client-driven engagement – Respecting individual needs and choices
- Treatment on demand – offering immediate connection to care
- Compassion, Respect and Hope – Core values in every interaction

ORT provides immediate response and connections to services at key touchpoints or key locations where individuals impacted by OUD or SUD can be reached. These include community events, shelters, syringe service programs, and other field locations.

Why Touchpoints? They create opportunities to meet people where they are:

- Connect with individuals at high risk of overdose or disengagement
- Provide immediate assistance and support
- Facilitate access to care, treatment, and recovery services

Expanding Access to Naloxone

Services and Activities

- Process Opioid Prevention Supply and Training Request Forms for community partners and organization
- Distribution of life-saving harm reduction tools: Naloxone and fentanyl test strips.
- Training, presentation and education at schools, partner agencies, shelters, churches and community-based organizations.
- Direct communication through email via AODOpioidResponse@cchealth.org OR phone 925-335-3330



English (United States) ▼


CONTRA COSTA HEALTH

Opioid Prevention Supply and Training Request Form

The form is to be used for the request of Naloxone (Narcan) and/or Fentanyl Test Strips (FTS), and opioid presentations and Naloxone training in Contra Costa County.

* Required

Information

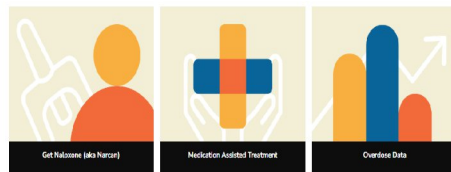
1. **Date Request Submitted**
*
Please input date (M/d/yyyy) 

2. **Department or Organization (if applicable). Please put "n/a" if not requesting on behalf of a department nor organization.**
*
Enter your answer

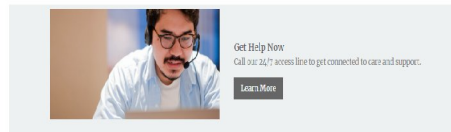
3. **Are you an eligible agency with a standing order**
*
☐ Yes
☐ No
☐ I do not know.

OD Free Contra Costa

Preventing drug overdoses in our community.



Drug overdoses are the leading cause of death for adults aged 25-54 in Contra Costa.



Overdose Prevention/Harm Reduction

An opioid overdose happens when someone takes too much of an opioid drug, like fentanyl or painkillers. Recognizing the signs of opioid overdose and acting fast can save a life.

| | |
|--------------------------------|---|
| PENTAVIL TEST STRIPS | + |
| SYRINGE EXCHANGE | + |
| USING ALONE? | + |
| RECOGNIZE OPIOID OVERDOSE | + |
| PREGNANCY & OPIOID USE | + |
| INFO FOR HEALTH CARE PROVIDERS | + |

In early April 2025, “OD Free Contra Costa” landing page was launched

Accomplishments

Addiction and Recovery Services

DLI Programs
Quit Tobacco and Vaping

Naloxone (Narcan)

Substance Use Treatment

Ask the Advice Nurse

Dental Care

How to Make an Appointment

Healthcare Locations

Medical Center Services

Mental Health

MyChart Patient Portal

Sexual Health Services

Vaccines

For Healthcare Providers

For People Without Health Coverage

Get Care + Addiction and Recovery Services +

NALOXONE (NARCAN)

Font Size      

The antidote to an opioid overdose

Naloxone is a life-saving medication used to reverse an opioid overdose, including heroin, fentanyl and prescription opioid medications. Naloxone is most commonly used as a nasal spray (brand name “Narcan”). You don’t need to be a medical professional to safely use naloxone on someone experiencing an overdose. Naloxone nasal spray can be purchased at many pharmacies [over the counter](#).

Naloxone is safe and easy to use and works almost immediately. It has very few negative effects, and has no effect if opioids are not in a person’s system. Best of all, it can save someone’s life!

Order Naloxone from the State of CA

Find Naloxone Near You

| | |
|--------------------------------------|---|
| Who should carry naloxone? | + |
| Why carry naloxone? | + |
| How to recognize an opioid overdose | + |
| How to respond to an opioid overdose | + |

Supplies and Training

Contra Costa Health provides naloxone supplies and training to eligible organizations. Contact the Opioid Response Team for more information.

- Phone: 925-335-3330
- Email: AODopioidresponse@ccchealth.org

Request Naloxone Supplies/Training

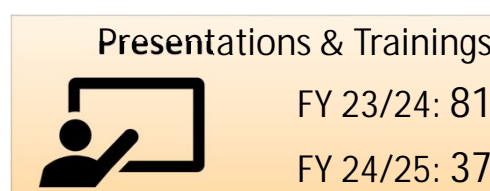
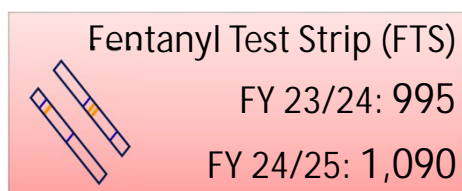
Naloxone Resources

- [Administering Naloxone - Training Video | Spanish](#)
- [Next Distro - Have Naloxone Mailed to You](#)
- [Naloxone Distribution Project \(DHCS\)](#)



Opioid Prevention Efforts

Fiscal Year (FY) 2023-2025 (AODS and CCC MEDS Coalition)



Key Locations

Behavioral Health Services/Health Services
Nuevo Comienzos
Village Community Resources Center – Brentwood
Children & Family Services – Pleasant Hill
Don Brown Shelter – Antioch
Contra Costa Medical Reserve Corps
Delta Landing- Pittsburg
Forensic Mental Health
Mountain View Shelter Inc – Martinez

School Districts/Colleges/Universities
Golden Gate School – Pittsburg Village
Tuoro University
Children & Family Services – Pleasant Hill
Northgate High School
School-based Health Clinics
Concord High School
Ygnacio Valley High School
Downer Elementary - San Pablo

Community-Based Organizations
Community Resources Center – Brentwood
Bay Area Rescue Mission - Richmond
Mental Health Connections – San Pablo
Parents at Helms Middle School
The Latina Center – West County
Verde Elementary Parents – Richmond
Reentry Center – Richmond

City of Oakley Community Awareness Forum December 18, 2024

Opioid Community Education Events

City of Antioch Community Awareness Forum March 26, 2025

City of Pittsburg Community Awareness Forum April 16, 2025



Oakley Police Chief Paul Beard holds a Naloxone during his speech at Oakley's Opioid Awareness forum at Oakley City Hall



Dr. Sefanit Mekuria presenting on "OD Free Contra Costa" webpage



Veronica (Prevention Coordinator), Mariella (MEDS) and Sergeant Law presenting to the community.



Oakley Mayor Shannon Shaw sharing her story, both professional and personal, at Oakley City Hall

Source: The Press, Youtube



Community members sharing questions and comments



Presenters
Pittsburg Police
Center for Human Development
Peer Support/Parent Perspective
Office of Peer and Family Empowerment
AODS/Opioid Response Team
CCC MEDS Coalition
Community & Family/Parent Members



25 Attendees

Presenters
Oakley Mayor & Police Chief
AODS/Opioid Response Team
CCC MEDS Coalition
AOD Advisory Board
REACH Project
Cannabis Prevention Coalition
Community Members



22 Attendees

Presenters
Antioch Police
Angelo Quinto Community Response Team
Peer Support Specialist
AODS/Opioid Response Team
CCC MEDS Coalition
REACH Project
Community & Family/Parent Members



30 Attendees

Community Outreach, Engagement & Education

Prescription Drug Abuse Awareness Month Proclamation



March 2024
Board of Supervisors, Martinez

San Ramon Art and Wind Festival



May 2024

Martinez National Night Out



August 2024

Deer Valley High School Back to School Night



Fentanyl Awareness Event



November 2024
Liberty Union High School District

Harm Reduction Efforts

As part of Contra Costa County's comprehensive harm reduction and overdose prevention strategy, AODS in partnership with the MEDS Coalition (Bay Area Community Resources) —has launched a Naloxone Stand Box (NSB) Initiative. This effort is funded and supported through the DHCS and aligns with broader goals outlined in the OSF strategic framework.



On March 28, 2025, Naloxone Stand Box at Los Medanos College, Pittsburg are placed and accessible to college students.

Confirmed Locations (8 Stand Boxes)

| Host Location | Address |
|--------------------------|--|
| Diablo Valley College | Pleasant Hill Campus 321 Golf Club Rd Pleasant Hill CA 94523 |
| Diablo Valley College | San Ramon Campus 1690 Watermill Rd San Ramon CA 94582 |
| Los Medanos College | Pittsburg 2700 E Leland Rd Pittsburg CA 94565 |
| Los Medanos College | Brentwood 1351 Pioneer Square Brentwood CA 94513 |
| Public Defender's Office | 800 Ferry Street Martinez CA 94553 |
| Pleasant Hill Library | 2 Monticello Avenue Pleasant Hill CA 94523 |
| San Pablo Library | 13751 San Pablo Avenue San Pablo CA 94806 |
| Antioch Library | 501 W. 18th Street Antioch CA 94509 |

In progress but not in operation (7 Stand Boxes)

| Host Location | Address |
|---|--|
| Trinity Center | 1888 Trinity Ave, Walnut Creek, CA 94596 |
| Mental Health Connections House | San Pablo and Concord |
| Delta Landing Shelter | 2101 Vale Road San Pablo, CA 94806 |
| Public Defender Office | Richmond |
| Contra Costa County Probation Dept. - John A. Davis Juvenile Hall | Richmond and Antioch |

Public Health Harm Reduction Vending Machine

Public Health Harm Reduction Vending Machine

CCH is coordinating the installation of four (4) naloxone vending machines across the county—targeting East, West, Central, and South Contra Costa. In collaboration with regional partners, including the HIV Education and Prevention Project of Alameda County (HEPPAC) and the Contra Costa's Public Health HIV/STI Program. These machines will serve as a low barrier, 24/7 access points for naloxone and other harm reduction supplies.

Confirmed Site Locations and Awaiting Placement

Oakley Recreation Center, Oakley
Brookside Shelter, Richmond
Delta Landing, Pittsburg

Pending

Contra Costa Regional Medical Center, Martinez
Mental Health Connections, Antioch
Contra Costa Juvenile Hall (NSB)



Delta Landing, Pittsburg

- Health, Housing and Homeless Services (H3) Administrator
- HIV Education and Prevention Project of Alameda County (HEPPAC) Team
- AODS, Opioid Response Coordinator
- HIV/STI Prevention Manager



Naloxone Vending Machine at Marin County Jail lobby

Collaboration with Syringe Services Program (SSP)

Expanding Harm Reduction Through Mobile Outreach

The SSP anchors Contra Costa's harm reduction strategy, reaching individuals at higher risk of overdose, infection, or disengaged from treatment.

