



SLO County

Community Health Improvement Plan 2026 Annual Report

June 2026

Prepared by



About this Annual Report

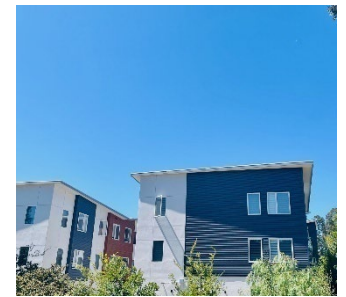
In 2024, SLO Health Counts released its [Community Health Improvement Plan](#) (CHIP). The plan identified three priorities where partners sought to work more closely together – all with the goal of creating environments that make it easier for all of us to live healthier lives.



At its core, the CHIP is grounded in collaboration and a broad understanding of what shapes health. This understanding moves beyond healthcare as the key ingredient to good health and examines other key drivers, such as the role of environment, housing, education, economic opportunity, language and literacy, family supports, transportation, food security, and more.



Like any meaningful collaborative effort, this plan is designed to evolve over time. Priorities shift, partnerships grow, new opportunities emerge, and lessons are learned along the way. In 2025, partners reviewed the plan and made updates to reflect progress and changing community needs. In 2026, the process of reflection, refinement, and shared learning continued.



This report represents the second annual CHIP update. Organized around the plan's three priority areas, it highlights key accomplishments, emerging partnerships, and revisions made to the plan during the past year. Additional detail on each priority area, including specific activities and strategies, can be found in the Appendix.

This report, and the related Community Health Assessment and Community Health Improvement Plan are posted online at slohealthcounts.org. Progress is also posted online at slohealthcounts.org/ourprogress.

See the structure of this work, and the associated work groups and partners involved in the effort, at slohealthcounts.org/who-we-are.

About SLO Health Counts

SLO Health Counts is a collaborative of community members, nonprofits, government agencies, cities, schools, and other leaders in SLO County working together toward the shared goal of a healthy, thriving community. SLO Health Counts builds on a long-standing tradition of community collaboration to advance health and wellness in San Luis Obispo County, including the pioneering efforts of Healthy Eating Active Living (HEAL SLO) and ACTION for Healthy Communities, which first launched this work in the 1990s.



Healthy Neighborhoods

Socially cohesive, vibrant neighborhoods allow people to connect with each other, safely walk and bike, access healthy food and other goods and services, and enjoy parks and open space.

In the 2023 SLO County Community Health Survey, and in the subsequent conversations that formed the basis of this plan, community members and partners [consistently noted](#) insufficient affordable housing as a key health issue for SLO County – affecting everything from household budgets to workforce recruitment. Additionally, they identified access to safe community spaces, like parks, and the bike and pedestrian networks to connect them, as a key issue. Partners noted, for this priority area in particular, a place-based approach was necessary to understand and address the specific and unique needs of certain communities.

Action Team: [Healthy Communities Work Group](#)

Partners: 805 La Voz, Adult Services Policy Council, Caltrans, First 5 SLO County, Food Systems Coalition, Healthy Communities Work Group, Mujeres de Acción, Public Health Department, Safe Routes to School Taskforce, SLO County Parks, SLOCOG, One Community Fund (CFSLOCO), Cal Poly Landscape Architecture, San Miguel Community Friends, and Lucia Mar School District.

Key Accomplishments:

- ✔ Continued convening the [Healthy Communities Work Group](#) as the action team championing this priority area. (See more about how this work [is structured](#).)
- ✔ Gathered and mapped relevant data to take a place-based approach to understanding high-priority communities and their built environment needs (e.g.

complete streets, food access, park access). Selected [4 priority communities](#) for initial planning efforts — San Miguel, Oceano, Nipomo, and Los Osos.

- ✔ Worked with Cal Poly Landscape Architecture students on designs for two priority communities: creating a [multigenerational space in Oceano](#) (Fall 2025) and understanding [pedestrian networks and park space in San Miguel](#) (Spring 2026).
- ✔ Supported San Miguel Community Friends [in scoping out](#) a protected bike/pedestrian lane for Bike & Roll to School Day at Lillian Larsen Elementary (May 2026).
- ✔ Applied and [was awarded](#) two Office of Traffic Safety (OTS) grants totaling \$500K focused on programming around bike and pedestrian safety and child passenger safety. These grants supported bilingual campaigns, Walk and Bike to School Day events and bike/ped safety education for students and families at Oceano, Lillian Larsen, Hawthorne, and Dana Elementary.
- ✔ Connected this work to SLOCOG's 2027 [Regional Transportation Plan \(RTP\)](#) and the ['Road to Zero'](#) Regional Road Safety Action Plan to support long-range transportation and housing planning. Also participated in housing policy discussions with Building a Better SLO and Affordable Housing Task Force.
- ✔ Held cross-sector discussions, building off the [Climate Resilience Study](#) to share current strategies and initiatives and to explore ideas and opportunities for collaboration across sectors.



Landscape Architecture students at Cal Poly measured at Oceano Elementary in Fall 2025 for a project to reimagine the area as multigenerational space for the community.



SLO Health Counts worked with San Miguel Community Friends, SLOCOG and Lillian Larsen Elementary to enact a temporary bike/ped lane for Bike & Roll to School Day.

Revisions:

- Objective 1, Activity 1.5: Added “childcare” to “Assist cities and local governments adopting or enhancing built environment policies (e.g. Complete or Livable Streets Policies, childcare)” to honor considerable work being done by partners through the Uplift regional childcare coalition.

- Objective 1, Activity 1.7: "SLOCOG" was added as a lead agency.
- Objective 2, Activity 2.1: Given recent budget cuts, the activity target was changed from 8 letters of support to 2 letters of support/year.
- Objective 2, Activity 2.2: Activity language was changed from "local housing policy makers" to "local and state housing policy makers".
- Objective 2, Activity 2.3: Given recent budget cuts, the activity target was changed from 8 projects to 2 projects/year.



Access to Care

Meaningful access to care includes infrastructure that allows for healthcare and services to be accessed in a way that is affordable, culturally and linguistically appropriate, and available to all who need it.

In the 2023 SLO County Community Health Survey, community members responded that improving access to health care was the top health issue that must be addressed to improve the quality of life in our community. This topic consistently came up in focus group discussions, stakeholder interviews, and in open-ended survey responses. The CHIP workgroup noted that special attention must be given to key communities and groups who had less access to care, such as lower-income community members and those living in rural areas. In subsequent years, these conversations have taken on added significance, particularly as communities evaluate the potential impacts of H.R. 1 on access to care. Partners noted that bolstering the healthcare workforce was also critical, particularly for our geographically isolated community.

Action Team: [SLO Healthcare Workforce Partnership](#)

Partners: Adult Services Policy Council, Care Coordination Coalition, Center for Family Strengthening's Promotores Collaborative, Public Health Department (PHD), PHD Health Equity Program, SLO County Parks, SLO Healthcare Workforce Partnership, One Community Fund (CFSLOCO)

Key Accomplishments:

- ✔ Continued engaging with [the SLO Healthcare Workforce Partnership](#) as the action team championing this priority area. (See more about how this work [is structured](#).)
- ✔ The Partnership is moving to a regional approach with Santa Barbara County in 2026, so work will evolve and expand to include partners and providers from both regions.
- ✔ Published [data and market assessment](#) of local healthcare positions (number and type of positions needed) from local healthcare providers and the Workforce Development Board (also posted at [slohealthcounts.org](#)).
- ✔ Began Provider Studies to assess the unique challenges of recruiting and retaining physicians (primary, pediatric, and specialty care) and behavioral health providers on the Central Coast, including career pathway development. Completed reports are anticipated Summer 2026.
- ✔ Hosted an October 2024 and November 2025 [SLO County Healthcare Workforce Forum](#) with 75 partners, representing a multitude of healthcare professions.
- ✔ Participated in [an August 2025 Medicare Forum](#) with Congressman Salud Carbajal and Congressman Jimmy Panetta to discuss the value of Medicare programs, the challenges they face, and how to improve healthcare access in our region.
- ✔ Conducted an asset inventory of local healthcare education and training programs and [created an infographic](#) to illustrate occupations, average salaries, and local training available to build the healthcare workforce.
- ✔ Collaborated with Health Career Connection (HCC) on a [Paid Healthcare Internship Program](#) in Summer 2025 and 2026, pairing 25 college students or recent grads with local healthcare employers.
- ✔ Developed [a page on Mixteco culture and language](#) to boost the cultural understanding of providers who serve this growing population. This work is being done in tandem with in-person and virtual trainings for staff and community partners through [Herencia Indígena](#).



Partners come together at a November 2025 SLO Healthcare Workforce Forum.



Participated in an August 2025 Medicare Forum with Congressmen Salud Carbajal and Jimmy Panetta.

Revisions:

- Objective 2, Activity 2.2: Added an improvement target to this activity: “One advocacy meeting/year with the offices of key legislators to influence the development of healthcare workforce initiatives and funding at the local, state, and federal level.”
- Objective 2, Activity 2.3: Added two improvement targets to this activity: “Internships: 25 internships x \$9,000/intern = \$225,000 x 3 years = \$675,000; (70% funded by employers; 30% funded by grants); Partnership Operations: \$100,000/year x 3 years = \$300,000.”
- Objective 3, Activity 3.6: Added new activity, “Support interdisciplinary, non-traditional spaces where care and navigation is being provided (e.g. mental health supports in schools, ParksRx through doctor’s offices) and where additional innovative approaches through trusted messengers can be used to meet local demand.”
- Objective 3, Activity 3.7: Added new activity, “Monitor changes to MediCal eligibility, problem solve collectively, and outreach to partners and community members to share the impacts.”



Mental Health & Substance Use

Thriving and resilient communities include opportunities for people to be supported throughout their lifetimes, with socio-emotional supports that facilitate optimal mental health throughout the life course and accessible treatment for mental health challenges and substance use.

Mental health was ranked the #2 health issue that must be addressed to improve the quality of life in our community, with community members and service providers noting social isolation and persistent sad or hopeless feelings among teens, LGBTQ+ people, new parents, and older adults. In addition, opioid abuse and the proliferation of fentanyl were reported as concerns.

Action Team: [Mental Health & Substance Use action team](#)

Partners: Adult Services Policy Council, Behavioral Health Department (BHD), CenCal Health, Child and Family Wellness Collaborative, Department of Social Services (DSS), Emergency Medical Services Agency (EMSA), First 5 SLO County, Opioid Safety Coalition, Center for Family Strengthening's Parent Connection, Public Health Department (PHD), SLO County Parks, Suicide Prevention Council, Transitions-Mental Health Association (TMHA)

Key Accomplishments:

- ✓ Continued convening the Mental Health & Substance Use health team as the action team championing this priority area. (See more about how this work [is structured](#).)
- ✓ [Published fact sheets](#) on suicide deaths in 2024, 2025, and 2026 to better understand populations most impacted. Analysis included age, sex, mechanism of injury and veteran status in order to better inform future efforts.

- ✔ [Published fact sheets](#) on drug-related deaths in 2024, 2025, and 2026 that provides analysis on age, sex, region and drugs involved in drug-related deaths in order to better inform future efforts.

- ✔ Worked with CenCal Health, BHD, and PHD on joint campaign for September's Suicide Prevention Month. Efforts included a CenCal provider email about importance of teen depression screenings (and the recommended screening tool and billing codes to use). The organizations also collaborated on a joint social media campaign showcasing hotlines and apps to support youth mental health.



Providers come together to align efforts and share resources at Behavioral Health Provider's Collaborative.

- ✔ Implemented new EMS Opioid Withdrawal protocol (as of January 2026) which allows paramedics to administer buprenorphine in the field when responding to an overdose-related call. Medications like buprenorphine, also known as Suboxone, can help people manage their cravings, so patients can access care. All SLO County paramedics have been trained.
- ✔ Worked with Cal Poly researchers to understand barriers around use of nicotine replacement therapy (NRT) (for tobacco) and [launched campaign](#) in Fall 2025 with healthcare providers, including provider coaching and new patient-facing educational materials. The percentage receiving a prescription for NRT increased from 12% to 24% after the campaign's launch.
- ✔ Held "Fentanyl High" film screening for high school students and parents in November 2025. The film follows several high school students from Santa Clara County as they share their experiences with Fentanyl poisoning. The film is [now available](#) to watch at home.
- ✔ Held [a pediatric town hall](#) (April 2026) where First 5 SLO County and Help Me Grow SLO County, alongside partners Adventist Health, Community Health Centers of Central Coast (CHC), CenCal Health, SLO Medical Education and Research Foundation (SLOMERF), and the County of SLO, brought together the pediatric, medical and nonprofit sectors. The event included keynote speakers and discussed the intricacies of connecting care from pregnancy through early childhood.
- ✔ Analyzed teen CenCal Health Patient Screening Data, emergency department visit data and the California Healthy Kids Survey (CHKS) in partnership with the local Medi-Cal Managed Care Plan, CenCal Health, to identify subpopulations most in need of focus. Data was stratified by race, age, region, gender, sexual orientation, and language. [Findings indicate](#) no single population group is disproportionately impacted.

- ✔ Began discussions to understand the transition from the Mental Health Services Act (MHSA) to the Behavioral Health Services Act (BHSA) funding in the behavioral health space, as well as beginning discussions to understand current school wellness programs, new state funding mechanisms (like CA Youth Behavioral Health Initiative (CYBHI) at school sites, and key challenges.

Revisions:

- Objective 1, Activity 1.1: Added “immigration status” to “Conduct analysis to identify the sub-populations in most need of focus, including stratification by race, age, region, sex, gender identity, sexual orientation, language, immigration status, and homeless status.” Analysis will be conducted where feasible.
- Objective 1, Activity 1.5: Given that several information and referral websites exist, the activity language was changed from “Assess and expand the availability of information and referral websites/access lines to make navigation of existing mental health services easier for the public” to “Maintain information and referral websites/access lines to make navigation of existing mental health services easier for the public.”
- Objective 1, Activity 1.6: Activity language was changed from “Expand and build upon parent education & support for parents of children of any age” to “Prioritize and communicate about parent education & support for parents of children of any age, and explore opportunities to fund consistent, accessible local parent education.”
- Objective 1, Activity 1.7: Activity language was changed to remove “Expand and” and now is “Strengthen the Services Affirming Family Empowerment (SAFE) system to ensure access and an active system presence in all key geographic regions of the County and for children of any age.”
- Objective 2, Activity 2.1: Added “immigration status” to “Conduct analysis to identify sub-populations in most need of focus, including stratification by race, age, region, sex, gender identity, sexual orientation, language, immigration status, and homeless status.”
- Objective 3, Activity 3.2: Given the now [finalized Master Plan on Aging](#), activity language has been adjusted to better align with Pillar 4: Emotional Well-Being and Social Connectivity. The activity has changed from “Collaborate with Local Aging and Disability Action Plan workgroup to conduct assessment on older adult programming availability across the county” to “Collaborate with Adult Services Policy Council ASPC/SLO Master Plan on Aging (SLOMPA) to inventory, publish and distribute a resource directory of existing programming for older adults (4.1, 4.2.a.)”
- Objective 3, Activity 3.3: Given the now [finalized Master Plan on Aging](#), activity language has been adjusted to better align with Pillar 4: Emotional Well-Being and Social Connectivity. The activity has changed from “Use analysis to inform initiatives

such as the creation of communication toolkits, provider education on the importance of screening older adults, or programming to reduce isolation” to “Develop communication toolkits, provider education on the importance of screening older adults, or programming to reduce isolation, in alignment with MPA strategies (4.1.b., 4.2.b.).”