- The SSP is coordinated and led by the Public Health HIV/STI Program.
- Services are provided by HEPPAC through onsite in person outreach by ORT staff in East and West County.



Program Activities

- Distribution of sterile supplies (syringes, alcohol wipes, wound care kits, sharps containers) to prevent infections.
- Naloxone (Narcan) distribution and overdose prevention education at all outreach locations.
- Fentanyl test strip access and client education to reduce accidental overdoses.
- Wound care triage, first-aid supplies, and referrals to medical care for injection-related wounds.
- HIV and Hepatitis C education with referrals to testing and care. (Note: HEPPAC provides education but not onsite testing services)
- Behavioral Health Service navigation referrals to MAT, SUD and mental health treatment.
- Harm Reduction Training twice per year

Times and Locations

Richmond

Tuesday Site

25th St and Macdonald Av
Richmond, CA 94804
1:30 p.m. - 3:30 p.m.

Bay Point

Tuesday Site

2586 Willow Pass Road.
Bay Point, CA 94565
6 p.m. - 8 p.m.

Please call 510-849-7630 for site of day and times.

Source: <https://www.cchealth.org/health-and-safety-information/hiv-sti-program/syringe-exchange>

Collaboration with Detention Health and Sheriff in the Jails

People who are now, or have spent time, in jails and prisons experience disproportionately higher rates of physical and behavioral health diagnoses and are at higher risk for injury and death as a result of trauma, violence, overdose, and suicide than people who have never been incarcerated.



Of people incarcerated in state/federal prison, nationally:

- 26.3% have high blood pressure/hypertension, compared to 18.1% of the general public
- 15% have asthma, compared to 10% of the general public
- 65% smoke cigarettes, compared to 21% of the general public^{1*}
- The mortality rate two weeks post-release from prison is **12.7 times** the normal rate, driven largely by overdoses²



People with behavioral health disorders are overrepresented in the criminal justice system.

- 51% of people in prison and 71% of people in jail in the U.S. have/previously had a mental health problem
- 58% of people in state prison and 63% of people in jail in the U.S. meet the criteria for drug dependence or abuse³
- Overdose deaths are >100x more likely for justice-involved individuals 2-weeks post release than the general population⁴

Focus on California

- Over the past decade, the proportion of incarcerated individuals in California jails with an active mental health case rose by 63%⁵
- California's correctional health care system drug overdose rate for incarcerated individuals is 3x the national prison rate⁶
- Among justice-involved individuals, 2 of 3 individuals incarcerated in California have high or moderate need for substance use disorder treatment⁷

Induction for Medication Assisted Treatment (MAT) through Detention Health

1.5FTE Embedded Substance Abuse Counselors – currently paid through a BJA grant and 1FTE Office of Ed

Screening and Linkages to SUD treatment in real time and placements in treatment post-release. Services at West County and Martinez Detention Facilities

OSF fund a portion of Sublocade, an injectable form of buprenorphine

MAT Treatment groups at MDF

Added Recovery Residences for clients on MOUD

Healthcare Needs of California's Justice-Involved Population (DHCS)

The Bureau of Justice Statistics found through surveys that nearly two-thirds (63 percent) of people in jail meet criteria for drug dependence or abuse. Many of these individuals have OUDs and could benefit from access to MAT. National Sheriffs' Association/National Commission on Correctional Health Care: Jail-Based Medication-Assisted Treatment: Promising Practices, Guidelines, and Resources for the Field

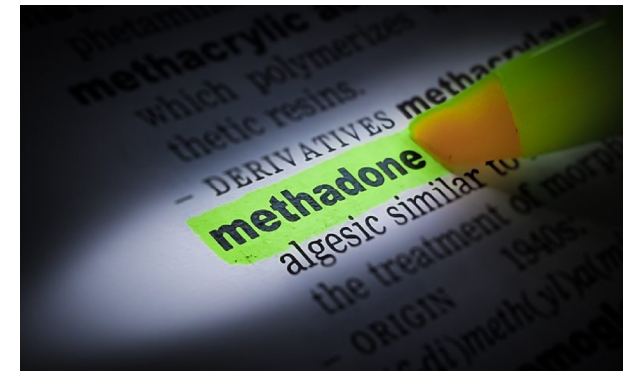
Medication Assisted Treatment (MAT)

Services

- MAT can be used as a stand- alone treatment or in conjunction with outpatient and/or residential treatment
- Medications are based on client's substance use and current living situation
- For individuals with Opioid Use Disorders (OUD), a choice between Methadone and Buprenorphine
- Methadone is distributed at daily office visits until take – home doses are suitable
- Buprenorphine can be prescribed as any prescription is and picked up at local pharmacies
- If Sublocade is recommended, then counselors work with the PCP
- Medication for Alcohol Use Disorders (AUD), through PCP or Recover

Programs

- 3 methadone/Buprenorphine programs located in West, East and Central County
- Buprenorphine is available at Choosing Change Clinics and it can be prescribed by any PCP
- Recover – via telehealth



RECOVERY RESIDENCES

Recovery Residences is a term generally used to describe a specific type of housing. Also known as Sober Living Environments offer a housing alternative to individuals recovering from substance use disorders.

Recovery Residences are not licensed but they are monitored by Alcohol and Other Drugs staff.

Residents must have the ability to live independently with minimal to no support

Recovery Residences are not considered low barrier housing, clients must commit to continue outpatient treatment and become employable

A total of \$478,149.72 in OSF were allocated in FY24-25 for clients with OUD



Upcoming Events and Activities

Harm Reduction Training



HEPPAC
HARM
REDUCTION 101
TRAINING *Online*

Learn Harm Reduction:
Past, Present and
Future

Skills building to provide low
barrier Harm Reduction in
clinical and non-clinical
settings.

Thursday
May 9th
1:00 pst

Scan For
Zoom Link

 **HEPPAC.ORG**

Fentanyl High Film



A Documentary
by Kyle Santoro

In partnership with Contra Costa
Behavioral Health - Alcohol and
Other Drugs Services and City of
Antioch

ANTIOCH
CALIFORNIA
RECREATION DEPARTMENT

**FENTANYL
HIGH**

APRIL 29, 2025
6 PM - 8 PM
ANTIOCH COMMUNITY CENTER
4703 LONE TREE WAY, ANTIOCH, CA 94531

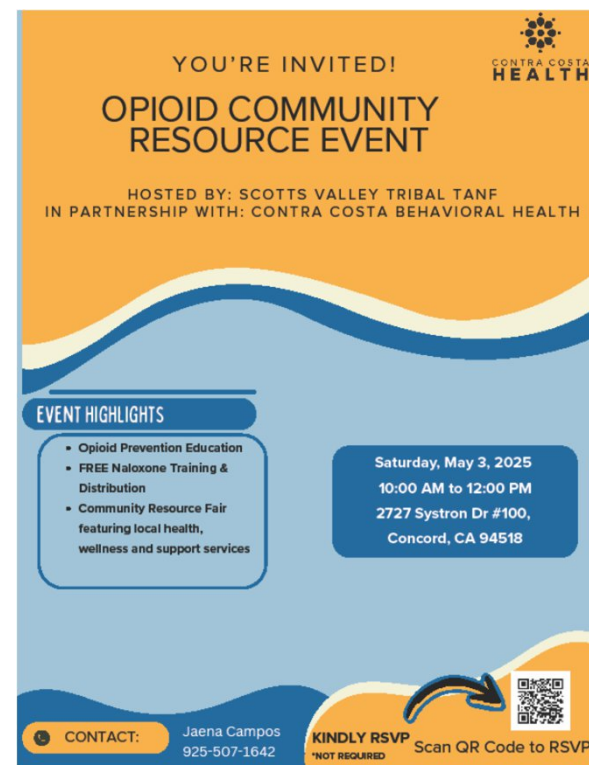
Join us for an impactful night on National
Fentanyl Awareness Day to learn about the
opioid crisis through interviews and testimonies
of youth and adults.

Appropriate for young people 12 and older.
Register [here!](https://bit.ly/3R2FOSQ)
<https://bit.ly/3R2FOSQ>

If you have any
questions please
contact 925-779-
7082

To learn more about Fentanyl High Film visit fentanylhight.com

Scotts Valley Resource Event



**CONTRA COSTA
HEALTH**

YOU'RE INVITED!
**OPIOID COMMUNITY
RESOURCE EVENT**

HOSTED BY: SCOTTS VALLEY TRIBAL TANF
IN PARTNERSHIP WITH: CONTRA COSTA BEHAVIORAL HEALTH

EVENT HIGHLIGHTS

- Opioid Prevention Education
- FREE Naloxone Training & Distribution
- Community Resource Fair featuring local health, wellness and support services

Saturday, May 3, 2025
10:00 AM to 12:00 PM
2727 Syston Dr #100,
Concord, CA 94518

CONTACT: Jaena Campos
925-507-1642

KINDLY RSVP
*NOT REQUIRED

Scan QR Code to RSVP!

Requests for Proposals (RFPs)

Work with CCH

- Benefits
- Change Agent Fellowship
- Contact Us - Personnel
- Contract Work
- Current Openings
- + Family Medicine Residency Program
- + Health Career Pathways
- + Internship Opportunities
- Jobs for Physicians & Nurse Practitioners

RFPs

- + Volunteer

[About Contra Costa Health](#) » [Work with CCH](#) »

REQUESTS FOR PROPOSALS

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This page is home to all requests for proposal (RFPs) for new Contra Costa Health (CCH) projects. Each RFP announces a new project, describes the scope and goals and solicits bids from contractors who are interested in working with CCH and meet the RFP's requirements.

Be sure to read RFPs closely before submitting them. Requirements vary from request to request.

You can also check the County's [Purchasing Services page](#) for opportunities.

Current RFPs

(All Departments) (All Bids)

| RFP NUMBER | TITLE | STARTING | CLOSING | STATUS |
|------------|---|------------|--------------------|--------|
| | Opioid Settlement Funds for SUD Primary Prevention Programs | 03/13/2025 | 04/30/2025 5:00 PM | Open |
| | Opioid Settlement Funds Management Services | 03/13/2025 | 04/18/2025 5:00 PM | Closed |
| | Los Medanos Health Area Funded Health Services | 03/06/2025 | 04/18/2025 5:00 PM | Closed |

Work with CCH

- Benefits
- Change Agent Fellowship
- Contact Us - Personnel
- Contract Work
- Current Openings
- + Family Medicine Residency Program
- + Health Career Pathways
- + Internship Opportunities
- Jobs for Physicians & Nurse Practitioners

RFPs

- + Volunteer

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REQUESTS FOR PROPOSALS

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Opioid Settlement Funds for SUD Primary Prevention Programs

Start Date: 03/13/2025
Close Date: 04/30/2025 5:00 PM

Contra Costa Behavioral Health (CCBH) is currently seeking proposals from providers interested in providing Substance Use Disorder Prevention services for beneficiaries in Contra Costa County. Prevention remains a key strategy in Contra Costa County's efforts to combat the opioid crisis. CCBH invites community-based organizations to submit proposals for prevention activities to be served within Contra Costa to residents who qualify for such activities. Please refer to the attachments below for additional details and requirements. Applicants are asked to submit proposals that will cover services to be rendered for FY 25-26 through FY 27-28.