- Objective 3, Activity 3.4: Activity language was changed from “Establish a task force” to “Convene with partners to discuss the behavioral health needs specific to aging and older adults (60+ years old); conduct a gap analysis to discern adaptation of community services and supports for this growing county population.”

Appendix



Healthy Neighborhoods (detail)

Healthy Neighborhoods

Goal: Promote healthy, connected communities.

Collaboration partners

Public Health Department (PHD), SLOCOG (1.1, 1.3-1.7), Healthy Communities Work Group (1.1), SLO County Parks (1.1, 1.3, 1.6), Food Systems Coalition (1.2, 1.4), Caltrans (1.3), First 5 SLO County (1.4), One Community Fund (CFSLOCO) (1.4), Adult Services Policy Council (1.4), 805 La Voz (1.4), Mujeres de Acción (1.4), Safe Routes to School Taskforce (1.7). *To lend your support to this effort, visit www.slohealthcounts.org/priorities.*

	Performance Measures	Lead	Data Source	Data Baseline	Improvement Target	Reporting Frequency	Progress & Edits
Objective 1: Increase investment in healthy, connected communities through bike and pedestrian improvements, enhanced food access, and free, safe community spaces.	# grants supported	SLOCOG, Healthy Communities Work Group, PHD	Tracking sheet	0	5 grants supported (2028)	Annual	See notes on activities below.
1.1 Using a place-based approach, conduct a needs assessment to understand high-priority communities and their built environment needs (e.g. complete streets, food access, park access).	Assessment	SLOCOG, Healthy Communities Work Group, SLO County Parks, PHD	---	0	1 assessment (2024)	Annual	The team <u>gathered and mapped relevant data</u> , then discussed findings at meetings in Feb and Mar 2025. The priority communities chosen for initial focus are San Miguel, Oceano, Nipomo, and Los Osos.
1.2 Assess current food environments and map out food retailers/service providers, poverty status, ethnicity, and unhealthy food density.	Assessment and map	PHD, Food Systems Coalition	---	0	1 assessment and map (2024)	Annual	The team has begun mapping farmers markets, grocery stores, convenience stores, and food bank distribution sites. In the coming year, the team will consider adding community and school gardens, food pantries (at Cal Poly, Cuesta), and also

							incorporate Hunger-Free Communities research from Cal Poly STRIDE and SLO Food Bank on food security.
1.3 Assess environments for physical activity and map opportunities (e.g. parks, sidewalks, bike paths) in priority cities and communities.	Assessment and map	SLOCOG, Caltrans, SLO County Parks, PHD	---	0	1 assessment and map (2025)	Annual	The team is connecting this work to SLOCOG's 2027 Regional Transportation Plan (RTP) and the 'Road to Zero' Regional Road Safety Action Plan. 9 safety walk audits were conducted with regional partners (CHP, Public Health, Public Works, Community Schools, Advisory Councils, Kittelson & Associates) in Feb 2025. Mapping of sidewalks, parks, and bike paths are underway.
1.4 Identify existing community assets, like schools, nonprofits and coalitions, and work with them to understand their feasibility as multigenerational, multicultural, and multilingual centers of complete communities (e.g. community resource centers, climate resilience center, community schools).	Outreach / formal or informal agreements	First 5, One Community Fund (CFSLOCO), 805 La Voz, Mujeres de Acción	---	0 agreements, 0 presentations (2023)	3 agreements + 5 presentations (2028)	Annual	The team connected with Community Schools Coordinators, County Parks, and County of SLO Libraries to understand their role as community assets. The team also worked with Cal Poly Landscape Architecture students and Lucia Mar School District on how Oceano Elementary could provide a multigenerational hub for community members of all ages around its newly installed track (Fall 2025).
1.5 Assist cities and local governments adopting or enhancing built environment policies (e.g. Complete or Livable	# formalized policies	Healthy Communities Work Group, PHD	Personal correspondence	0	3 formalized policies (2028)	Annual	The team will plan to leverage parent engagement strategies at Community Schools (e.g. Parent Connection) where possible. They will also work to include

Streets Policies, childcare).						<p>these elements during the General Plan updates for cities and within <u>SLOCOG's 'Regional' section</u> of the Housing Element Update.</p> <p><i>The activity language was changed to add "childcare" to honor considerable work being done by partners through the Uplift Regionwide Childcare Coalition.</i></p>
1.6 Share opportunities for and provide technical assistance to grants for parks and free community spaces for those with limited options.	# grants supported	Healthy Communities Work Group, SLO County Parks, PHD	Tracking sheet	0	5 grants supported (2028)	<p>Annual</p> <p>Healthy neighborhoods is now added as a priority under the County of SLO's <u>Preventative Health Grant</u>.</p> <p>In Fall 2025, the team worked with Cal Poly Landscape Architecture 405 students on the connection between health and the built environment, and the <u>opportunities for community spaces</u> around the newly installed track at Oceano Elementary. In Spring 2026, the group also worked with Cal Poly Landscape Architecture 403 students on a similar project centered on <u>pedestrian networks and park space in San Miguel</u>.</p> <p>Team also worked with Los Osos Community Services District on the health impact and potential of the <u>proposed Sunnyside School project</u>.</p> <p>Health team is also actively participating in the current</p>

							SLO County Parks and Recreation Master Planning process.
1.7 Share opportunities for and provide technical assistance to grants for bike and pedestrian infrastructure or programming in high-priority communities, including Safe Routes to School (SRTS).	# grants supported	Healthy Communities Work Group, SLOCOG, Safe Routes to School Taskforce, PHD	Safe Routes to School <u>Prioritization tool</u>	0	5 grants supported (2028)	Annual	<p>Healthy Neighborhoods is now added as a priority under the County of SLO's <u>Preventative Health Grant</u>.</p> <p>The team also supported several grants. PHD applied and was awarded two Office of Traffic Safety (OTS) grants totaling \$500K focused on programming around bike and pedestrian safety and child passenger safety. These grants supported bilingual campaigns, Walk and Bike to School Day events and bike/ped safety education for students and families at Oceano, Lillian Larsen, Hawthorne, and Dana Elementary.</p> <p>In addition, the team applied for and was selected as a host site for 900 hours of in-kind support from Cal Poly College Corps Fellows. Fellows provide peer-to-peer outreach and education, acting as trusted bike and pedestrian safety champions to both elementary students and the campus community.</p> <p>The team also supported San Miguel Community Friends in <u>scoping out</u> (and receiving a grant for) a protected bike/pedestrian lane pop-up demonstration for Bike & Roll</p>

							<p>to School Day at Lillian Larsen Elementary (May 2026).</p> <p><i>The activity language was updated to add "SLOCOG" as a lead agency.</i></p>
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Healthy Neighborhoods

Goal: Improve access to affordable, attainable, safe and supportive housing.