The deadline to submit proposals is April 30, 2025 at 5:00 pm.

Email completed RFP packets to mliu@cchealth.org

- [Opioid Settlement Funds RFP for SUD Primary Prevention Programs](#)
- [Attachment A - Proposal Cover Page](#)
- [Attachment B - Equity & Culturally Appropriate Services Section](#)
- [Attachment C - Prevention Proposal Project Narrative](#)
- [Attachment D - Prevention Proposal Project Work Plan](#)
- [Attachment E - Prevention Contractor Workplan Template](#)
- [Attachment F - Bidders Reference Form](#)

Recommendations

ACCEPT Behavioral Health's Report and Response to the Opioid Crisis in Contra Costa

ACKNOWLEDGE that the delays created in program implementation, resulted from slow release of funding, workforce shortages, inability to hire in a timely manner and delays in implementing the required community engagement process

DIRECT Behavioral Health to continue efforts intended to raise community awareness and education in the community

DIRECT Behavioral Health to distribute funds through the Request for Proposals (RFP) process and support projects and activities with equity-driven programming, and measurable community impact.

ACCEPT the Division's recommendation to distribute available OSF as follows: 50% treatment and recovery, 20% harm reduction/intervention, 30% prevention, while maintaining spending requirements of no less than 50% in High Impact Abatement Initiatives.

ACCEPT recommendation to issue additional Request for Proposals to ensure that Exhibit E activities and Core Strategies are implemented in the community

DIRECT Behavioral Health staff to continue to track data to monitor the impact of opioids in the County and continue efforts to prevent overdoses

SUPPORT, efforts intended to promote the County's OD-Free Contra Costa campaign to increase awareness and education in the community

SUPPORT continued efforts to increase SUD and MAT treatment and support SUD treatment provider initiatives intended to remove barriers to treatment

DIRECT, Behavioral Health to continue to work with local cities and subdivisions to amplify the impact of abatement efforts



CONTRA COSTA
HEALTH



[cchealth.org](https://www.cchealth.org)

Thank you

Visit the OD Free Contra Costa Landing
Page!

<https://www.cchealth.org/health-and-safety-information/od-free-contra-costa>





1220 Morello Avenue, Suite 101 | Martinez, CA 94553 | Phone: 925-335-3330 | Fax: 925-335-3311
cchealth.org

To: The Contra Costa County Board of Supervisors

From: Suzanne Tavano, PhD Behavioral Health Division Director
Fatima Matal Sol, Alcohol and Other Drugs Services (AODS) Program Chief
Elissa Kim, MPH Opioid Response County Coordinator

Re: Opioid Settlement Activities and County Response to Opioid Crisis Report
to Family and Human Services May 12, 2025.

Date: May 12, 2025

I. OPIOID SETTLEMENT FUNDS BACKGROUND

In response to the nationwide opioid crisis, Contra Costa County has joined California's broader effort to leverage resources secured through national settlement agreements. These settlements, finalized in 2022 and 2023¹, resolve litigation against major opioid manufacturers, distributors, and retail pharmacies for their role in exacerbating the epidemic.

Through these agreements — which include companies such as Janssen Pharmaceuticals (Johnson & Johnson subsidiary), McKesson, Cardinal Health, AmerisourceBergen, Teva, Allergan, Walgreens, Walmart, and CVS — California is expected to receive more than \$2 billion in settlement funds over the coming years. These funds are designated to support activities that prevent, treat, and remediate opioid use disorders (OUD).

Contra Costa County participates in the California Opioid Settlement Funds (OSF), through direct access to funding from the California Abatement Accounts Fund. The California Department of Health Care Services (DHCS) oversees these funds statewide,² providing guidance and ensuring that allocations align with state law and the settlement terms. BrownGreer PLC, the national administrator, manages payment distribution.

According to the terms of the OSF, the funds must be used for opioid remediation activities outlined in Exhibit E³ of the National Settlement Agreement. Local priorities are expected to focus on Opioid-related prevention, treatment expansion, harm reduction services, and recovery support. Specific examples of eligible activities include:

¹ [BHIN 24-002 CA Participating Subdivision Use of OSF Allocated from the CA Abatement Accounts Fund](#)

² [California Code, GOV 12534.](#)

³ [Exhibit E Final Settlement Agreement 8-2021](#)

- Naloxone distribution and overdose prevention initiatives
- Medication-assisted treatment (MAT) program expansion
- Public health education and awareness campaigns
- Services addressing co-occurring mental health and substance use conditions

| Fund Type | Recipient(s) | Allowable Uses |
|----------------------------------|-------------------------------|--|
| CA Abatement Accounts Fund (70%) | CA Participating Subdivisions | Funds must be used for future opioid remediation in one or more of the areas described in Exhibit E of the National Opioid Settlement Agreements; AND No less than 50% of the funds received in each calendar year will be used for one or more High Impact Abatement Activities. |
| CA Subdivision (15%) | CA Plaintiff Subdivisions | Funds must be used towards future opioid remediation and to reimburse past opioid related expenses, which may include litigation fees and expenses. |
| CA State Fund (15%) | The State of California | Funds must be used for future opioid remediation. |

Administrative costs are capped at no more than 5% of a jurisdiction's total funding allocation, ensuring that most dollars are directed toward direct service delivery and community impact.⁴

Settlement payments are structured over multiple years, with funding disbursed annually and extending for up to 18 years, depending on the terms of each agreement. This long-term investment provides Contra Costa County with an opportunity to expand a sustainable opioid response infrastructure, strengthen partnerships with community-based organizations, and drive measurable reductions in opioid-related harm across diverse communities.

II. FUNDS RECEIVED

⁴https://www.nationalopioidabatementtrust.com/Home/DownloadDoc?docpath=https://pstoragenationalopioid.blob.core.windows.net/prod/NOAT2/738/738_1213.pdf&docname=8444%20Notice%20of%20Filing%20on%20Behavior%20of%20California%20%28CA%29%20-%20SAA%20%28C1241631x9DB18%29

| SETTLEMENT SOURCE | AMOUNT RECEIVED TO DATE |
|--|-------------------------|
| ABATEMENT FUNDS | 17,397,375.95 |
| SUBDIVISION FUNDS | 3,877,714.43 |
| CA MALLINGCKRODT ALLOCATION (NOAT II) | 464,041.82 |
| ENDO PUBLIC OPIOID TRUST | 419,145.65 |
| MCKINSEY SUBDIVISION SETTLEMENT | 441,906.26 |
| Amount Received to Date | \$22,600,184.11 |
| AMOUNT SPENT TO DATE | 1,014,996.37 |
| FY23/24 | 175,426.65 |
| FY24/25 | 839,569.72 |
| <p>ROLLING OVER/ENCUMBERING FUNDS</p> <ul style="list-style-type: none"> Participating Subdivisions may roll over funds from the previous year and/or encumber funds for future eligible purchases. Funds must be expended or encumbered within five (5) years of receipt, or seven (7) years for capital outlays projects For example, funds received during 2022 must be spend or encumbered by 2027 (five (5) years) for non-capital outlay projects or 2029 (seven (7) years) for capital outlay projects. Funds not expended or encumbered within these timeframes must be returned to the state. | |

III. COLLABORATION WITH CITIES

Consistent with the Final Settlement Opioid Agreements and direction from the Department of Health Care Services (DHCS), like most counties Behavioral Health received preliminary information from the County Administration Office (CAO) about Opioid Settlement Funds (OSF) at the end of 2021. At the time, the County was also made aware of several requirements: 1) Development of a regional plan of OSF conforming programs that would focus on substance abuse prevention and treatment services with eligible activities and expenditures consistent with two settlement agreements and the High Impact Activities listed in the two state-subdivision agreements. 2) Pursuant to CA Subdivision Agreements, unless Cities elected to receive settlement funds directly Cities' funding would go to County so that services/programs could be spent on regional programs. Accordingly, Cities had to elect to keep the funding at least 60 days prior to the deadline as established by DHCS. The election of receiving direct funds would make recipients required to comply with annual data and fiscal reporting requirements as determined by DHCS. 3) Funding allocations were expected to begin July 1, 2022. The first-year allocation was expected to be smaller due to 15% that was earmarked towards litigating entities for in-house attorney fees.

On November 18, 2021, Contra Costa Health (CCH) and the CAO began working with the Cities and local police departments to develop a collaborative response to the Opioid Crisis and

establish mutual cooperative agreements. While the amount of funding per settlement per City were relatively low, depending on the City some opted to keep the funding to address their own needs. As most counties have done, the CAO designated Behavioral Health (BH) as the leading expert responsible for the administration of the OSF and the implementation of activities designed to address Opioid Overdoses. In anticipation to the meeting with the Cities, in 2021 the CAO asked CCH to prioritize a list of County OSF strategies.

At the November 18, 2021 Public Managers Association (PMA) meeting, CCH presented the most current County available data depicting the impact of Opioids along with the preliminary list of County priorities and unmet needs. On July 13, 2023 Dr. Suzanne Tavano gave a presentation to all the City Managers outlining the County's preliminary Opioid Response Strategy. At that point Cities still had the opportunity to elect to directly receive the funding or defer their funding to the County. As such, several Cities elected to defer the funding to the County for various reasons that included: recognition that the County's capacity to produce the necessary reports, expertise in understanding opioid addiction and resources. Likewise, Cities also were facing staff shortages due to COVID and had other critical competing priorities. After the July 13, 2023 meeting, CCH continued to work in collaboration with participating subdivisions that were eligible for OSF, at the same time that an increase in overdoses being experienced at BART stations, motels/hotels, schools, etc.

REALLOCATED AMOUNTS BY CITY

| CITIES/SUBDIVISIONS | SUM OF REALLOCATED AMOUNTS |
|---------------------|----------------------------|
| Brentwood | 198,940.49 |
| Antioch | 23,943.13 |
| Clayton | 16,684.63 |
| Danville | 75,991.55 |
| El Cerrito | 174,630.01 |
| Hercules | 14,600.09 |
| Lafayette | 42,525.16 |
| Martinez | 71,732.84 |
| Oakley | 75,424.28 |
| Orinda | 35,251.44 |
| Pinole | 20,687.77 |
| Pleasant Hill | 98,213.43 |
| Richmond | 224,103.59 |
| San Ramon | 163,021.18 |
| Walnut Creek | 195,977.59 |
| Grand Total | \$1,431,727.18 |

Though some Cities elected to keep their OSF, CCH continues to be inclusive in its countywide approach to the Opioids epidemic and to continue to forge strategies that create unified response especially, in areas and/or populations where the utilization of Naloxone to reverse or prevent

overdoses demonstrate the need to collaborate with local cities and municipalities regardless of funding agreements. To date, there have been a number of joint initiatives and several underway to either: increase awareness, improve access to Naloxone, eliminate barriers to treatment, and reduce overdoses in our county.

IV. PRELIMINARY APPROVAL

As stated above and contingent upon local Cities' decision to defer their allocations to the County, given the urgency to respond to the number of overdoses, the lack of awareness and the impact of overdoses in specific populations, CCH was tasked with the development of a preliminary list of strategies to prioritize a response to the Opioid epidemic. All authorized by the OSF, the CAO and PMA, starting in 2024, several Opioid Remediation High Impact Abatement Activities (HIAA) were implemented. Some of the immediate actions included an expansion of countywide Naloxone distribution, training and education to reverse overdoses. Between the Fall of 2023 and 2024, CCH in collaboration with the MEDS Coalition, have diligently provided education to administer and distribute Naloxone both to the community at large, and to targeted populations and locations.

| Phase 1 | Phase 2 |
|---|--|
| <ul style="list-style-type: none"> • Medi-Cal match towards operating cost for existing SUD providers to bolster services and capacity. • Focus on Justice Involved Populations: SUD treatment in the jails. Addition of counselors, medication • Add 1FTE Addiction Medicine Psychiatrist to assist with establishment of MAT expansion to include medical treatment for Alcohol disorders. • Develop Adolescent/Youth SUD Treatment Infrastructure (Residential and Outpatient) • Leadership and Coordination (1 FTE Coordinator) to support implementation of County's Opioid Prevention and Response Program ensure inclusiveness and diversity of community stakeholders, address needs of communities of color and disproportionately impacted | <ul style="list-style-type: none"> • Continue to fund MEDS Coalition and add staff as needed. • Fund Harm Reduction strategies including working with Needle Exchange Sites • Increase SUD street outreach capacity in Recovery Residences, homeless shelters, libraries, encampments, BART stations, etc. • Provide comprehensive care management services to pregnant and postpartum individuals with OUD • Social Media Campaign to increase public awareness. (Billboard, bus banners, web page design/operation) |

As indicated above and following the approval of preliminary activities, BH established a phased-approach to the Opioid Crisis that included: funding to support existing and expansion of substance use disorder (SUD) treatment programs, expansion of Medication Assisted Treatment (MAT) in jails through the purchase of extended-release injectable Medications for Opioid Use Disorders (MOUD), promoting and acquiring public health vending machines to increase access to Naloxone, harm reduction training for health professionals, and providing field-based SUD treatment to eliminate barriers to treatment.

Phase 1 recognizes the heightened risk faced by justice-involved and unhoused individuals,

people of color, residents with a Co-Occurring Disorder (COD), the California Public Health Opioid Dashboard County data, and health inequities. In this phase, funding to hire an Addiction Medicine Psychiatrist (1 FTE) specialist to strengthen the County's capacity to address OUD, and develop the County's adolescent SUD treatment infrastructure (residential and outpatient) was prioritized. Lastly, to comprehensively address data indicators, BH proposed to develop a concerted County response to the Opioid Crisis and ensure that the County complies with all OSF requirements, BH proposed to strengthen leadership and coordination.

Phase 2 builds upon Phase 1 foundational activities, expanding efforts to strengthen community-based support, uplifts community voices and launches a public health awareness campaign, to educate the community about opioid risks and available resources. These phased activities reflect a coordinated, equity-driven strategy to address the opioid crisis in Contra Costa County, ensuring settlement funds are leveraged to create an immediate but also long-lasting impactful change across geographical regions avoiding duplication while amplifying impact.

V. OSF AND COMMUNITY ENGAGEMENT

One of the requirements for the use of OSF is that a community engagement process be implemented so that residents and stakeholders participate in establishing community identified needs. To develop the County's Plan of Action, BH partnered with Indigo Project, a local consulting firm, to conduct a series of *Listening Sessions* to gather community input about their recommendations for the use of the funds based on the impact of the opioid crisis. The proposed approach for community input was presented to the Alcohol and Other Drugs Advisory Board (AODAB) on April 23, 2024, and announced during the Substance Use Disorders (SUD) System of Care meeting which includes SUD treatment and prevention providers. Flyers for the *Listening Sessions* were distributed online and in person at key locations to encourage widespread participation. The *Listening Sessions* were held by regions, both in person and virtually, to accommodate different needs. A survey was created in English and Spanish to capture further feedback from the public. SUD prevention providers also integrated opportunities within their existing programs to allow participants to share their opinions and needs regarding opioid prevention and treatment. All *Listening Sessions*, surveys, and focus groups were completed by June 2024. Members of the AODAB provided their final input at their monthly Board meeting on September 25, 2024. The *Listening Sessions* were promoted on social media platforms such as Facebook and Instagram by CCH's Office of Information and Communication. KRON 4 News covered one session held in Concord. Community recommendations resulting from the countywide community engagement process and data shared at each *Listening Sessions* are all captured in the document called: **"A Call to Action: A Contra Costa Response to Opioid Crisis."** This document is currently posted on the Alcohol and Other Drugs (AOD) webpage.

The document is a preliminary plan aimed at ensuring that until a strategic plan is developed all current opioid remediation strategies are aligned with community recommendations, public health priorities and OSF requirements.

The County's current approach and efforts focus on activities classified as High Impact Abatement Activities (HIAA), followed by initiatives categorized under Remediation Core Strategies, as

outlined in Exhibit E of the national settlement agreement. Contra Costa's Response to the Opioid Crisis, consisted of a robust community engagement to tailor services to the unique needs of vulnerable populations, communities of color, justice-involved individuals, pregnant and parenting women, people experiencing homelessness, and those with co-occurring mental health and SUD. Our overarching goal is to ensure equitable access to prevention, harm reduction, treatment, and recovery services for the County's most impacted communities.

VI. COUNTY OVERDOSE DATA

Understanding demographic trends as well as data from The California Opioid Overdose Surveillance Dashboard is important in framing Contra Costa's opioid response efforts. Communities experiencing socioeconomic hardship, limited healthcare access, language barriers, and systemic inequities are disproportionately vulnerable to SUD and overdose risk. However, OUD and opioid overdoses have impacted residents across socio-economic, demographic, cultural and religious backgrounds. Sadly, nowadays almost anyone has experienced the loss of a friend or a loved one to the Opioid Crisis.

Opioid-Related Mortality Trends

On August 13, 2024, Interim Health Services Director Dr. Ori Tzvieli, presented mortality data from the County's ATLAS dashboard, covering 2020 to 2022 (see Figure 2). The findings underscore the continuing and serious toll of the opioid crisis on the local community:

- Drug overdose emerged as the leading cause of death among residents aged 25 to 54.
- Among residents aged 15 to 24, drug overdose ranked as the second leading cause of death, reflecting the growing vulnerability of youth to substance-related harms.

These patterns highlight the need for sustained, targeted interventions to address opioid misuse and prevent overdose fatalities across all age groups, with a particular focus on young and middle-aged populations.

Leading Causes of Death in Contra Costa County (2020 – 2022)

Communicable Cancer Cardiovascular Other Chronic Injury Perinatal

| Ranking | 0 - 4 | 5 - 14 | 15 - 24 | 25 - 34 | 35 - 44 | 45 - 54 | 55 - 64 | 65 - 74 | 75 - 84 | 85+ |
|---------|----------------------------|--------|---------------------|-----------------------|-----------------------|------------------------------|-------------------------------|-------------------------------|-------------------------------|-----------------------------------|
| 1 | Neonatal conditions 58 | * | Road injury 66 | Drug overdose 162 | Drug overdose 148 | Drug overdose 145 | Ischemic heart disease 307 | Ischemic heart disease 476 | Alzheimer's disease 703 | Alzheimer's disease 2,234 |
| 2 | Congenital anomalies 28 | * | Drug overdose 60 | Road injury 81 | Alcohol-related 60 | Alcohol-related 102 | COVID-19 213 | COVID-19 276 | Ischemic heart disease 618 | Stroke 1,002 |
| 3 | * | * | Homicide 50 | Homicide 66 | Homicide 52 | COVID-19 101 | Drug overdose 168 | Lung Cancer 273 | Stroke 499 | Ischemic heart disease 835 |
| 4 | * | * | Suicide 39 | Suicide 61 | Road injury 50 | Ischemic heart disease 94 | Alcohol-related 147 | Stroke 265 | COVID-19 362 | COVID-19 469 |
| 5 | * | * | * | Alcohol-related 36 | Suicide 48 | Breast cancer 33 | Breast cancer 75 | Breast cancer 125 | Lung Cancer 327 | Hypertensive heart disease 467 |

*numbers less than 11 not reported for patient privacy

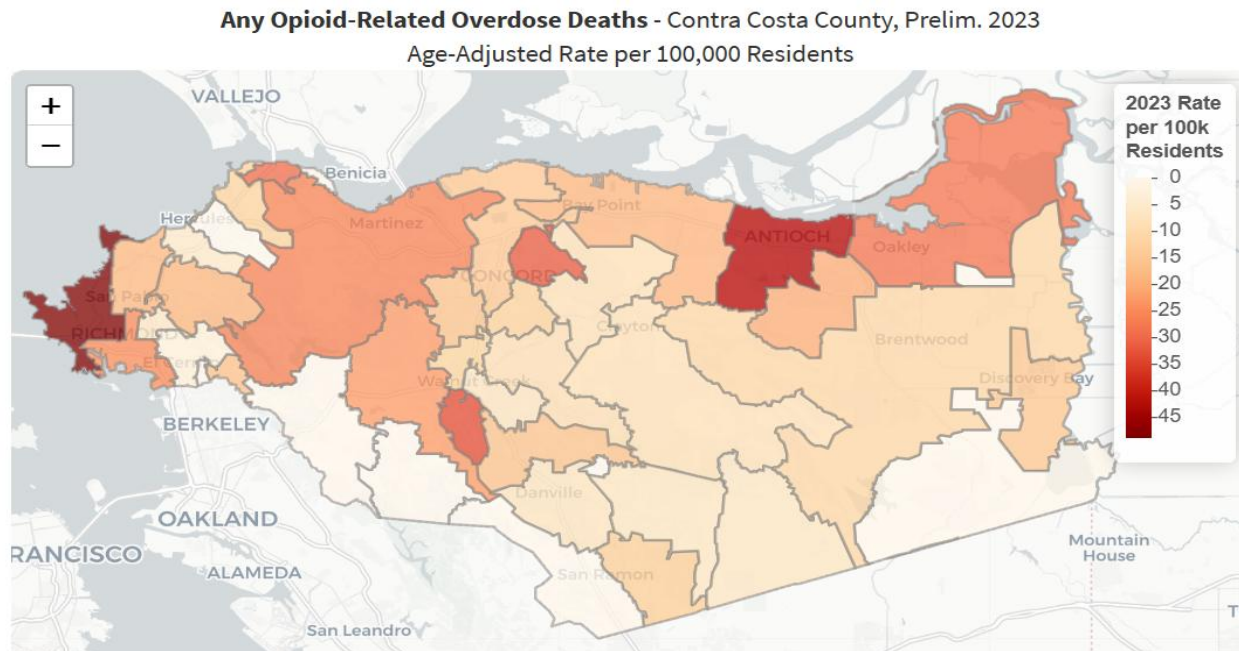
Source for Life Expectancy and Age-Adjusted Mortality Rate by Sex: California Department of Public Health Community Burden of Disease Version P3.0, 3/1/2024
Source for Infant Mortality: California Department of Public Health, Center for Family Health, Maternal, Child and Adolescent Health Division, Infant Mortality Dashboard, Last Modified June 2023

8

Figure 1. Leading Causes of Death in Contra Costa County.