Collaboration partners

Healthy Communities Work Group, Public Health Department (PHD). *To lend your support to this effort, visit www.slohealthcounts.org/priorities.*

	Performance Measures	Lead	Data Source	Data Baseline	Improvement Target	Reporting Frequency	Progress & Edits
<p>Objective 2: Support the development of very low income, low income, and moderate housing units throughout SLO County, with a goal of staying on track annually with regional housing targets (RHNA).</p>	<p>% of housing units permitted annually in SLO County by RHNA income category</p>	<p>Healthy Communities Work Group</p>	<p>CA Regional Housing Needs Allocation (RHNA)</p> <p>For 6th Cycle, ending 12/31/28</p> <p>HCD; SLOCOG</p>	<p>% Attained: V Low 6% Low 22% Mod 24% A Mod 33%</p> <p>(2023) Year 3 of 8</p>	<p>% Attained: V Low 100% Low 100% Mod 100% A Mod 100%</p> <p>(2028)</p>	<p>Annual</p>	<p>% Attained: V Low 18% Low 61% Mod 52% A Mod 101%</p> <p>(2024) Year 4 of 8</p> <p>2025 data will be available at the end of the fiscal year (June 30).</p>
<p>2.1 Submit comment letters when new housing developments come before government bodies (planning commissions, city council meetings etc.)</p>	<p># of letters submitted</p>	<p>Healthy Communities Work Group</p>	<p>Tracking sheet</p>	<p>6 letters of support (2022)</p>	<p>8 letters of support each year (2028)</p>	<p>Annual</p>	<p>The team submitted 10 comment letters in 2024 to support health in planning decisions. In 2025, the team submitted 1 comment letter. So far, in the first 6 months of 2026, the team has submitted 1 comment letter.</p> <p><i>Given recent budget cuts, the activity target was changed from 8 letters of support to 2 letters of support/year. Will reserve for larger projects early on.</i></p>

<p>2.2 Develop an inventory of housing stability and health best practices and policies to build on the work of local and state housing policy makers.</p>	<p>inventory</p>	<p>Healthy Communities Work Group</p>	<p>---</p>	<p>0</p>	<p>1 inventory of housing best practices</p>	<p>Annual</p>	<p><i>Activity language was changed from "local housing policy makers" to "local and state housing policy makers".</i></p> <p>In the coming year, the team will work to incorporate a resource page on slohealthcounts.org with best practices and tools for easy use by planners/developers.</p>
<p>2.3 Utilize the Healthy Communities Project Checklist for assessing housing-related development projects from a healthy community's perspective.</p>	<p># of project reviews</p>	<p>Healthy Communities Work Group</p>	<p>Workgroup records</p>	<p>6 projects reviewed with project checklist (2022)</p>	<p>8 projects reviewed with project checklist each year (2028)</p>	<p>Annual</p>	<p><i>Given recent budget cuts, the activity target was changed from 8 projects to 2 projects/year. Will reserve for larger projects early on.</i></p>
<p>2.4 Participate in partnership and policy conversations around housing (e.g. REACH housing advisory group, Home Builders Association of the Central Coast, SLOCOG Regional Transportation Plan (RTP) process)</p>	<p>Participation records</p>	<p>PHD</p>	<p>Participation records</p>	<p>0</p>	<p>3 new meetings each year</p>	<p>Annual</p>	<p>The team hosted a webinar and housing discussion on Missing Middle Housing 101 with Opticos Design to investigate varied housing types and potential for SLO County affordability.</p> <p>In 2025, the team began participating in 2027 SLOCOG RTP process. They also participated in housing policy discussions with Building a Better SLO and Affordable Housing Task Force.</p> <p>The team will look into additional speakers and opportunities for</p>

							policy discussions, including Building a Better SLO, Housing Summit orgs, and SLO Tenants Union.
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Healthy Neighborhoods

Goal: Ensure climate resilient communities.

Collaboration partners

Public Health Department (PHD). *To lend your support to this effort, visit www.slohealthcounts.org/priorities.*

	Performance Measures	Lead	Data Source	Data Baseline	Improvement Target	Reporting Frequency	Progress & Edits
Objective 3: Increase community resilience by understanding, and preparing for, the impacts of climate change.	Assessment	PHD	---	0	1 assessment (2025)	Once	See notes on activities below.
3.1 Conduct needs assessment to identify most pressing needs in SLO County around climate change.	Assessment	PHD	---	0	1 assessment (2025)	Once	The team has completed the initial assessment. Full report can be found at slohealthcounts.org/reports .
3.2 Increase investment in community resilience of those most disproportionately impacted by climate change through implementing strategies prioritized by community stakeholders.	Strategy implemented	PHD	---	0	1 strategy (2028)	Once	The team has begun discussions to understand top priorities and feasibility of implementing them in SLO County. Discussions were held between partners on Nov 2024 and Dec 2025, facilitated by HCWG and the PHD Health Equity team. Several more discussions were hosted in Spring 2026 to examine potential leads and projects in SLO County for the Extreme Heat and Community Resilience Grant and Community Resilience Centers Grant.



Access to Care (detail)

Access to Care

Goal: Recruit and retain providers in the Central Coast.

Collaboration partners

SLO Healthcare Workforce Partnership, Center for Family Strengthening's Promotores Collaborative (1.2). *To lend your support to this effort, visit www.slohealthcounts.org/priorities.*

	Performance Measures	Lead	Data Source	Data Baseline	Improvement Target	Reporting Frequency	Progress & Edits
Objective 1: Develop local pipeline(s) & training programs for Physical, Behavioral, and Oral Health.	workforce projections	SLO Healthcare Workforce Partnership	SLO Workforce Development Board	Current Employment: (2022) CNA 634 LVN 496 RN 1,820	Additional Workforce Needed: (2027) CNA +480 LVN +204 RN +533	Annual	See notes on activities below.
1.1 Gather current data from businesses and conduct a market assessment of local healthcare positions (number and type of positions needed).	assessment	SLO Healthcare Workforce Partnership	---	0	1 assessment (2024)	Annual	<p>The team published data and market assessment from Labor Market Information (LMI) obtained from the Workforce Development Board with 5- and 10-year projections for demand for the most significant occupations in physical, behavioral, oral health. The data is also available at slohealthcounts.org/access-barriers-to-care.</p> <p>A local Healthcare Employer Survey was administered to collect data on recruitment and retention challenges, successful strategies, and critical occupational needs (Spring 2024).</p> <p>Provider Studies to assess the unique challenges of recruiting and retaining physicians (primary,</p>