Geographic Patterns in Overdose Rates

The California Opioid Overdose Surveillance Dashboard provides a data source for tracking opioid-related deaths at the state and local levels. Figure 3 presents preliminary age-adjusted opioid overdose death rates for Contra Costa County in 2023, displayed by ZIP code. An age-adjusted rate accounts for differences in age distribution across geographic regions. Because certain age groups are at higher risk of opioid overdose—particularly individuals between ages 25 and 54—age adjustment ensures that areas with older or younger populations do not skew comparisons between ZIP codes. This method allows for a more accurate assessment of where overdose risk is elevated, independent of demographic age differences. In 2023, there were a total of 178 opioid related overdoses.



California Opioid Overdose Surveillance Dashboard

According to the California Opioid Overdose Surveillance Dashboard, the Opioid Overdose Risk Across Contra Costa is as follows;

- Age-adjusted death rates shown by ZIP code for 2023
- Age adjustment accounts for population differences across regions
- Enables accurate comparison of overdose risks across communities

Key Findings

- Richmond (rate: 48.6, per 100,000) and Antioch (rate: 42.3 per 100,000) report highest overdose death rates
- Elevated rates also observed in Pittsburg, Oakley, Bay Point, and parts of Concord and South County

Emergency Department (ED) Visit Data by Race/Ethnicity

Emergency Department (ED) visit data from 2023 related to opioid overdoses in Contra Costa County reported 407 ED visits and reveal significant racial and ethnic disparities (Figure 4):

- Black/African American residents experience the highest ED visit rate at 116.3 per 100,000, more than twice the rate of White residents (52.5 per 100,000).
- Native American/Alaska Native residents report an elevated ED visit rate of 58.8 per 100,000. However, this estimate should be interpreted cautiously due to a wide confidence interval (35.1 to 329.8) associated with a small number of cases.
- Hispanic/Latino residents report an ED visit rate of 25.5 per 100,000.
- Asian/Pacific Islander residents show the lowest ED visit rate at 3.6 per 100,000. This estimate should also be interpreted with caution due to a wide confidence interval and a low number of reported cases.

These disparities underscore the need for culturally responsive prevention, harm reduction, and treatment strategies, particularly in communities facing disproportionate impacts from the opioid crisis.

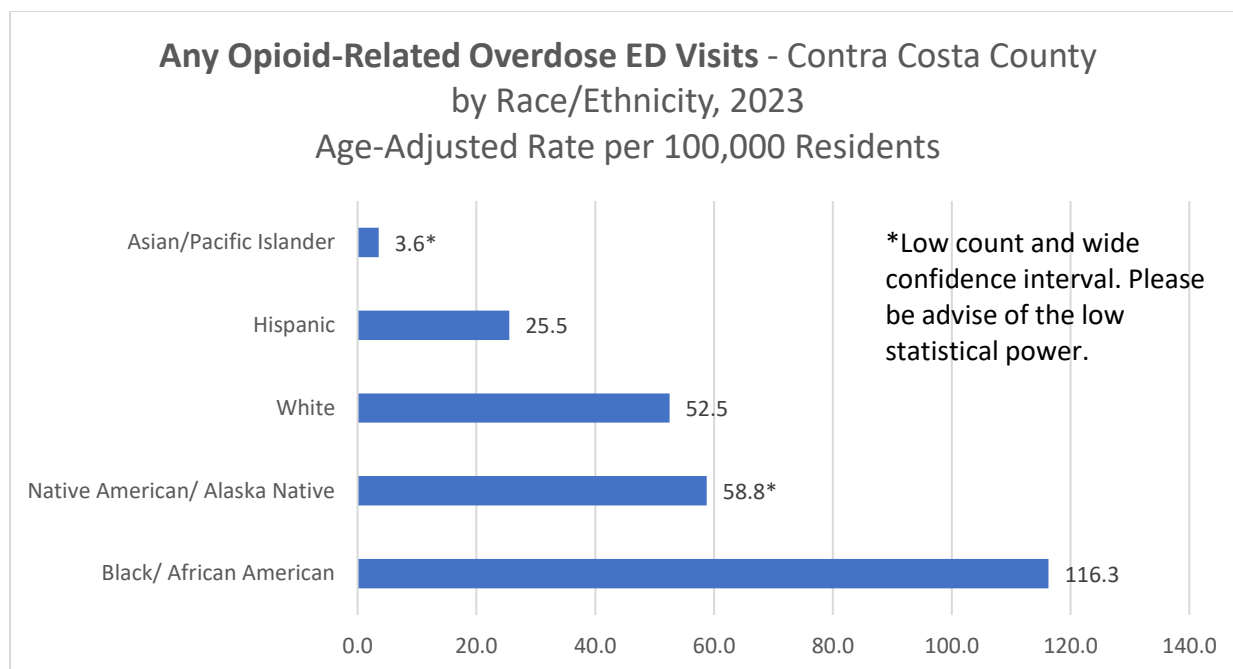


Figure 2. Source: California Department of Health Care Access and Information, Emergency Department Data

Drug Medi-Cal Organized Delivery System (DMC-ODS) Penetration Rates

BH administers the County's Drug Medi-Cal Organized Delivery System (DMC-ODS) as a Prepaid Inpatient Health Plan (PIHP). This system provides a comprehensive continuum of SUD services, including treatment for OUD. While DMC-ODS primarily funds treatment services, BHS also offers limited prevention services not covered under Drug Medi-Cal (DMC), ensuring a seamless continuum of care across the system.

The County's health network supports Medication-Assisted Treatment (MAT) services through the DMC-ODS network providers and its Federally Qualified Health Centers (FQHCs) and public health clinics via the Choosing Change program. Choosing Change is a critical initiative that expands access to MAT, through buprenorphine an FDA-approved medications. The County also makes MAT services available at all three county jails through CCH's Detention Health program. MAT programs combine FDA approved medications with counseling and behavioral therapies to treat individuals with OUD and other SUDs. MAT services shall include both medication and counseling. Increasing access to MAT is an effective way to respond to the Opioid Crisis. Implementing strategies that are low barrier, increase early initiation to MAT to the populations most impacted by OUD are considered best practices and the best standard of care.

Service reach is measured by the penetration rate (PR), which reflects the percentage of Medi-Cal-eligible individuals who received SUD services through the DMC-ODS. A higher penetration

rate suggests greater access to care within the eligible population, whereas a lower penetration rate may indicate service delivery gaps or barriers to treatment engagement.

The table below depicts the DMC-ODS Penetration Rate Data (PRD) for Medi-Cal beneficiaries using DMC approved claims for CY 2022 as presented at the FY23-24 External Quality Review Organization (EQRO).

- Table 4 presents Contra Costa County's DMC-ODS Medi-Cal eligible population, the number of members served, and corresponding penetration rates by age group for Calendar Year 2022.

| Age Groups | # Members Eligible | # Members Served | County PR | County Size Group PR | Statewide PR |
|--------------|--------------------|------------------|--------------|----------------------|--------------|
| Ages 12-17 | 35,236 | 122 | 0.35% | 0.29% | 0.25% |
| Ages 18-64 | 177,604 | 2,315 | 1.30% | 1.29% | 1.19% |
| Ages 65+ | 34,052 | 214 | 0.63% | 0.56% | 0.49% |
| Total | 246,892 | 2,651 | 1.07% | 1.04% | 0.95% |

Figure 3. Contra Costa DMC-ODS Medi-Cal Eligible Population, Members Served, and Penetration Rates by Age CY 2022

- Table 5 presents the DMC-ODS Medi-Cal eligible population, members served, and penetration rates by race and ethnicity for the same period.

| Racial/Ethnic Groups | # Members Eligible | # Members Served | County PR | Same Size Counties PR | Statewide PR |
|------------------------|--------------------|------------------|-----------|-----------------------|--------------|
| African American | 31,665 | 457 | 1.44% | 1.29% | 1.19% |
| Asian/Pacific Islander | 28,883 | 60 | 0.21% | 0.15% | 0.15% |
| Hispanic/Latino | 76,183 | 396 | 0.52% | 0.74% | 0.69% |
| Native American | 628 | 16 | 2.55% | 2.34% | 2.01% |
| Other | 68,336 | 872 | 1.28% | 1.34% | 1.26% |
| White | 41,200 | 850 | 2.06% | 1.89% | 1.67% |

Figure 4. Contra Costa DMC-ODS Medi-Cal Eligible Population, Members Served, and Penetration Rates by Race/Ethnicity CY 2022

Ongoing efforts are focused on improving penetration rates, particularly among historically underserved populations, including Latino/Hispanic and Asian/Pacific Islander communities and justice-involved individuals. Enhancing service access for these groups remains a priority to ensure equitable health outcomes across the County.

VII. TARGET POPULATIONS

Contra Costa County's Opioid Response strategy prioritizes the populations most disproportionately impacted by the overdose crisis. Guided by the California Opioid Overdose Surveillance Dashboard, community input, and the national opioid settlement's guidance, the County has identified the following groups as priority populations for targeted investments and

tailored interventions. Contra Costa's response include interdivisional and interdepartmental coordination.

- Black/African American, Native American, and Asian communities experience disproportionately high rates of opioid-related outcomes and low service utilization, signaling longstanding structural barriers to prevention, treatment, and culturally responsive care.
- Youth and transitional age youth are particularly vulnerable. Drug overdose is the second leading cause of death among residents aged 15–24 in Contra Costa County, underscoring the need for age-specific prevention and early intervention services.
- People experiencing homelessness face persistent housing instability, which remains one of the greatest barriers to sustained treatment engagement, recovery, and follow-up care.
- Pregnant and postpartum individuals with OUD require specialized, coordinated care that addresses maternal health, child safety, and recovery supports in tandem.
- Justice-involved individuals particularly those reentering the community from incarceration—are at heightened risk of overdose and death, especially within the first week's post-release due to reduced tolerance and service disconnection.

From the *Listening Sessions*, participants included many stakeholders: parents, youth, justice-involved individuals, those in treatment or recovery, school-based staff, faith-based organizations, and providers. Emerging key themes from the sessions included the urgent need for youth treatment, culturally responsive care, housing for people in recovery (especially for those using MAT), and more targeted outreach in underserved communities.

This feedback contributed to continue to shape the preliminary response plan and priorities for prevention, harm reduction, treatment and recovery strategies under the OSF. Community members expressed support for programs that:

- Expand residential treatment for youth and MAT-friendly sober living environments
- Support justice-involved and unhoused individuals with care navigation and care management
- Provide overdose education and increase access to Naloxone everywhere: colleges, jails, BH settings, street medicine teams, schools, libraries, homeless engagement teams/encampments, BART stations, SUD providers, shelters, etc.
- Launch culturally tailored public education campaigns to reduce stigma and increase awareness of treatment services
- Increase education and awareness about OUD and for overdose prevention to parents, families and communities, focus on communities of color.
- Outreach teams at sensitive locations, include encampments, syringe services sites, recovery residences, methadone programs, etc.
- Earmark funds for prevention programs
- Implement a detox program in East County, support needs of pregnant women with OUD
- Expand and build capacity for SUD treatment programs including MAT

- Increase recovery residence (Sober Living Environments- SLE) funding, housing was recognized as a primary need for people who complete residential treatment



The flyer is for Contra Costa Health's Opioid Community Listening sessions. It features the organization's logo at the top, followed by the title 'OPIOID COMMUNITY LISTENING'. A message states: 'We want to hear from you about the services needed in Contra Costa County to address the opiate epidemic in our communities. Please let your voice be heard!'. Below this, four listening sessions are listed in a 2x2 grid:

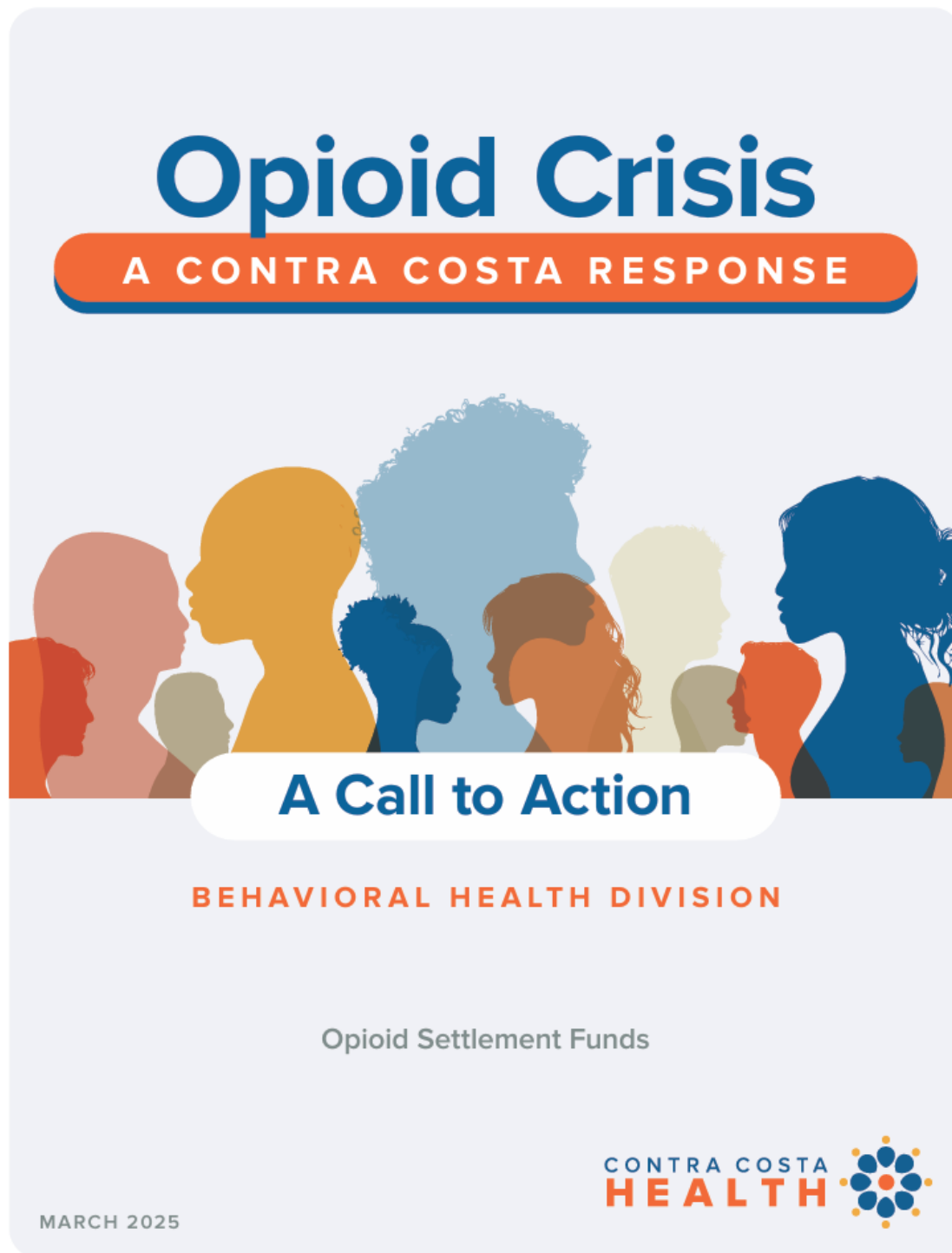
| EAST COUNTY LISTENING SESSION | CENTRAL COUNTY LISTENING SESSION |
|---|----------------------------------|
| MAY 8TH, 4:30- 6:30 | MAY 9TH, 9:30- 11:30 |
| 340 MARINA BLVD IN PITTSBURG | 2380 BISSO LANE IN CONCORD |
| SOUTH COUNTY LISTENING SESSION | WEST COUNTY LISTENING SESSION |
| MAY 15TH, 5:30- 7:00 | MAY 16TH, 11:30- 1:30 |
| https://us02web.zoom.us/j/86471048719?pwd=BF01ETRJTU9QWU9ST084YJN4MMZVQT09 | 2200 MACDONALD AVE IN RICHMOND |

Below the sessions, it says: 'You can also share your feedback online at: <https://survey.alchemer.com/s3/7820053/CCBHS-Opioid-Settlement-Funds-Community-Feedback>'. To the left is a QR code, and to the right is a megaphone icon. Text next to the megaphone says: 'If you would like to request interpretation or other accommodations, please email Jessica.Recinos@ccchealth.org'. At the bottom, it notes: '*Overdose prevention supplies will also be available at these events.' and includes the Indigo Project logo.

Figure 5. Opioid Community Listening Flyer.

ACCOMPLISHMENTS TO DATE

BH, in collaboration with its partners, has made notable progress in implementing a coordinated, equity-driven opioid response plan. The following accomplishments reflect new programs, outreach strategies, and tools developed to address prevention, harm reduction, and recovery.



Funding Deployment to Address Overdoses

Behavioral Health recognizes that addressing the impact of Opioid Overdoses takes a collective approach. In accordance to the County's procurement policy and consistent with OSF requirements as well as community recommendations to address the Opioid Crisis, Behavioral

Health has preliminarily issued two separate Request for Proposals (RFPs). The first RFP focuses on prevention, soliciting innovative and community defined practices aimed at focusing on populations most impacted by overdoses. The second RFP seeks a Foundation that could fund smaller grants focusing on harm reduction, treatment and recovery. Depending on success, BH is prepared to add funds in each area.

Continued Efforts to Build Community Engagement and Collaboration: Opioid Awareness Community Forums

Subsequently to the development of ***A Call to Action: Contra Costa's Response to the Opioid Crisis***, Behavioral Health has continued to build the partnership with local municipalities and Police Departments by hosting multiple community forums to raise awareness about the impact of opioid, increase understanding about overdose prevention, facilitate distribution of Naloxone, understand the local impact of Opioid Overdoses and disseminate available resources. The synergy created by each Forum in separate cities have created a cascade effect thereby motivating participants to plan similar forums in other cities.

Events were held in the:

- City of Oakley (December 18, 2024) with participation from Supervisor Burgis, Oakley's Mayor and Chief of Police
- City of Antioch (March 26, 2025 and April 29, 2025)
- City of Pittsburg (April 16, 2025) with participation Pittsburg Mayor and Chief of Police
- City of Antioch: (April Tuesday 29th, 2025) Screening of the Film Fentanyl High to parents and youth

Each forum included keynote speakers, training on use of Naloxone, resource tables, and data sharing. Surveys were distributed to participants—including youth, parents, and individuals with lived experience—to gather feedback on perceived service gaps, barriers to care, and areas of community need. The community continues to respond with eagerness to learn about the impact of Opioids and a genuine interest to come together to collectively reduce overdoses.

Focus Group: BAART Clinic

On March 28, 2025, CCBHS facilitated a client-centered focus group at the BAART Clinic in Antioch to engage clients receiving methadone treatment and to understand their specific needs. Clients receiving Methadone constitute the largest number of clients served by AOD, a large portion of methadone clients are also considered highly vulnerable and high utilizers of the system. Participants represented a range of age groups and cultural backgrounds. There were several individuals experiencing homelessness and one pregnant client. Key insights included:

- Barriers to treatment: transportation limitations, unclear clinic policies, and inconsistent counselor access.
- Unanimous support for low-barrier/recovery residences, pet-friendly, particularly for vulnerable groups such as pregnant clients.
- Limited access to naloxone, inadequate harm reduction outreach, and technology challenges impeding communication (e.g., lack of phones, limited awareness of county services).

Participants valued the opportunity to share their perspectives and expressed strong interest in continuing regular input sessions. Recommendations from the session included:

- Installation of naloxone access points (e.g., vending machines or stand boxes)
- Greater counselor visibility and presence
- Improved access to Enhanced Care Management (ECM), and other County-provided services.
- Implementation of programs in East County that support a hub-model that allows for socialization while providing health, social, recovery support, care management, employment and housing resources.