							<p>pediatric, and specialty care) and behavioral health providers on the Central Coast, including career pathway development, is in process and anticipated July 2026. Partnership is moving to a regional approach with SB County, so studies will include both regions.</p> <p>The team identified and ranked the Top 9 Critical Occupational Needs on the Central Coast. Focus will initially be on Nursing, Marriage & Family Therapists, Paramedics, Psych Techs, Medical Assistants, and Dental Assistants.</p> <p>This information was shared at the SLO Healthcare Workforce Forums and available on slohealthcareworkforce.org/research.</p>
1.2 Identify educational/training/professional development opportunities to build the capacity of all levels of healthcare staff, including community support (CHW/P) and Enhanced Care Management roles.	list	Promotores Collaborative, SLO Healthcare Workforce Partnership	---	0	1 list (2024)	Annual	<p>The team conducted an asset inventory of local healthcare education and training programs.</p> <p>They also created a career pathway map to illustrate occupations, average salaries, and local training available.</p>
1.3 Partner with Cal Poly, Cuesta, Allan Hancock, A. T. Still University, local residency programs, and/or other educational organizations to expand existing, and build new pathways, for career development.	# of new educational opportunities/program slots	SLO Healthcare Workforce Partnership, local educational institutions and residency programs	---	TBD	TBD	Annual	<p>Cal Poly, Cuesta, A.T. Still University, and SLO Partners are actively engaged. The team has also extended an invite to Allan Hancock.</p> <p>Partners jointly hosted two SLO Healthcare Workforce Forums (Oct 2024, Nov 2025) to bring more partners to the table and discuss key issues.</p>

							<p>The team worked with Health Career Connection on a successful pilot to bring paid full-time 10-week internships to 25 college students and recent grads in Summer 2025. Group is currently <u>in the process</u> of bringing a 2nd cohort of students to the area in Summer 2026 (an additional 25 students).</p> <p>The team has been able to support future development of Marriage and Family Therapists, with (4) 50-week paid clinical internships for Cal Poly MFT student clinicians (ideally, bilingual) at TMHA.</p> <p>SLO County could also benefit from several new funding sources, including BH Connect, new HCAI funding for loan repayment, Medi-Cal BH Scholarship Program, Medi-Cal BH Recruitment and Retention Program, and Medi-Cal BH Community-Based Provider Training. The team will investigate and promote these sources in the year ahead.</p> <p>The team hosted an Oct 2024 Career Exploration Fair with 21 healthcare, education and workforce development partners. Several more are planned in 2026.</p>
Objective 2: Retain local healthcare workforce and identify funding/investment opportunities.	# of new funding sources	SLO Healthcare Workforce Partnership	tracking sheet	0	4 new funding sources identified (2028)	Annual	See notes on activities below.

<p>2.1 Design and implement a survey to health-related employers/employees to identify challenges to retention (permanent vs. contracted positions).</p>	<p>survey</p>	<p>SLO Healthcare Workforce Partnership</p>	<p>---</p>	<p>0</p>	<p>1 survey (2024)</p>	<p>Annual</p>	<p>A Healthcare Employer Survey (Spring 2024) identified recruitment and retention challenges, successful strategies, and metrics used to evaluate success. New provider studies underway to more deeply assess the unique challenges of recruiting and retaining physicians (primary, pediatric, and specialty care) and behavioral health providers on the Central Coast, including career pathway development. Results anticipated June 2026. Partnership is moving to a regional approach with SB County, so studies will include both regions.</p> <p>The survey identified 4 top recruitment challenges: high cost of living/housing, lack of local training opportunities, lack of diversity in the applicant pool, and lack of adequate salaries/benefits.</p>
<p>2.2 Advocate for an increase in SLO County's Medicare reimbursement rates.</p>	<p># of advocacy meetings with decision makers/legislators</p>	<p>SLO Healthcare Workforce Partnership, partnership member organizations, local elected leaders</p>	<p>---</p>	<p>0</p>	<p>1 advocacy meeting/year with the offices of key legislators to influence the development of healthcare workforce initiatives and funding at the local, state, and federal level</p>	<p>Annual</p>	<p>The team has begun discussions to understand local, state and federal calculations that determine Medicare and Medi-Cal reimbursement rates. Also working to understand current Medical Service Shortage Areas (MSSA)/HPSA designation calculations that suggest there are no primary care or behavioral health shortage areas in SLO County. Current designation affects scholarship/loan repayment options for local healthcare professionals and healthcare workforce development grant eligibility.</p>

						<p>The team met with CenCal Health and learned how they calculate rates and often pay higher-than-mandated rates to their providers.</p> <p>The team participated in an <u>August 2025 Medicare Forum</u> with Congressman Salud Carbajal and Congressman Jimmy Panetta to discuss the value of Medicare programs, the challenges they face, and how to improve healthcare access in our region. Team also met with Addis's office in Nov 2025 and Jan 2026.</p> <p>They are now working to develop supporting materials (e.g. talking points, infographics) to communicate the issue to policymakers.</p> <p><i>In 2026, the team added an improvement target to this activity: "One advocacy meeting/year with the offices of key legislators to influence the development of healthcare workforce initiatives and funding at the local, state, and federal level."</i></p>
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<p>2.3 Research and find funding sources to support local healthcare workforce development activities.</p>	<p># of funding sources identified</p>	<p>SLO Healthcare Workforce Partnership</p>	<p>---</p>	<p>0</p>	<p>Internships: 25 internships x \$9,000/intern = \$225,000 x 3 years = \$675,000 (70% funded by employers; 30% funded by grants)</p> <p>Partnership Operations: \$100,000/year x 3 years = \$300,000</p>	<p>Annual</p>	<p>The team researched potential funding sources to support local healthcare workforce development activities for SLO County. A searchable database on funding opportunities has also been added to the Partnership website at slohealthcareworkforce.org.</p> <p><i>In 2026, the team added two improvement targets to this activity: Internships: 25 internships x \$9,000/intern = \$225,000 x 3 years = \$675,000; (70% funded by employers; 30% funded by grants) Partnership Operations: \$100,000/year x 3 years = \$300,000</i></p> <p>The team received several grants in support of the Partnership operations and healthcare workforce internships: CenCal Health Grant for \$213,500; UPLIFT award for \$66,000 for 6 to 7 internships for Summer 2026; Health Career Connections (HCC)/ California Endowment grant for \$300,000/year for 3 years.</p>
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Access to Care

Goal: Expand services in remote areas and to hard-to-reach populations.

Collaboration partners

Public Health Department (PHD), PHD Health Equity Program (1.4), SLO County Parks (1.4, 1.5), Care Coordination Coalition (1.5), UndocuSupport (1.5), Adult Services Policy Council (1.5). *To lend your support to this effort, visit www.slohealthcounts.org/priorities.*

	Performance Measures	Lead	Data Source	Data Baseline	Improvement Target	Reporting Frequency	Progress & Edits
Objective 3: Increase healthcare visits performed in remote areas of the county by 20% (e.g. through mobile or pop-up clinics, resource fairs).	# visits	PHD	Tracking sheet	TBD	TBD	Annual	See notes on activities below.
3.1 Create list of current organizations that use mobile and pop-up clinics, and the locations, frequencies and services provided.	list/map	PHD	Tracking sheet	0	1 list/map (2024)	Annual	<p>Schedules are currently being amplified on communication channels (e.g. PH Digest, social media) for SLO Noor's primary care mobile clinic and CAPSLO's The Center reproductive health mobile clinic. Details on mobile clinics have also been added to NavSLO and SLO Health Access, under a Mobile Clinics category. Discussions underway to include on other sites (VivaSLO).</p> <p>Both organizations are currently testing locations and clinic times, so sites and times are subject to change. Clinics have established MOUs with County of SLO Public Libraries and offer locations across the county.</p> <p>Discussions are underway to determine how best to coordinate array of mobile</p>

							<p>services offered and if there are opportunities to co-locate or convene in high-need areas.</p> <p>Committee would like to support BHSA bringing Mobile Medicated Assisted Treatment (MAT) for Substance Use Disorder (SUD) services online through their Mobile Crisis and Community Action Team (CAT) teams. Members also noted they'd like to utilize 805 La Voz and 'En Confianza con Laura' radio program on La Mexicana/ Radio Lazer to reach Spanish-Speaking community.</p>
<p>3.2 Based on identified gaps, research the locations, staffing and services needed in expanded mobile operations.</p>	assessment	PHD	---	0	1 assessment (2024)	Annual	<p>Given feedback received at some of their sites (particularly the Nipomo riverbed), CAPSLO's The Center reproductive health mobile clinic has established partnerships with other mobile services, including veterinary care, dental care, showers, and has become an authorized provider for SLO Food Bank distribution. In addition, members noted 805 Street Outreach has added Morro Bay as a location and Shower the People has added laundry service.</p> <p>Further work will be done to identify locations best suited for mobile operations.</p> <p>Additionally, the group received some feedback from homeless providers about the continuing</p>

							need for street outreach (wound care) for their clients.
3.3 Investigate partnerships, funding opportunities and alternative staffing (e.g. community health workers, promotores) approaches to meet the demand.	# available staff	PHD	---	TBD	TBD	Annual	<p>SLO Noor works with Promotores Collaborative's community health workers (CHW) to do outreach prior to mobile clinic events, as needed.</p> <p>The Promotores Collaborative has started billing for Community Health Worker/Promotores through the new CalAIM initiative. In addition, state funding will be coming to do CHW certification training (digital fluency program, behavioral health program), so there may be more opportunities to boost this workforce coming soon.</p> <p>In the year ahead, members would like to investigate HCAI funding stream for CHWs.</p>
3.4 Create training suite that helps inform providers on the cultural and linguistic needs of their target population.	training	PHD Health Equity Program	---	0	1 training suite (2026)	Annual	<p>Public Health offered Herencia Indigena Mixtec Cultural Awareness trainings to external partners. In 2026, 1 virtual training was held in May 2026 (31 attendees). In 2025, 2 virtual trainings were convened (May, Oct 2025) with 57 attendees. In 2024, 3 trainings were convened, with 124 attendees.</p> <p>Team developed a page on Mixteco culture and language to assist providers with serving this growing population. Page can be found at slocounty.gov/mixteco.</p>

							<p>Discussions are underway for more trainings, with the possibility of adding Herencia Indigena or MICOP Mixtec Cultural Awareness trainings to existing community meetings.</p> <p>Members will also look into additional offerings (e.g. BH Cultural Competency trainings, SLO Health Access recordings, Corazon Latino, GALA Pride and Diversity Center), perhaps hosting on a page like the BH evergreen video training suite webpage.</p>
3.5 Create and utilize a system of closed-loop referrals for other needed supports and programs (e.g. housing, mental health, transportation) that is culturally, linguistically, and generationally appropriate.	# agencies participating in referral system	PHD	---	10 agencies (2023)	20 agencies (2028)	Annual	No progress to report.
3.6 Support interdisciplinary, non-traditional spaces where care and navigation is being provided (e.g. mental health supports in schools, ParksRx through doctor's offices) and where additional innovative approaches through trusted messengers can be used to meet local demand.	# agencies supported	PHD	---	0 agencies (2025)	5 agencies (2028)	Annual	<i>In 2026, the team added new activity: "3.6 Support interdisciplinary, non-traditional spaces where care and navigation is being provided (e.g. mental health supports in schools, ParksRx through doctor's offices) and where additional innovative approaches through trusted messengers can be used to meet local demand."</i>

<p>3.7 Monitor changes to Medi-Cal eligibility, problem solve collectively, and outreach to partners and community members to share the impacts.</p>	<p># campaigns launched</p>	<p>PHD</p>	<p>---</p>	<p>0 campaigns (2025)</p>	<p>4 campaigns (2028)</p>	<p>Annual</p>	<p>Team noted major changes coming due to H.R. 1, starting July 2026, which will impact access to care.</p> <p><i>Because of this, in 2026, the team added new activity: "3.7 Monitor changes to Medi-Cal eligibility, problem solve collectively, and outreach to partners and community members to share the impacts."</i></p>
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Mental Health & Substance Use (detail)

Mental Health and Substance Use

Goal: Improve social and emotional supports over the life course.

Collaboration partners

CenCal Health, Public Health Department (PHD), Behavioral Health Department (BHD), First 5 SLO County, Center for Family Strengthening's Parent Connection (1.2, 1.6), Child and Family Wellness Collaborative (1.2, 1.6), Pregnancy and Parenting Support (1.2), Transitions-Mental Health Association (TMHA) (1.5, 1.6, 2.4), Suicide Prevention Council (3.1, 3.3), Adult Services Policy Council (3.2, 3.3), PHD Healthy Aging Services (3.2), Department of Social Services (DSS) (3.2, 3.3), SLO County Parks (3.2), Opioid Safety Coalition (4.2, 4.3, 4.4), EMSA (4.3). *To lend your support to this effort, visit www.slohealthcounts.org/priorities.*

	Performance Measures	Lead	Data Source	Data Baseline	Improvement Target	Reporting Frequency	Progress & Edits
Objective 1: Increase percent of parents who are screened and connected to mental health supports.	CenCal postpartum depression screening %	CenCal, BHD, PHD	Healthcare Effectiveness Data and Information Set (HEDIS®)	41% (2023)	62% (2025)	Annual	CenCal data in 2024 showed postpartum depression screening increased to 54%. 2025 data is still being compiled.
1.1 Conduct analysis to identify the sub-populations in most need of focus, including stratification by race, age, region, sex, gender identity, sexual orientation, language, immigration status, and homeless status.	comprehensive report	CenCal, PHD	---	0	1 report	Annual	The team gathered data from CenCal Health Patient Screenings, and discussions are underway to understand if data indicates any higher need populations. <i>The activity language was changed to add "immigration status".</i>
1.2 Conduct gap analysis of parenting resources by region and socioeconomic status.	gap analysis	First 5, Parent Connection, Child and Family Wellness Collaborative	---	0	1 analysis	Annual	Discussions are underway (Parent Connection, First 5, Child & Family Wellness Collaborative, Pregnancy and Parenting Support) to understand current parent resources available.