These engagements underscore CCBHS's commitment to building an opioid response system informed by those most affected—ensuring responsiveness, trust, and shared ownership in the County's efforts to address the opioid crisis. Please see Appendix B to see the report.

Presentation and Training by the MEDS Coalition

The MEDS Coalition is a vital partner in CCBHS opioid prevention and education efforts. In coordination with Behavioral Health, the MEDS Coalition facilitates opioid-related training and presentations across Contra Costa. These activities include public education on safe medication practices, overdose prevention, and naloxone awareness.

The MEDS Coalition provides these services to a range of audiences—including schools, community-based organizations, healthcare providers, and local government agencies—ensuring that accurate, up-to-date information reaches residents throughout the County. Through this partnership, the MEDS Coalition plays a key role in advancing prevention strategies and expanding the County's community outreach capacity under the OSF initiative. To date and since 2023 Contra Costa Behavioral Health has provided 118 presentations/trainings.

OPIOID RESPONSE TEAM (ORT)

The Contra Costa County Opioid Response Team (ORT) was developed as a frontline initiative through direct engagement and immediate support. ORT is comprised of field-based substance use counselors dedicated to reaching individuals with OUD at critical "touchpoints" throughout the community (Figure 7). These include homeless encampments, recovery residences, motels, jails, probation settings, public defender referrals, shelters, syringe services, hospitals, BART stations, and other areas where populations most impacted by overdoses are present.



Figure 6. Touchpoint's location where ORT team interacts

ORT's mission is rooted in harm reduction and person-centered care. The team meets clients where they are—geographically, emotionally, and in their recovery journey—with compassion, respect, and a commitment to treatment on demand. Through strong partnerships with treatment providers, justice system actors, public health agencies, and harm reduction coalitions, ORT bridges gaps across the continuum of care and ensures timely connections to services.

Key Services and Activities:

- Distributing life-saving harm reduction tools, including Naloxone (Narcan) and fentanyl test strips.
- Conducting outreach and education at schools, shelters, churches, and encampments.
- Providing support and referrals for individuals recently released from incarceration or justice-involved settings.
- Supporting housing navigation and case management for clients without stable shelter.
- Offering follow-up support for clients completing treatment to promote long-term recovery.
- Accepting referrals and assisting with a dedicated contact email AODOpioidResponse@cchealth.org
- Providing early engagement and follow up to treatment as well as linkages to SUD treatment in real time

ORT's responsive structure ensures that individuals impacted by the opioid crisis are not only reached but empowered with resources and support throughout their recovery journey. With a compassionate, bilingual team and an unwavering commitment to equity and access, ORT is an important part of the County's coordinated response to the opioid epidemic.

Clinical Case Reviews

Also a direct collaboration between Public Health and BH, a joint team between clinical staff from each Division comes together on regular basis to review either overdose cases or individuals who have survived multiple overdoses. Clinical case review follow the clinical and medical history of the client to understand missed opportunities in our system whereby an opportunity may have been missed. The angle and benefit of this approach is to look at our health system, learn and design interventions where current clients/patients can be better supported to prevent overdoses.

HARM REDUCTION

Syringe Services Program (SSP)

Contra Costa County's harm reduction strategy involves both Public Health and BH staff. It is anchored by Public Health's Syringe Services Program (SSP), a key pillar of its opioid response efforts. In collaboration with regional partners, including the HIV Education and Prevention Project of Alameda County (HEPPAC) and the County's Public Health HIV/STI Program, the SSP delivers services to individuals who use drugs—particularly those at risk of overdose, infection, or treatment disengagement. SSP efforts are centered around mobile outreach, which has significantly expanded across East and West County. Mobile units provide services directly within communities, meeting individuals where they are and reducing barriers to access to resources. These efforts prioritize high-need zones such as Bay Point, Richmond and others. Key program activities include:

- Distribution of sterile supplies, including syringes, alcohol wipes, wound care kits, and sharps containers to prevent infections and reduce disease transmission.
- Naloxone (Narcan) distribution and education: Staff provide overdose prevention training and kits at all outreach locations, empowering individuals to reverse overdoses in their communities.
- Fentanyl test strip access: Clients receive education on fentanyl risks and are provided with test strips to reduce accidental overdose.
- Wound care and referrals: Staff identify individuals with visible injection-related wounds and offer triage support, first-aid supplies, and connections to medical care.
- HIV/Hepatitis C testing and linkage to care: Staff screen individuals and connect them with follow-up treatment, which is especially important for unhoused populations.
- Service navigation: Individuals are provided information about MAT, shelter, mental health care, and social services, with on-the-spot referrals to County or partner agencies.

Public Health Vending Machines

As part of its strategy to increase low-barrier, 24/7 access to lifesaving health supplies, Contra Costa is launching a pilot initiative to install public health Harm Reduction Vending Machines (HRVMs) across the County's regions. Funded through the OSF, the HRVMs will dispense essential health protection tools free of charge, including naloxone (Narcan), fentanyl test strips, hygiene kits, wound care materials, condoms, menstrual supplies, and sharps containers.



Marin County Jail Vending Machine

This effort is part of a three-year contract awarded through RFP #2406-808. It includes:

- Procurement and placement of two new HRVMs and relocating three existing vending machines to Contra Costa. Although Public Health is the holder of the contract, the contract includes OSF and partially funds 3 vending machines and Harm Reduction training through HEPPAC
- Maintenance, restocking, and usage monitoring of all five machines.

Integration with broader harm reduction efforts, targeting areas where clients may not otherwise access traditional services. HEPPAC and the County's HIV/STI Program will jointly oversee this pilot, with vending machines strategically placed in high-need ZIP codes, including areas with documented overdose spikes and limited outreach infrastructure.

HRVMs complement street-based outreach by expanding access to harm reduction resources after hours in underserved locations. They are essential for residents who face stigma, lack of transportation, or unstable housing, this applies to Jails, emergency rooms, shelters. The following sites are actively engaged in the installation of public health vending machines and are at various stages of implementation:

Confirmed Site Locations and Awaiting Installation

Oakley Recreation Center, Oakley
Brookside Shelter, Richmond
Delta Landing, Pittsburg

In Progress Discussions

Contra Costa Regional Medical Center, Martinez
Mental Health Connections, Antioch
Contra Costa Jail Facilities

Naloxone Stand Box (NSB)

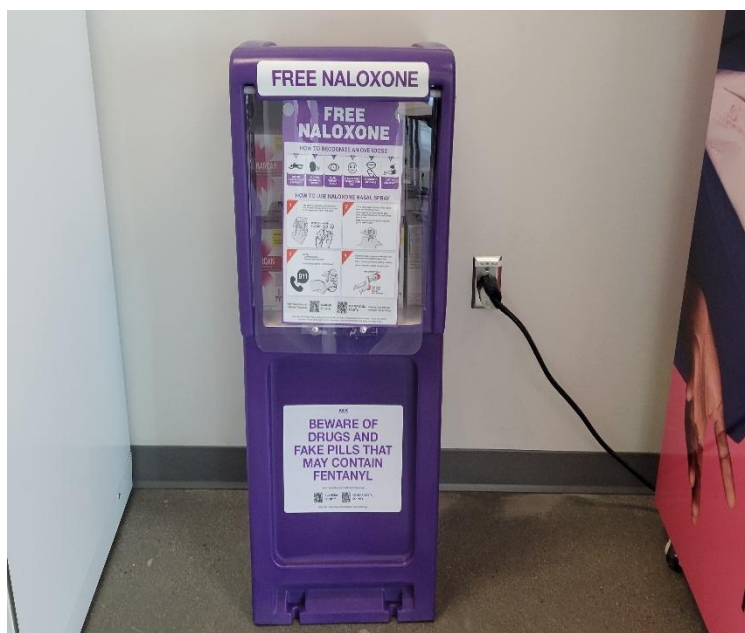


Figure 7. "Barney" Naloxone Stand Box at Los Medanos College, Pittsburg

As part of Contra Costa County's comprehensive harm reduction and overdose prevention strategy, Behavioral Health in partnership with the MEDS Coalition—has launched a Naloxone Stand Box (NSB) initiative. This effort is funded and supported through the California DHCS and aligns with broader goals outlined in the OSF strategic framework.

The NSB initiative seeks to reduce opioid overdose fatalities by increasing free, 24/7 public access to naloxone in high-need and underserved areas. The initiative was modeled after successful pilots

in neighboring counties and follows evidence-based best practices for community-based naloxone distribution.

The NSBs are manufactured and supplied by the Illinois Supply Company⁵, a vendor selected for its experience in producing community-accessible naloxone dispensing units. This vendor is also used by Alameda County Behavioral Health, which has adopted the NSB model for countywide expansion.

⁵ [The Barney Naloxone Stand™ - Newspaper Stand Style Free Standing Naloxone Distribution Box](#)



Figure 8. Barney Naloxone Stand Box Opened at Los Medanos College, Pittsburg

These efforts are supported through partnerships with public agencies, educational institutions, and nonprofit organizations, formalized through signed Memoranda of Understanding (MOUs).

Each NSB hosting agreement is governed by an MOU between the County's implementation partner MEDS Coalition and the host site. The MOU outlines shared roles and responsibilities:

- The MEDS Coalition provides the NSB unit, application support for naloxone supply, promotional materials, and quarterly reporting templates.
- Host Sites agree to install, maintain, stock, and promote the NSB and submit quarterly updates on distribution activity.

These agreements are essential to ensuring proper placement, community engagement, and sustainability of the NSB initiative.

The following sites are actively engaged in the expansion of the NSB initiative and are at various stages of implementation:

- Contra Costa Regional Medical Center (CCRMC), Martinez Campus – 2 NSBs
- Homeless Shelter at Delta Landing, Pittsburg – 1 NSB

These installations are part the BH efforts to increase access to Naloxone and harm reduction approach in alignment with Core Abatement Strategies under the national settlement framework. Ongoing collaboration with local institutions ensures continued accessibility to naloxone in high traffic, trusted, and non-stigmatizing settings. Both access to Naloxone and expansion of available SUD/MAT treatment are the cornerstone of reducing overdoses.