							<p>Adventist Health and Parent Connection are currently evaluating their parent offerings (as of Spring 2026).</p> <p>MHSA → BHSa changes continue to impact this work. For many of these activities, there may be a need to maximize Medi-Cal revenue and other new funding models to fund prevention work. BHSa prevention grant funds through CDPH is anticipated in Summer 2026. Guidance is forthcoming.</p>
<p>1.3 Use analysis to inform initiatives such as expanding access to community-based training and information on preventive mental health strategies and resources for families, community members, and providers.</p>	<p>completed initiatives</p>	<p>CenCal, BHD, PHD</p>	<p>---</p>	<p>0</p>	<p>TBD</p>	<p>Annual</p>	<p>The team received input that a multi-pronged approach is needed from every provider that serves the 0-5 age range (doulas, pediatricians, etc.).</p> <p>To meet this need, First 5 SLO County and Help Me Grow SLO County, alongside partners Adventist Health, CHC, CenCal Health, San Luis Obispo Medical Education and Research Foundation (SLOMERF), and the County of SLO, brought together the pediatric, medical and nonprofit communities at a <u>pediatric town hall</u>. The event included keynote speakers and discussed the intricacies of connecting care from pregnancy through early childhood.</p>
<p>1.4 Adopt postpartum toolkit with mental health resources and other supports for new parents.</p>	<p>adopted toolkit</p>	<p>CenCal, PHD</p>	<p>---</p>	<p>0</p>	<p>1 toolkit</p>	<p>Annual</p>	<p>The First 5 SLO County postpartum toolkit has been re-instated after a multiple year pause. The team will look to support and add resources to</p>

							this packet to continue supporting new parents.
1.5 Maintain information and referral websites/access lines to make navigation of existing mental health services easier for the public.	review of referral websites available	TMHA, BHD	---	0	1 review	Annual	Given that several information and referral websites exist, <i>the activity language was changed from "Assess and expand the availability of information and referral websites/access lines to make navigation of existing mental health services easier for the public" to "Maintain information and referral websites/access lines to make navigation of existing mental health services easier for the public."</i>
1.6 Prioritize and communicate about parent education and support for parents of children of any age, and explore opportunities to fund consistent, accessible local parent education.	development or funding of expanded programming	Parent Connection, Child and Family Wellness Collaborative, TMHA	---	0	TBD	Annual	<i>The activity language was changed from "Expand and build upon parent education & support for parents of children of any age" to "Prioritize and communicate about parent education and support for parents of children of any age, and explore opportunities to fund consistent, accessible local parent education."</i> The team noted that Children and Youth Behavioral Health Initiative (CYBHI) expansion could help support this work but leaves non-school aged children (0-5 years) without support. The team will review new CDPH BHSa prevention grants to see if this new source can meet that need.
1.7 Strengthen the Services Affirming Family Empowerment (SAFE)	program assessment	BHD	---	0	1 assessment	Annual	<i>The activity language was changed to remove "Expand and" and now is "Strengthen the</i>

<p>program¹ to ensure access and an active system presence in all key geographic regions of the County and for children of any age.</p>							<p><i>Services Affirming Family Empowerment (SAFE) system to ensure access and an active system presence in all key geographic regions of the County and for children of any age."</i></p> <p>The team (Behavioral Health partners) has been actively expanding partnerships with probation departments, social services, and the County Office of Education to maintain SAFE program coordination.</p> <p>SAFE activities were funded in the FY 25-27 Preventative Health Grant.</p>
<p>1.8 Monitor changes to federal, state and local funding; hold meetings to share impacts and problem solve collectively.</p>	<p>meeting log</p>	<p>CenCal, BHD, PHD</p>	<p>---</p>	<p>0</p>	<p>4 meetings held (2026)</p>	<p>Annual</p>	<p>The team is monitoring potential BHSA funding through CDPH, anticipated Summer 2026, and shared with partners at the MH & SU meeting in April 2026.</p> <p>Mental Health & Substance Use has also now been added as a priority under the County of SLO's Preventative Health Grant.</p>
<p>Objective 2: Increase percent of teens who are screened and connected to mental health supports.</p>	<p>CenCal adolescent depression screening %</p>	<p>CenCal, BHD, PHD</p>	<p>Healthcare Effectiveness Data and Information Set (HEDIS®)</p>	<p>29.5% (2022)</p>	<p>44.3% (By 12/31/25)</p>	<p>Annual</p>	<p>CenCal data in 2025 showed teen depression screening increased to 40.4%.</p> <p>29.5% (2022) 30.7% (2023) 36.2% (2024) 40.4% (as of 7/31/25)</p>

¹ Services Enhancing Family Empowerment (SAFE) is a team-based collaboration involving the Behavioral Health Department, Department of Social Services, Probation, County Office of Education, CAPSLO, and others. SAFE is focused on reducing the number of children who require out-of-home care (foster, group homes, or hospitalization), reducing recidivism among probation-involved youth, and improving school attendance.

							The team is also interested in seeing if CenCal data shows a follow-up mental health appointment within 6 months of a positive screening.
2.1 Conduct analysis to identify sub-populations in most need of focus, including stratification by race, age, region, sex, gender identity, sexual orientation, language, immigration status, and homeless status.	comprehensive report	CenCal, PHD	HEDIS®, CA Healthy Kids Survey, Behavioral Health data	0	1 report	Annual	<p>The team analyzed teen CenCal Health Patient Screening Data, emergency department visit data and California Healthy Kids Survey (CHKS) alongside local Medi-Cal Managed Care Plan, CenCal Health, to identify subpopulations most in need of focus. Data was stratified by race, age, region, gender, sexual orientation, and language. Numbers were too small to be analyzed for homeless patients, so household income was used as a proxy. Findings indicate no single population group is disproportionately impacted.</p> <p><i>The activity language was changed to add "immigration status".</i></p>
2.2 Use analysis to inform initiatives such as expanding access to community-based training and information on preventive mental health strategies and resources for families, community members, and providers.	new provider resources produced	CenCal, BHD, PHD	---	0	TBD	Annual	<p>The team noted MHSA → BHSA changes continue to impact this work.</p> <p>For many of these activities, there may be a need to maximize CYBHI or Medi-Cal revenue and other new funding models to fund prevention work. BHSA prevention grant funds through CDPH anticipated in Summer 2026, but guidance is forthcoming.</p>

<p>2.3 Work closely with providers and partners in public health and education to impart a consistent set of messages and informational campaigns on understanding and addressing critical teen issues, such as youth mental health access, the impact of social media on mental health, domestic violence, and suicide.</p>	<p>adopted toolkit</p>	<p>CenCal, BHD, PHD</p>	<p>---</p>	<p>0</p>	<p>1 toolkit</p>	<p>Annual</p>	<p>The team worked with CenCal, BHD, and PHD on a joint campaign for September's Suicide Prevention Month. Efforts included a CenCal provider email about the importance of teen depression screenings (and the recommended screening tools and billing codes to use). Also, the team collaborated on a joint social media campaign showcasing hotlines and apps to support youth mental health.</p>
<p>2.4 Support the continued expansion of school-based wellness centers in the County that provide mental health services to school-age children and youth.</p>	<p>feasibility assessment</p>	<p>TMHA, BHD</p>	<p>---</p>	<p>0</p>	<p>1 assessment</p>	<p>Annual</p>	<p>The team is beginning discussions to understand current school wellness programs, new state funding mechanisms (CYBHI) at school sites, and key challenges.</p> <p>Local high school wellness centers noted future steps include operating through budgetary constraints, exploring sustainable funding models (billing the state through CYBHI), and implementing peer-level support.</p> <p>New funding for this work has been provided through 2-year BHSA grants to 8 high school wellness centers across 5 districts. This is also planned for inclusion as part of CenCal's community reinvestment strategy.</p>

2.5 Assess and expand the availability of information and referral websites to make navigation of existing mental health services easier for the public.	website review	TMHA, BHD	---	0	1 review	Annual	An updated NavigateSLO resource portal is now online. The team will continue discussions to understand the need for expanded offerings.
2.6 Monitor changes to federal, state and local funding; hold meetings to share impacts and problem solve collectively.	meeting log	CenCal, BHD, PHD	---	0	4 meetings held (2026)	Annual	The team is monitoring potential BHSA funding through CDPH, anticipated by Summer 2026, and shared this update with partners at the MH & SU meeting in April 2026. Mental Health & Substance Use has also now been added as a priority under the County of SLO's Preventative Health Grant .
Objective 3: Reduce older adult suicide deaths by 15%.	Suicide death rates	Public Health	Vital Records	45.8 deaths per 100,000 (85+ years, 2018-2022)	38.9 deaths per 100,000 (85+ years, by 12/31/25)	Annual	Deaths per 100,000 (85+): 45.8 (2018-2022) 45.5 (2019-2023) 41.7 (2020-2024)
3.1 Conduct analysis to identify older adult sub-populations in most need of focus, including stratification by race, age, sex and, if possible, region.	comprehensive report	PHD, Suicide Prevention Council	Vital Records	0	1 report	Annual	Fact sheets published in 2024, 2025, and 2026 to better understand suicide deaths. The analysis included age, sex, mechanism of injury and veteran status. Available at slohealthcounts.org/reports .

<p>3.2 Collaborate with Adult Services Policy Council ASPC/SLO Master Plan on Aging (SLOMPA) to inventory, publish and distribute a resource directory of existing programming for older adults (4.1, 4.2.a.).</p>	<p>assessment</p>	<p>DSS, Adult Services Policy Council, BHD</p>	<p>---</p>	<p>0</p>	<p>1 assessment</p>	<p>Annual</p>	<p>To better align with the Master Plan on Aging, the activity language was changed from "Collaborate with Local Aging and Disability Action Plan workgroup to conduct assessment on older adult programming availability across the county" to "Collaborate with Adult Services Policy Council ASPC/SLO Master Plan on Aging (SLOMPA) to inventory, publish and distribute a resource directory of existing programming for older adults (4.1, 4.2.a.)."</p>
<p>3.3 Develop communication toolkits, provider education on the importance of screening older adults, or programming to reduce isolation, in alignment with MPA strategies (4.1.b., 4.2.b.).</p>	<p>new resources produced</p>	<p>PHD, BHD, Suicide Prevention Council, Adult Services Policy Council</p>	<p>---</p>	<p>0</p>	<p>TBD</p>	<p>Annual</p>	<p>To better align with the Master Plan on Aging, the activity language was changed from "Use analysis to inform initiatives such as the creation of communication toolkits, provider education on the importance of screening older adults, or programming to reduce isolation" to "Develop communication toolkits, provider education on the importance of screening older adults, or programming to reduce isolation, in alignment with MPA strategies (4.1.b., 4.2.b.)."</p>
<p>3.4 Convene with partners to discuss the behavioral health needs specific to aging and older adults (60+ years old); conduct a gap analysis to discern adaptation of community services and supports for this growing county population.</p>	<p>convenings held</p>	<p>BHD</p>	<p>---</p>	<p>0</p>	<p>6 meetings held (2026)</p>	<p>Annual</p>	<p>The activity language was changed from "Establish a task force" to "Convene with partners to discuss the behavioral health needs specific to aging and older adults (60+ years old); conduct a gap analysis to discern adaptation of community services and supports for this growing county population."</p>

							Engage with partners in this space (e.g. SLO Village Movement, Hospice SLO, YMCA, Adult Services Policy Council).
3.5 Monitor changes to federal, state and local funding; hold meetings to share impacts and problem solve collectively.	meeting log	CenCal, BHD, PHD	---	0	4 meetings held (2026)	Annual	Activity added April 2025. Topic discussed at April 2026 MH & SU health team meeting. Mental Health & Substance Use has also now been added as a priority under the County of SLO's Preventative Health Grant .
Objective 4: Reduce drug-related deaths by 20%.	# of drug-related deaths	PHD, Opioid Safety Coalition	Vital Records	105 drug-related deaths (2022)	84 drug-related deaths (2025)	Annual	Drug-related deaths: 105 (2022) 102 (2023) 67 (2024) (below the target!)
4.1 Analyze current data around drug-related deaths (e.g. age, sex, county location, toxicology) and, in particular, emerging trends in opioid overdose deaths.	Assessment	PHD	---	0 (2023)	1 analysis (2024)	Annual	Fact sheets published in 2024, 2025, and 2026 to better understand drug-related deaths (ICD-10 codes X40-44, X60-64, X85, Y10-14). Analysis included analysis on age, sex, region and drugs involved in drug-related deaths. Available at slohealthcounts.org/reports . In 2026, Kratom was also investigated as an emerging concern in SLO County. The team is currently analyzing data and policy options to address this trend.

<p>4.2 Expand awareness and education for providers and hospitals about medication-assisted treatment (MAT), including medication for alcohol use disorder, tobacco use disorder, and opioid use disorder, and substance use disorder (SUD) treatment options.</p>	<p># of new messages</p>	<p>Opioid Safety Coalition (provider collaborative), BHD, PHD</p>	<p>---</p>	<p>0</p>	<p>3 new messages (2025)</p>	<p>Annual</p>	<p>MAT presentation (for opioids) included at BH Provider's Collaborative on February 27, 2025, hosted for local providers by SLOBHD's Suicide Prevention Council & Opioid Safety Coalition.</p> <p>Campaign launched in Fall 2025 with healthcare providers about nicotine replacement therapy (NRT) (for tobacco), including provider coaching and new patient-facing educational materials. Among CenCal members diagnosed with Tobacco Use Disorder, the percentage receiving a prescription for NRT increased from 12% to 24% after the campaign's launch. In practical terms, this represents more than 1,000 CenCal members within SLO County receiving prescriptions for evidence-based quit medications. Published on slohealthcounts.org/success-stories.</p> <p>EMS paramedic community have been trained on MAT (for opioids) through pilot project below.</p>
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<p>4.3 Pilot project where ambulances deliver buprenorphine in the field when responding to an overdose-related call.</p>	<p>adopted procedure</p>	<p>Opioid Safety Coalition, BHD, PHD EMSA</p>	<p>---</p>	<p>0</p>	<p>1 procedure for buprenorphine administration (2028)</p>	<p>Annual</p>	<p>New Opioid Withdrawal protocol has gone into effect (as of January 1, 2026) and allows paramedics to administer buprenorphine in the field when responding to an opioid-related call. All SLO County paramedics have been trained.</p>
<p>4.4 Work closely with partners in public health and education to impart a consistent set of messages and informational campaigns on understanding and addressing substance use.</p>	<p># presentations</p>	<p>Opioid Safety Coalition, BHD, PHD</p>	<p>---</p>	<p>0</p>	<p>2 presentations (per year)</p>	<p>Annual</p>	<p>"Fentanyl High" film screening for high school (12+) students and parents was held on November 5, 2025. The film follows several high school students from Santa Clara County as they share their experiences with Fentanyl poisoning. The film <u>is now available</u> to watch at home.</p>
<p>4.5 Monitor changes to federal, state and local funding; hold meetings to share impacts and problem solve collectively.</p>	<p>meeting log</p>	<p>CenCal, BHD, PHD</p>	<p>---</p>	<p>0</p>	<p>4 meetings held (2026)</p>	<p>Annual</p>	<p>Activity added April 2025. Topic discussed at the October 2025 and April 2026 MH & SU health team meetings. Mental Health & Substance Use has also now been added as a priority under the County of SLO's <u>Preventative Health Grant</u>.</p>