Confirmed Locations (8 Stand Boxes)

| HOST LOCATION | ADDRESS |
|--------------------------|--|
| Diablo Valley College | Pleasant Hill Campus 321 Golf Club Rd Pleasant Hill CA 94523 |
| Diablo Valley College | San Ramon Campus 1690 Watermill Rd San Ramon CA 94582 |
| Los Medanos College | Pittsburg 2700 E Leland Rd Pittsburg CA 94565 |
| Los Medanos College | Brentwood 1351 Pioneer Square Brentwood CA 94513 |
| Public Defender's Office | 800 Ferry Street Martinez CA 94553 |
| Pleasant Hill Library | 2 Monticello Avenue Pleasant Hill CA 94523 |
| San Pablo Library | 13751 San Pablo Avenue San Pablo CA 94806 |
| Antioch Library | 501 W. 18th Street Antioch CA 94509 |

In progress but not in operation (7 Stand Boxes)

| HOST LOCATION | ADDRESS |
|--|--|
| Trinity Center | 1888 Trinity Ave, Walnut Creek, CA 94596 |
| Mental Health Connections House | San Pablo and Concord |
| Delta Landing Shelter | 2101 Vale Road San Pablo, CA 94806 |
| Public Defender Office | Richmond |
| Contra Costa County Probation Dept. - John A. Davis Juvenile Hall | Richmond and Antioch |

Medication Assisted Treatment (MAT) and SUD Treatment in the Jail

Purchase of Sublocade an injectable form of buprenorphine (MAT), this is used with clients who are more likely to respond to Sublocade better and who could divert other forms of buprenorphine inside the jails. In addition, substance abuse counselors work directly with detention health staff who refer clients identified with an OUD. Counselors are currently providing SUD treatment at West County and Martinez Detention facilities. There is a bilingual counselor serving Spanish speaking clients. Currently, the substance abuse counselors screen and implement SUD treatment groups including two groups at MDF for clients with OUD. The counselors also seamlessly place people in SUD treatment post-release with special focus on MAT clients.

Recovery Residences

Behavioral Health has added beds at ELDA House in Pittsburg and A Place to Call Home in Richmond, to support people in recovery of substance use and opioid use disorder, into recovery residences. These peer-run houses, allow individuals who complete residential treatment to live in alcohol and drug free environments. Recovery Residences are allowable use of OSF and they are MAT friendly.

SUD Treatment for Latinos

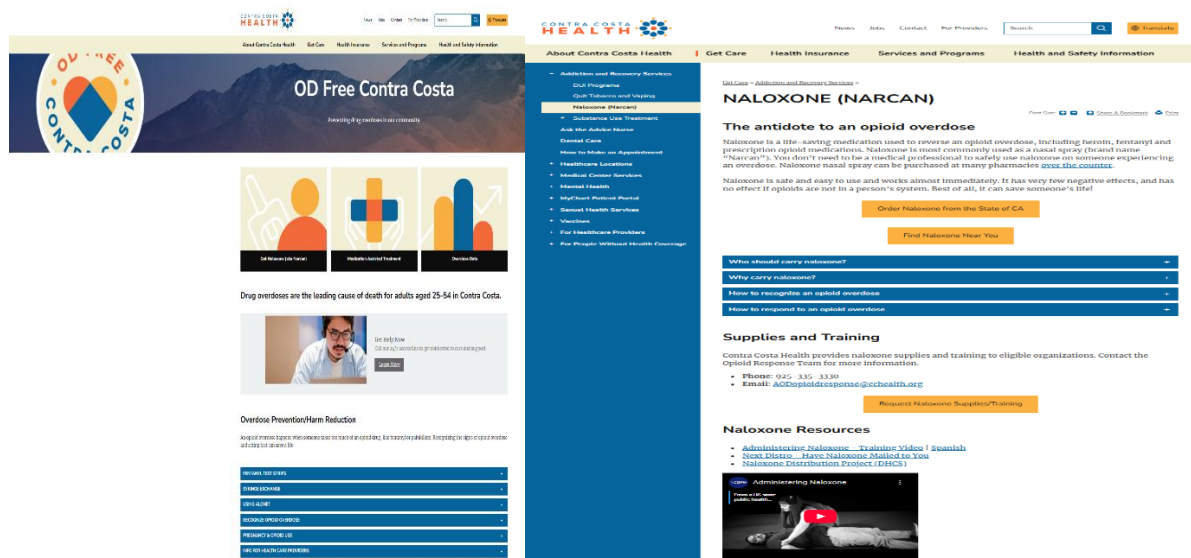
BH recognizes that there are very limited SUD treatment resources for Spanish speakers. Behavioral Health currently operates Nuevo Comienzo at two Family Justice Center locations in Concord and Richmond. The services provided in the jails, allow for Latinos to receive screening and seamless placement in treatment post release at either Pueblos del Sol (residential treatment for men), Nuevo Comienzo (outpatient) and at Wollam where 2 beds are dedicated for Spanish speaking women. In partnership with BiBett, one Recovery Residence is also dedicated to Spanish speaking individuals.

OD-Free Contra Costa Campaign and Branding

In March 2024, CCBHS launched the OD-Free Contra Costa campaign⁶—a countywide public health branding initiative designed to unify and amplify opioid response efforts under a clear, accessible webpage. The OD-Free Contra Costa name and logo now appear across public-facing resources, training materials, harm reduction tools, and outreach campaigns, helping residents recognize services tied to the County's opioid prevention strategy.

The branding strategy was modeled after successful initiatives in other jurisdictions and supports efforts to reduce stigma, increase public awareness, and streamline access to lifesaving services like naloxone distribution, treatment referrals, and overdose education. ORT and partner departments continue to coordinate under the OD-Free Contra Costa identity to present a cohesive and recognizable response to the opioid crisis.

⁶ <https://www.cchealth.org/health-and-safety-information/od-free-contra-costa>



Naloxone Training and County Supply Request Portal for the Public

To expand public access to harm reduction tools CCBHS launched a centralized training and supply request portal, accessible via the *OD Free Contra Costa* landing page.⁷ This portal streamlines the process for individuals, organizations, and community-based providers to request:

- Naloxone (Narcan)
- Fentanyl Test Strips
- Overdose prevention training and presentations

The portal also supports requests for onsite training and community engagement events, helping to reduce stigma, improve emergency preparedness, and build awareness across high-risk settings. By streamlining requests and centralizing fulfillment, CCBHS ensures an equitable and timely distribution of life-saving supplies to community members, service providers, partnered agencies, public institutions, and frontline workers. Although Naloxone is now available as an over the counter medication and is a Medi-Cal covered formulary, making it available free of cost is by far a more effective way of preventing overdoses across vulnerable populations.

Partnerships and Collaboration

Behavioral Health continues to strengthen interdepartmental and cross-sector collaborations including:

- Public Health and the HIV/STI Program
- BH Office of Peer and Family Empowerment

⁷ <https://www.cchealth.org/get-care/addiction-and-recovery-services/naloxone-narcan>

- HEPPAC (HIV Education and Prevention Project of Alameda County)
- MEDS Coalition
- Other AOD coalitions
- Local cities, police departments, community based organizations and our residents

These partnerships are essential in advancing outreach, public education, harm reduction, treatment and recovery service delivery across the county.

VIII. BY THE NUMBERS

Services provided below, have been a partnership between the MEDS Coalition, the Office of Peer and Family Empowerment and ORT.

| Item | Period | |
|--------------------------------|---------|---------|
| | FY23-24 | FY24-25 |
| Naloxone Kits | 4,713 | 1,346 |
| Vending machines/stands | | |
| Fentanyl Strips | 995 | 1,090 |
| Trainings/Presentations/Forums | 81 | 37 |

IX. CHALLENGES

While CCBHS has made significant strides in expanding its harm reduction and outreach efforts, several persistent challenges continue to limit program reach and impact.

1. Outreach Limitations and Workforce Shortages

On April 1, 2025, ORT staff and SSP partners conducted outreach at Central Park where they observed high engagement and a need for consistent presence. During one visit, 15 participants were engaged—primarily adults experiencing homelessness or unstable housing. Due to staffing constraints, SSP and harm reduction efforts face ongoing challenges such as:

- Limited staffing and hours of operation: Current resources constrain the frequency and geographic spread of harm reduction efforts, resulting in gaps across high-need regions such as East and South Contra Costa.
- Stigma and community resistance: Some communities continue to express concerns or misconceptions about harm reduction approaches, such as syringe services and naloxone distribution. These attitudes pose challenges to implementation and acceptance, especially in suburban or politically conservative areas. Lack of safe disposal infrastructure and naloxone access points.

Despite these challenges, harm reduction programming remains a vital entry point for individuals not yet connected to traditional health systems. The County's ongoing investment in SSP and

related efforts reflects its commitment to dignity-centered care, overdose prevention, and the reduction of communicable disease transmission among high-risk populations.

2. Need for Addiction Medicine Physician

As the demand for MAT services grows, the County faces a critical shortage of specialized addiction medicine providers. Despite ongoing and consistent outreach recruitment efforts, Contra Costa has not been successful at identifying a dedicated Addiction Medicine Psychiatrist. This staffing gap creates challenges in ensuring:

- Clinical oversight and expansion of MAT services
- Access to timely evaluation for clients with co-occurring conditions
- Capacity to lead training for frontline and medical providers on addiction treatment best practices.
- Consultation services with other county physicians

Recruitment and onboarding of an Addiction Medicine Physician remains a priority to build internal expertise, reduce treatment bottlenecks, and enhance the continuum of care for individuals with SUD across the County.

3. Bilingual Substance Abuse Counselors

AOD has been successful at recruiting, hiring and retaining several Spanish speaking counselor; however, insufficient to meet the demand for expansion of services. AOD continues to work with local colleges, particularly Diablo Valley College Addiction Studies Program and participates in Job Fairs and speaking engagements, to recruit bilingual students. The number of Spanish speaking students who enter the SUD field is also minimum.

X. RECOMMENDATIONS

ACCEPT this report on Contra Costa Opioid Response as part of the comprehensive prevention program to support ongoing implementation of OSF programs, including prevention, treatment, harm reduction, and recovery services. Continued investment in these efforts will allow the County to maintain momentum, strengthen infrastructure, and respond effectively to evolving community needs.

ACKNOWLEDGE that the delays created in program implementation resulted from slow release of funding, workforce shortages, inability to hire in a timely manner and delays in implementing the required community engagement process.

DIRECT Contra Costa Behavioral Health to continue supporting and monitoring expansion of the County's Opioid Response to the Opioid Crisis

DIRECT Behavioral Health to continue efforts intended to raise community awareness and education in the community

DIRECT Behavioral Health to distribute funds through the Request for Proposals (RFP) process and support projects and activities with equity-driven programming, and measurable community impact.

ACCEPT the Division's recommendation to distribute available OSF as follows: 50% treatment and recovery, 20% harm reduction/intervention, 30% prevention, while maintaining spending requirements of no less than 50% in High Impact Abatement Initiatives.

ACCEPT recommendation to issue additional Request for Proposals to ensure that Exhibit E activities and Core Strategies are implemented in the community

DIRECT Behavioral Health staff to continue to track data to monitor the impact of opioids in the County and continue efforts to prevent overdoses

SUPPORT, efforts intended to promote the County's OD-Free Contra Costa campaign to increase awareness and education in the community

SUPPORT continued efforts to increase SUD and MAT treatment and support SUD treatment provider initiatives intended to remove barriers to treatment